ABBREVIATED RESPIRATORY QUESTIONNAIRE

A. IDENTIFICATION DATA

PLANT _____

DAY MONTH YEAR
(figures) (last 2 digits)

NAME _____ DATE OF INTERVIEW _____
(Surname)

_____ DATE OF BIRTH _____
(First Names)

M F

ADDRESS _____ AGE ____ (8, 9) SEX _____(10)

RACE (11) (Check all that apply)

1. White ___
2. Black or African American ___
3. Asian ___
4. Hispanic or Latino ___
5. American Indian or Alaska Native ___
6. Native Hawaiian or Other Pacific Islander ___

INTERVIEWER: 1 2 3 4 5 6 7 8 (12)