# Control of Asbestos Regulations 2012
## Regulation 22(1)
### Respiratory Symptom Questionnaire - Licensed Work

#### Respiratory Symptoms

1. Have you ever, or since your last examination had:
   - (a) an injury or operation affecting your chest? [ ] Yes [ ] No
   - (b) pleurisy? [ ] Yes [ ] No
   - (c) pulmonary tuberculosis [ ] Yes [ ] No

2. Do you usually cough during the day (or at night when on night work) [ ] Yes [ ] No

3. Do you usually bring up any phlegm from your chest on most days (or nights) for as much as three months each year? [ ] Yes [ ] No

4. Do you usually get short of breath when walking with people of your own age on level ground? [ ] Yes [ ] No

5. During the past three years, or since your last examination, have you had any chest illness, which has kept you from your usual activities for as much as a week? [ ] Yes [ ] No  
   *If NO, go to question 8*

6. Did you bring up more phlegm than usual in any of these illnesses? [ ] Yes [ ] No  
   *If NO, go to question 8*

7. How many illnesses like this have you had in the past three years or since your last examination? [ ]

#### Smoking

8. Have you ever smoked?  
   *If NO, please go to Q11 Occupational History on next page* [ ] Yes [ ] No

9. (a) Do you smoke at present? [ ] Yes [ ] No
   (b) Have you given up smoking in the last month? [ ] Yes [ ] No
   (c) How old were you when you started smoking regularly? Enter age in years [ ]
   *A regular smoker is defined as one who has smoked as much as one cigarette a day, one small cigar a day or one ounce of tobacco a month, for as long as a year*
   (d) How many manufactured cigarettes do you usually smoke or were you smoking per day? [ ]
   (e) How much tobacco do you usually smoke or were you smoking per day? Enter number of grams (1 ounce = 28 grams) [ ]
   (f) How much pipe tobacco do you usually smoke or were you smoking per day? Enter number of grams (1 ounce = 28 grams) [ ]
   (g) How many small cigars do you usually smoke or were you smoking per day? [ ]
   (h) How many large cigars do you usually smoke or were you smoking per week? [ ]

**Ex-Smokers only**

10. How old were you when you last smoked? [ ]
11. Occupational History (Mandatory on first examination - ie date started, date finished, employer name and address, job details)