

If 'No', grade is 2.

If 'Yes', proceed to next question.

Do you have to stop for breath when walking at your own pace on level ground?

Yes _____ No _____ (59)

If 'No', grade is 3.

If 'Yes', proceed to next question.

Are you short of breath on washing or dressing?

Yes _____ No _____ (60)

If 'No', grade is 4.

If 'Yes', grade is 5.

B. Grd. _____ (61)

G. OTHER ILLNESSES AND ALLERGY HISTORY

Do you have a heart condition for which you are under a doctor's care?

Yes _____ No _____ (62)

Have you ever had asthma?

Yes _____ No _____ (63)

If 'Yes', did it begin:

(1) _____ Before age 30

(2) _____ After age 30

If 'Yes' before 30 did you have asthma before ever going to work in a textile mill?

Yes _____ No _____ (64)

Have you ever had hay fever or other allergies (other than above)?

Yes _____ No _____ (65)

H. TOBACCO SMOKING*

Do you smoke?

Record 'Yes', if regular smoker up to one month ago (Cigarettes, cigar or pipe)

Yes _____ No _____ (66)