

5. Have you ever been told that you have asthma, hayfever, or sinusitis?

Yes\_\_ No\_\_

6. Have you ever been told that you have emphysema, bronchitis, or any other respiratory problems?

Yes\_\_ No\_\_

7. Have you ever been told you had hepatitis?

Yes\_\_ No\_\_

8. Have you ever been told that you had cirrhosis?

Yes\_\_ No\_\_

9. Have you ever been told that you had cancer?

Yes\_\_ No\_\_

10. Have you ever had arthritis or joint pain?

Yes\_\_ No\_\_

11. Have you ever been told that you had high blood pressure?

Yes\_\_ No\_\_

12. Have you ever had a heart attack or heart trouble?

Yes\_\_ No\_\_

*B-1. Medical History Update*

1. Have you been in the hospital as a patient any time within the past year?

Yes\_\_ No\_\_

If so, for what condition? \_\_\_\_\_

\_\_\_\_\_

2. Have you been under the care of a physician during the past year?

Yes\_\_ No\_\_

If so, for what condition? \_\_\_\_\_

\_\_\_\_\_