If 'No', grade is 2.
If 'Yes', proceed to next question.

Do you have to stop for breath when walking at your own pace on level ground?  
Yes _______ No _______ (59)

If 'No', grade is 3.
If 'Yes', proceed to next question.

Are you short of breath on washing or dressing?  
Yes _______ No _______ (60)

If 'No', grade is 4.
If 'Yes', grade is 5.

B. Grd. ______________ (61)

G. OTHER ILLNESSES AND ALLERGY HISTORY

Do you have a heart condition for which you are under a doctor's care?  
Yes _______ No _______ (62)

Have you ever had asthma?
Yes _______ No _______ (63)

If 'Yes', did it begin:
(1) _______ Before age 30
(2) _______ After age 30

If 'Yes' before 30 did you have asthma before ever going to work in a textile mill?

Yes _______ No _______ (64)

Have you ever had hay fever or other allergies (other than above)?

Yes _______ No _______ (65)

H. TOBACCO SMOKING*

Do you smoke?

Record 'Yes', if regular smoker up to one month ago (Cigarettes, cigar or pipe)

Yes _______ No _______ (66)