

RESPIRATORY HEALTH AND DISEASE – RDQ
Target Group: SPs 1+

BOX 1

CHECK ITEM RDQ.005A:
IF SP AGE < 40, GO TO RDQ.070.
OTHERWISE, CONTINUE

RDQ.031 {Do you/Does SP} usually cough on most days for **3 consecutive months or more** during the year?

- YES 1
- NO 2 (RDQ.050)
- REFUSED 7 (RDQ.050)
- DON'T KNOW 9 (RDQ.050)

RDQ.040 For how many years {have you/has SP} had this cough?

IF LESS THAN 1 YEAR, ENTER 1

ENTER NUMBER OF YEARS

- REFUSED 777
- DON'T KNOW 999

RDQ.050 {Do you/Does SP} bring up phlegm on most days for **3 consecutive months or more** during the year?

- YES 1
- NO 2 (RDQ.070)
- REFUSED 7 (RDQ.070)
- DON'T KNOW 9 (RDQ.070)

RDQ.060 For how many years {have you/has SP} had trouble with phlegm (flem)?

IF LESS THAN 1 YEAR, ENTER 1

ENTER NUMBER OF YEARS

- REFUSED 777
- DON'T KNOW 999

RDQ.070 In the **past 12 months**, {have you/has SP} had wheezing or whistling in {your/his/her} chest?

- YES 1
- NO 2 (RDQ.140)
- REFUSED 7 (RDQ.140)
- DON'T KNOW 9 (RDQ.140)

RDQ.080 [In the **past 12 months**], how many attacks of wheezing or whistling {have you/has SP} had?

IF 12 OR MORE EPISODES, ENTER 12

CAPI INSTRUCTION:

HARD EDIT: RANGE EQUALS 1 TO 12.

□□□

ENTER NUMBER OF EPISODES

REFUSED 77
DON'T KNOW 99

RDQ.090 [In the **past 12 months**], how often, **on average**, has {your/SP's} sleep been disturbed because of wheezing? Would you say this happens . . .

never, 0
1 or more nights per week, or 1
less than 1 night per week? 2
REFUSED 7
DON'T KNOW 9

RDQ.100 [In the **past 12 months**], has {your/SP's} chest sounded wheezy during or after exercise or physical activity?

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

BOX 3
OMITTED

RDQ.120 [In the **past 12 months**], how many times {have you/has SP} gone to the doctor's office or the hospital emergency room for one or more of these attacks of wheezing or whistling?

IF NEVER, ENTER 0

□□□

ENTER NUMBER

CAPI INSTRUCTION:

SOFT EDIT: IF RESPONSE >20, THEN DISPLAY "UNLIKELY RESPONSE. PLEASE VERIFY. (RDQ.150)."

HARD EDIT: CHECK: RDQ.120 – RANGE ERROR, THE VALID RANGE IS 0-50.

REFUSED 77
DON'T KNOW 99

RDQ.134 [In the **past 12 months**], {have you/has SP} taken any medication, prescribed by a doctor, for wheezing or whistling?

- YES 1
- NO 2
- REFUSED 7
- DON'T KNOW 9

RDQ.135 During the **past 12 months**, how much did {you/SP} limit {your/his/her} usual activities due to wheezing or whistling? Would you say...

- not at all, 1
- a little, 2
- a fair amount, 3
- a moderate amount, or 4
- a lot? 5
- REFUSED 7
- DON'T KNOW 9

BOX 4

CHECK ITEM RDQ.136:
IF SP AGE = 6-69 YEARS, CONTINUE.
OTHERWISE, GO TO RDQ.140.

RDQ.137 During the **past 12 months**, how many days of work or school did {you/SP} miss due to wheezing or whistling?

- NONE 0
- 1 TO 7 1
- 8 TO 30 2
- 31 PLUS 3
- REFUSED 7
- DON'T KNOW 9

RDQ.140 [In the **past 12 months**], {have you/has SP} had a dry cough at night **not counting** a cough associated with a cold or chest infection lasting **14 days** or more?

- YES 1
- NO 2
- REFUSED 7
- DON'T KNOW 9

AGQ.030 **During the past 12 months, {have you/has SP} had an episode of hay fever?**

- YES 1
- NO 2
- REFUSED 7
- DON'T KNOW 9