



SPIROMICS-HF RESPIRATORY DISEASE AND SMOKE EXPOSURE QUESTIONNAIRE - BRIEF

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FORM CODE: RDB
VERSION: 1.0 02/06/2020

Event _____

0a) Date of Collection / /

0b) Staff Code

Instructions: This form should be completed during the participant's Heart Failure visit ONLY if it is more than 3 months after the completion of the RDF form collected at SPIROMICS Visit 5. Please answer all of the questions.

RDF questions 1 through 15 have been removed.

I would now like to ask you detailed questions about your experiences with respiratory disease and smoke exposure.

These questions relate to respiratory conditions.

16) Since your last SPIROMICS visit, have you been newly diagnosed by a doctor or other health professional with asthma?

No₀ → **Go to 17**

Yes₁

Don't know₂ → **Go to 17**

16a) Since your last SPIROMICS visit, have you received medical treatment, taken medications, or used an inhaler for asthma?

No₀

Yes₁

17) Since your last SPIROMICS visit, have you had any hay fever (allergy involving the nose and/or eyes)?

No₀ → **Go to 19**

Yes₁

Don't know₂ → **Go to 19**

17a) Was it diagnosed by a doctor or other health professional?

No₀

Yes₁

Don't know₂

17b) Since your last SPIROMICS visit, have you received medical treatment, taken medications, or used a nasal spray for hay fever?

No₀

Yes₁

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RDF questions 18, 18a, and 18b have been removed.

19) Since your last SPIROMICS visit, have you had pneumonia or bronchopneumonia?

- No₀ → **Go to 20**
- Yes₁
- Don't know₂ → **Go to 20**

19a) Was it diagnosed by a doctor or other health professional?

- No₀
- Yes₁
- Don't know₂

19b) How many times have you had pneumonia or bronchopneumonia since your last SPIROMICS visit? times

20) Since your last SPIROMICS visit, have you been newly diagnosed by a doctor or other health professional with chronic bronchitis?

- No₀
- Yes₁
- Don't know₂

RDF question 20a has been removed.

21) Since your last SPIROMICS visit, have you been newly diagnosed by a doctor or other health professional with emphysema?

- No₀
- Yes₁
- Don't know₂

RDF question 21a has been removed.

22) Since your last SPIROMICS visit, have you been newly diagnosed by a doctor or other health professional with COPD (chronic obstructive pulmonary disease)?

- No₀ → **Go to 23**
- Yes₁
- Don't know₂ → **Go to 23**

22a) Since your last SPIROMICS visit, have you received medical treatment, taken medications, or used an inhaler for COPD?

- No₀
- Yes₁

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23) Since your last SPIROMICS visit, have you been newly diagnosed by a doctor or other health professional with sleep apnea?

- No₀ → **Go to 24**
- Yes₁
- Don't know₂ → **Go to 24**

23a) Since your last SPIROMICS visit, have you received any treatment for sleep apnea?

- No₀ → **Go to 24**
- Yes₁

23b) Do you use a CPAP or BIPAP?

- No₀
- Yes₁

23c) Since your last SPIROMICS visit, have you had surgery for sleep apnea?

- No₀
- Yes₁

23d) Did you have some other treatment for sleep apnea?

- No₀ → **Go to 24**
- Yes₁

23e) If Yes, please describe the treatment: _____

24) Since your last SPIROMICS visit, have you had...

24a) Any other chest illnesses?

- No₀ → **Go to 24b**
- Yes₁

24a1) If Yes, please specify: _____

24b) Any chest operations?

- No₀ → **Go to 24c**
- Yes₁

24b1) If Yes, please specify: _____

24c) Any chest injuries?

- No₀ → **Go to 25**
- Yes₁

24c1) If Yes, please specify: _____

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These questions ask you about some common environmental exposures.

Cigarette Smoking

25) In the last 12 months, have you smoked cigarettes?

- No₀ → **Go to 30**
 Yes₁

26) Do you still smoke cigarettes as of one month ago?

- No₀ → **Go to 29**
 Yes₁

RDF questions 27, 27a, 27b, and 27c have been removed.

28) How many cigarettes do you smoke per day now?

per day

29) On average, over the last 12 months, how many cigarettes did you smoke per day?

per day

30) Have you ever smoked menthol cigarettes?

- No₀ → **Go to 32**
 Yes₁

30a) For how long have you or did you smoke menthol cigarettes?

years

RDF questions 31a through 31e have been removed.

Pipe Smoking

32) In the last 12 months, have you smoked a pipe regularly?

- No₀ → **Go to 36**
 Yes₁

33) Do you smoke a pipe (as of one month ago)?

- No₀ → **Go to 35**
 Yes₁

34) How much pipe tobacco do you smoke per day now?

oz. per day

35) On average, over the last 12 months, how many ounces of tobacco did you smoke via a pipe per week?

oz. per week

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Cigar Smoking

36) In the last 12 months, have you smoked cigars regularly? (Regularly means more than 1 cigar per week in the last 12 months)

No₀ → **Go to 40**

Yes₁

37) Do you now smoke cigars (as of one month ago)?

No₀ → **Go to 39**

Yes₁

38) How many cigars do you smoke per day now?

per day

39) On average, over the last 12 months, how many cigars did you smoke per week?

per week

RDF questions 40 through 79 have been removed.

I would now like to ask you about any smoke exposure that may have occurred as a result of marijuana use. Please remember that all information that you give us is confidential, and only certified SPIROMICS personnel will have access to this information.

80) Since your last SPIROMICS visit, have you smoked marijuana (cannabis, pot, or hashish)?

No₀ → **Go to End**

Yes₁

81) Since your last SPIROMICS visit, have you smoked marijuana regularly (five times or more in a given year)?

No₀

Yes₁

82) On average, since your last SPIROMICS visit, about how many joints per week do (did) you smoke?

joints per week

83) On average, since your last SPIROMICS visit, about how many pipes per week do (did) you smoke?

pipes per week

END OF FORM