D. Are you suffering from or have you ever suffered from:

a. Epilepsy (or fits, seizures, convulsions)?	[__]	[__]
b. Rheumatic fever?	[__]	[__]
c. Kidney disease?	[__]	[__]
d. Bladder disease?	[__]	[__]
e. Diabetes?	[__]	[__]
f. Jaundice?	[__]	[__]

19. CHEST COLDS AND CHEST ILLNESSES

19A. If you get a cold, does it usually go to your chest? (Usually means more than 1/2 the time) — 1. Yes __ 2. No __ 3. Don't get colds __

20A. During the past 3 years, have you had any chest illnesses that have kept you off work, indoors at home, or in bed? — 1. Yes __ 2. No __

IF YES TO 20A:

B. Did you produce phlegm with any of these chest illnesses? — 1. Yes __ 2. No __ 3. Does Not Apply __

C. In the last 3 years, how many such illnesses with (increased) phlegm did you have which lasted a week or more? — Number of illnesses __ No such illnesses __

21. Did you have any lung trouble before the age of 16? — 1. Yes __ 2. No __

22. Have you ever had any of the following?

1A. Attacks of bronchitis? — 1. Yes __ 2. No __

IF YES TO 1A:

B. Was it confirmed by a doctor? — 1. Yes __ 2. No __ 3. Does Not Apply __

C. At what age was your first attack? — Age in Years __ Does Not Apply __

2A. Pneumonia (include bronchopneumonia)? — 1. Yes __ 2. No __

IF YES TO 2A:

B. Was it confirmed by a doctor? — 1. Yes __ 2. No __ 3. Does Not Apply __

C. At what age did you first have it? — Age in Years __ Does Not Apply __