28. Have you ever had a thyroid problem?
   [ ] Yes
   [ ] No

29. Have you ever had a seizure or fits?
   [ ] Yes
   [ ] No

30. Have you ever had a stroke (cerebrovascular accident)?
   [ ] Yes
   [ ] No

31. Have you ever had a ruptured eardrum or a serious hearing problem?
   [ ] Yes
   [ ] No

32. Do you now have a claustrophobia, meaning fear of crowded or closed in spaces or any psychological problems that would make it hard for you to wear a respirator?
   [ ] Yes
   [ ] No

The following questions pertain to reproductive history.

33. Have you or your partner had a problem conceiving a child?
   [ ] Yes
   [ ] No

   If yes, specify:
   [ ] Self
   [ ] Present mate
   [ ] Previous mate