BASELINE RESPIRATORY DISEASE AND SMOKE EXPOSURE QUESTIONNAIRE, RDS QUESTION BY QUESTION (QxQ), VERSION 3.0

I. GENERAL INSTRUCTIONS

The Baseline Respiratory Disease and Smoke Exposure Questionnaire (RDS) is to be completed by the study coordinator during the participant's baseline clinic visit.

Please answer every question on this form. *NOTE: All response options in the paper form may not appear in CDART (e.g., 'Don't know', 'Declines to answer', etc.). Beside each item input is a small double bracket icon which looks like this: ›› . Clicking this icon displays a field dialogue box in which the "Field Status" selection menu allows you to choose from the following options: 'Refused', 'No response', 'Doesn't know', 'Not applicable', 'Maximum value', 'Minimum value', and 'Missing'.* **See MOP 6 – Section 3.2 for additional instructions on how to select a Field Status option.**

Whenever numerical responses are required, enter the number so that the last digit appears in the rightmost box. Enter leading zeroes where necessary to fill all boxes (e.g., enter 0.25 rather than .25).

II. INSTRUCTIONS FOR INDIVIDUAL ITEMS

Header Information: Consists of key fields which uniquely identify each subject and recorded occurrence of a form. For the "ID NUMBER", record the 3-character, 6-digit number assigned to the specific participant. For the "Event", record if this is happening at Baseline or another event.

Item 0a.   Record the date the data was collected or abstracted in the MM/DD/YYYY format either by selecting the pop-up calendar in CDART or entering the date in the space provided.

Item 0b.   Record the SOURCE staff code of the person who collected or abstracted the data. This code is assigned to each person at each site by the GIC. If you do not have a staff code and are collecting SOURCE data, please contact the GIC in order to receive your own individual staff code.

NOTE: Read the script preceding Item 1 to the participant.

Respiratory Symptoms

Item 1.   Select only one option among the two possible choices. If 'No' is selected, go to Item 2.

    Item 1a.   Select only one option among the two possible choices.

Items 2-3. Select only one option among the two possible choices.

If 'Yes' to Item 1 and/or Item 2 and/or Item 3, answer Items 3a and 3b.

    Item 3a.   Select only one option among the two possible choices.

    Item 3b.   Record the number of years the participant had this cough in the space provided.

Item 4.   Select only one option among the two possible choices. If 'No' is selected, go to Item 5.

Item 4a. Select only one option among the two possible choices.

Item 4b. Select only one option among the six possible choices. If 'Other' is selected, go to Item 4b1.

Item 4b1. Specify other color of phlegm brought up from the participant's chest in the space provided.

Items 5-6. Select only one option among the two possible choices.

<mark>**If 'Yes' to Item 4 and/or Item 5 and/or Item 6, answer Items 6a and 6b.**</mark>

Item 6a. Select only one option among the two possible choices.

Item 6b. Record the number of years the participant had trouble with phlegm in the space provided.

Item 7. Select only one option among the two possible choices. If 'No' is selected, go to Item 8.

Item 7a. Record the number of episodes the participant had in the last 12 months in the space provided.

Item 7b. Record the number of years the participant had at least one such episode per year in the space provided.

Item 8. Select only one option among the two possible choices. If 'No' is selected, go to Item 11.

Item 8a. Record the age the participant first had wheezing or whistling in their chest in the space provided.

Item 9. Select only one option among the two possible choices. If 'No' is selected, go to Item 10.

Item 9a. Record the age the participant first had an attack of wheezing or whistling in their chest that made them feel short of breath in the space provided.

Items 9b-9c. Select only one option among the two possible choices.

Item 10. Select only one option among the two possible choices. If 'No' is selected, go to Item 11.

Item 10a.

Items 10a1-10a4. Select only one option among the two possible choices.

Items 11-12. Select only one option among the two possible choices.

<mark>**Items 13-14 are about symptoms that occur when the participant does not have a cold or the flu.**</mark>

Items 13-14. Select only one option among the two possible choices.

Item 15. Select only one option among the two possible choices. If 'No' is selected, go to Item 16.

Item 15a. Describe the nature of the condition that causes the participant the inability to walk in the space provided.

Respiratory Conditions

Item 16. Select only one option among the two possible choices. If 'No' is selected, go to Item 17.

   Item 16a. Record the age the participant's asthma started in the space provided.

   Item 16b. Select only one option among the two possible choices.

   Item 16c. Select only one option among the two possible choices. If 'Yes' is selected, go to Item 16e.

   Item 16d. Record the age the participant's asthma stopped in the space provided.

   Item 16e. Select only one option among the two possible choices.

Item 17. Select only one option among the two possible choices. If 'No' is selected, go to Item 18.

   Item 17a. Record the age the participant's hay fever started in the space provided.

   Item 17b. Select only one option among the two possible choices.

   Item 17c. Select only one option among the two possible choices. If 'Yes' is selected, go to Item 17e.

   Item 17d. Record the age the participant's hay fever stopped in the space provided.

   Item 17e. Select only one option among the two possible choices.

Item 18. Select only one option among the two possible choices. If 'No' is selected, go to Item 19.

   Item 18a. Select only one option among the two possible choices.

   Item 18b. Record the age the participant first had bronchitis in the space provided.

   Item 18c. Record the number of times the participant has had bronchitis in the space provided.

Item 19. Select only one option among the two possible choices. If 'No' is selected, go to Item 20.

   Item 19a. Select only one option among the two possible choices.

   Item 19b. Record the age the participant first had pneumonia or bronchopneumonia in the space provided.

   Item 19c. Record the number of times the participant has had pneumonia or bronchopneumonia in the space provided.

Item 20. Select only one option among the two possible choices. If 'No' is selected, go to Item 21.

   Item 20a. Select only one option among the two possible choices.

   Item 20b. Record the age the participant's chronic bronchitis started in the space provided.

   Items 20c-20d. Select only one option among the two possible choices.

Item 21.   Select only one option among the two possible choices. If 'No' is selected, go to Item 22.

    Item 21a.   Select only one option among the two possible choices.

    Item 21b.   Record the age the participant's emphysema started in the space provided.

    Items 21c-21d.   Select only one option among the two possible choices.

Item 22.   Select only one option among the two possible choices. If 'No' is selected, go to Item 23.

    Item 22a.   Select only one option among the two possible choices.

    Item 22b.   Record the age the participant's COPD started in the space provided.

    Items 22c-22d.   Select only one option among the two possible choices.

Item 23.   Select only one option among the two possible choices. If 'No' is selected, go to Item 24.

    Item 23a.   Select only one option among the two possible choices.

    Item 23b.   Record the age the participant's sleep apnea started in the space provided.

    Items 23c-23d.   Select only one option among the two possible choices.

Item 24.

    Items 24a-24c.   Select only one option among the two possible choices.

        Items 24a1-24c1.   If 'Yes' to Item 24a, 24b, and/or 24c, specify any other chest illnesses (24a1), chest operations (24b1), and/or chest injuries (24c1), respectively, in the spaces provided.

Family History of Respiratory Disease

Item 25.

    Item 25a.   Select only one option among the two possible choices for Items 25a1-25a5.

    Item 25b.   Select only one option among the two possible choices for Items 25b1-25b5.

Item 26.

    Items 26a-26b.   Select only one option among the two possible choices.

Cigarette Smoking

Item 27.   Select only one option among the two possible choices. If 'No' is selected, go to Item 34.

    Item 27a.   Select only one option among the two possible choices. If 'No' is selected, go to Item 28.

    Item 27b.   Record the number of years the participant has smoked or did smoke menthol cigarettes in the space provided.

Item 28.   Record the age the participant first started smoking cigarettes regularly in the space provided.

Item 29.   Select only one option among the two possible choices. If 'No' is selected, go to Item 31.

Item 30.   Record the number of cigarettes the participant smokes per day now in the space provided. Then, go to Item 33.

Item 31.   Record the age the participant completely stopped smoking cigarettes in the space provided. Then, go to Item 31a.

   Item 31a.   Record the date the participant stopped smoking cigarettes completely in the MM/DD/YYYY format either by selecting the pop-up calendar in CDART or entering the date in the space provided.

Item 32.   Record the average number of cigarettes the participant smoked per day in the space provided. Then, go to Item 34.

Item 33.   Record the approximate number of cigarettes the participant smoked in the last 24 hours in the space provided.

Pipe Smoking

Item 34.   Select only one option among the two possible choices. If 'No' is selected, go to Item 40.

Item 35.   Record the age the participant first started smoking a pipe regularly in the space provided.

Item 36.   Select only one option among the two possible choices. If 'No' is selected, go to Item 38.

Item 37.   Record the number of ounces of pipe tobacco the participant smokes per day now in the space provided. Then, go to Item 40.

Item 38.   Record the age the participant completely stopped a pipe in the space provided.

Item 39.   Record the average number of ounces of pipe tobacco the participant smoked per week in the space provided.

Cigar Smoking

Item 40.   Select only one option among the two possible choices. If 'No' is selected, go to Item 46.

Item 41.   Record the age the participant first started smoking cigars regularly in the space provided.

Item 42.   Select only one option among the two possible choices. If 'No' is selected, go to Item 44.

Item 43.   Record the number of cigars the participant smokes per day now in the space provided. Then, go to Item 46.

Item 44.   Record the age the participant completely stopped smoking cigars in the space provided.

Item 45.   Record the average number of cigars the participant smoked per week in the space provided.

Hookah Smoking

Item 46. Select only one option among the two possible choices. If 'No' is selected, go to Item 52.

Item 47. Record the age the participant first started smoking hookah (waterpipe) regularly in the space provided.

Item 48. Select only one option among the two possible choices. If 'No' is selected, go to Item 50.

Item 49. Record the number of minutes the participant smokes hookah (waterpipe) per day now in the space provided. Then, go to Item 52.

Item 50. Record the age the participant completely stopped smoking hookah (waterpipe) in the space provided.

Item 51. Record the average number of hookah (waterpipe) smoking sessions the participant had per week in the space provided.

Heat-Not-Burn (HNB) Use

Item 52. Select only one option among the two possible choices. If 'No' is selected, go to Item 59.

Item 53. Select only one option among the nine possible choices. If 'Other' is selected, go to Item 53a.

Item 53a. Specify other HNB product the participant does or did use in the space provided.

Item 54. Record the age the participant first started using HNB regularly in the space provided.

Item 55. Select only one option among the two possible choices. If 'No' is selected, go to Item 57.

Item 56. Record the number of tobacco sticks/capsules the participant uses per day now in the space provided. Then, go to Item 59.

Item 57. Record the age the participant completely stopped using HNB in the space provided.

Item 58. Record the average number of tobacco sticks/capsules the participant used per week in the space provided.

Smokeless Tobacco Use

Item 59. Select only one option among the two possible choices. If 'No' is selected, go to Item 66.

Item 60. Select only one option among the four possible choices. If 'Other' is selected, go to Item 60a.

Item 60a. Specify other smokeless tobacco product the participant does or did use in the space provided.

Item 61. Record the age the participant first started using smokeless tobacco regularly in the space provided.

Item 62. Select only one option among the two possible choices. If 'No' is selected, go to Item 64.

Item 63. Record the number of times the participant uses smokeless tobacco per day now in the space provided. Then, go to Item 66.

Item 64.   Record the age the participant completely stopped using smokeless tobacco in the space provided.

Item 65.   Record the average number of times the participant used smokeless tobacco per week in the space provided.

Second-Hand Smoke Exposures

Item 66.   Select only one option among the three possible choices.

Item 67.   Record the number of years Item 66 has been the participant's approach to smoking in their home in the space provided.

Item 68.   Select only one option among the two possible choices. If 'No' is selected, go to Item 72.

Item 69.   Select only one option among the two possible choices. If 'No' is selected, go to Item 71.

Item 70.   Record the number of people who smoke in the participant's household in the space provided.

Item 71.   Record the total number of years the participant lived in the same household with someone else who smokes tobacco products since age 18 in the space provided.

Item 72.   Select only one option among the two possible choices.

Item 73.   Select only one option among the two possible choices. If 'No' is selected, go to Item 75.

Item 74.

    Items 74a-74c.   Use the check boxes to answer all that apply to the adults in the participant's household who smoked at home.

      Item 74c1.   If 'Other' is checked in Item 74c, specify other adult in the participant's household who smoked at home in the space provided.

Item 75.   Record the total number of years the participant lived in the same household with someone else who smoked tobacco products growing up until age 18 in the space provided.

Smoke Exposures in Last 7 Days

Item 76.   Select only one option among the two possible choices. If 'No' is selected, go to Item 84.

Item 77.   Record the total number of hours the participant was exposed to someone else's tobacco smoke at home during the last 7 days in the space provided.

Items 78-83.   Select only one option among the two possible choices.

Item 84.   Select only one option among the two possible choices. If 'No' is selected, go to Item 88.

Item 85.   Record the total number of hours the participant was exposed to someone else's tobacco smoke in another person's home in the last 7 days in the space provided.

Items 86-87.   Select only one option among the two possible choices.

Item 88. Select only one option among the two possible choices. If 'No' is selected, go to Item 90.

Item 89. Record the total number of hours the participant spent traveling in a car while someone else was smoking tobacco in the last 7 days in the space provided.

Smoke Exposure at the Workplace

Item 90. Select only one option among the two possible choices. If 'No' is selected, go to Item 101.

Item 91. Select only one option among the two possible choices. If 'No' is selected, go to Item 95.

Item 92. Record the total number of hours the participant was exposed to someone else's tobacco smoke inside their workplace in the last 7 days in the space provided.

Items 93-94. Select only one option among the two possible choices.

Item 95. Select only one option among the two possible choices. If 'No' is selected, go to Item 100.

Item 96. Record the number of times the participant walked through or past the area in Item 95 while others were smoking in the last 7 days in the space provided.

Item 97. Record the total number of hours the participant spent in an outdoor smoking area while people were smoking during the last 7 days in the space provided.

Item 98. Select only one option among the two possible choices.

Item 99. Record the number of hours the participant spent near coworkers who were smoking tobacco outdoors in the last 7 days in the space provided.

Item 100. Select only one option among the two possible choices.

Smoke Exposure at an Outdoor Location or Any Other Location

Item 101. Select only one option among the two possible choices. If 'No' is selected, go to Item 105.

Item 102. Specify the location in Item 101 in the space provided.

Item 103. Select only one option among the two possible choices.

Item 104. Record the total number of hours the participant was exposed to someone else's tobacco smoke in the location specified in Item 102 in the last 7 days in the space provided.

Item 105. Select only one option among the two possible choices. If 'No' is selected, go to Item 109.

Item 106. Record the total number of hours the participant was exposed to someone else's tobacco smoke in a bar or other place of entertainment in the last 7 days in the space provided.

Items 107-108. Select only one option among the two possible choices.

Item 109. Select only one option among the two possible choices. If 'No' is selected, go to Item 112.

Item 110. Specify the location in Item 109 in the space provided.

Item 111.   Record the total number of hours the participant was exposed to someone else's tobacco smoke in the location specified in Item 110 in the last 7 days in the space provided.

Cannabis (Marijuana, Hashish) Use

NOTE: Read the script preceding Item 112 to the participant.

Item 112.

   Items 112a-112c.   Select only one option among the three possible choices.

      Item 112c1.   Specify other reason for using marijuana (cannabis, pot, or hashish) if 'Yes' is selected in Item 112c.

Item 113.

   Items 113a-113d.   Select only one option among the four possible choices.

      Item 113d1.   Specify other way used marijuana, even one time, if 'Yes' is selected in Item 113d.

<mark>**If 'No' to Item 113a and 113b, Go to End of the form, and Save and Close the form.**</mark>

<mark>**If 'Yes' to Item 113a and/or 113b, go to Items 114 – 118.**</mark>

Item 114.   Record the age the participant first tried inhaled marijuana in the space provided.

Item 115.   Record the number of years the participant used inhaled marijuana in the space provided. *NOTE: Sum any non-consecutive years.*

Items 116-117.   Select only one option among the seven possible choices.

Item 118.   Select only one option among the five possible choices.

Select **Save and Close** at the bottom of the page/screen.