

ATBC STUDY
INITIAL FORM 2

(Name and Study ID
are on a sticker)

1. Date of examination ____/____/198____, full hours ____
2. Height _____ cm
3. Weight _____ kg
4. Blood pressure ____/____ mmHg
5. Pulse ____/30 s
6. Sight: without glasses ____ r/l ____
with glasses ____ r/l ____

7. DYSPNOEA

No Yes

- | | | | |
|-----|--|---|---|
| 7.1 | Are you troubled by shortness of breath when hurrying on level ground or walking up a slight hill? (If "No", proceed to item 8). | 0 | 1 |
| 7.2 | Do you get shortness of breath walking with other people of your own age on level ground? (If "No", proceed to item 8). | 0 | 2 |
| 7.3 | Do you have to stop because shortness of breath when walking at your own pace on level ground? (If "No", proceed to item 8). | 0 | 1 |
| 7.4 | Do you have shortness of breath even when just standing and e.g. washing or dressing? | 0 | 2 |

8. CHEST PAIN ON EFFORT QUESTIONS

- 8.1 Have you ever had pain or discomfort in your chest?

- 1 No
- 2 Yes (proceed to question 8.3)

- 8.2 Have you ever had pressure or heaviness in your chest?

- 1 No (proceed to item 9)
- 2 Yes

- 8.3 Do you get it when you walk uphill or hurry on level ground?

- 1 No (proceed to question 8.9)
- 2 Yes

3 Never hurries or walks uphill

8.4 Do you get it when you walk at an ordinary pace on the level?

- 1 No (if 8.3 = 3, proceed to question 8.9)
- 2 Yes

8.5 What do you do if you get it while you are walking? (Record "Stop or slow down if subject carries on after taking nitroglycerine.)

- 1 Stop or slow down
- 2 Carry on (proceed to question 8.8)

8.6 If you stand still, what happens to it?

- 1 Relieved
- 2 Not relieved (proceed to question 8.8)

8.7 How soon?

- 1 10 minutes or less
- 2 More than 10 minutes

8.8 Is the symptom localized to:

	No	Yes
1 Sternum (upper or middle)	1	2
2 Sternum (lower)	1	2
3 Left anterior chest	1	2
4 Left arm	1	2
5 Other (If yes, shade the location)		1 2

8.9 Have you ever had a severe pain across the front of your chest lasting for half an hour or more?

- 1 No
- 2 Yes

9. INTERMITTENT CLAUDICATION QUESTIONS

9.1 Do you get pain in either leg on walking?

- 1 No (proceed to item 10)
- 2 Yes

9.2 Does this pain ever begin when you are standing still or sitting?

- 1 No
- 2 Yes (proceed to item 10)

9.3 In what part of your leg do you feel it?

- 1 Pain includes calf/calves
- 2 Pain does not include calf/calves (proceed to item 10)

9.4 Do you get it if you walk uphill or hurry?

- 1 No (proceed to item 10)
- 2 Yes
- 3 Never hurries or walks uphill

9.5 Do you get it if you walk at an ordinary pace on level ground?

- 1 No
- 2 Yes

9.6 Does the pain ever disappear while you are walking?

- 1 No
- 2 Yes (proceed to item 10)

9.7 What do you do if you get it when you are walking?

- 1 Stop or slow down
- 2 Carry on (proceed to item 10)

9.8 What happens to it if you stand still?

- 1 Relieved
- 2 Not relieved (proceed to item 10)

9.9 How soon?

- 1 10 minutes or less
- 2 More than 10 minutes

Those subject answering "yes" to question 9.5 are asked the following question:

9.10 When you walk at an ordinary pace on level ground, how many meters can you walk before the leg pain appears?

After walking _____ m

10. COUGH

	NO	YES
10.1 Do you usually cough first thing in the morning in the winter? (Count a cough with first smoke or on "first going out of doors". Exclude clearing throat or a single cough.)	0	1
10.2 Do you usually cough during the day or at night in the winter? (Ignore an occasional cough.)	0	2

Those men answering "yes" to one or both of the preceding questions are asked the following question:

10.3 Do you cough like this on most days for at least 3 months each year?	0	4
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11. PHLEGM

	No	Yes
11.1 Do you usually cough up phlegm from your chest first thing in the morning in the winter?	0	1
11.2 Do you usually cough up phlegm from your chest during the day, or at night, in the winter? (Yes means twice or more).	0	2

Those men answering "yes" to one or both of the preceding questions are asked the following question:

11.3 Do you cough up phlegm like this on most days for at least 3 months each year?	0	4
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FOR EVERYONE:

11.4 In the past 3 years have you had a period of (increased) cough and phlegm lasting for 3 weeks or more?		
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- 1 No
- 2 Once

- 3 More than once
12. How many cigarettes do you smoke on an average daily?
- 1 Less than 15
 - 2 15-29
 - 3 30 or more
13. Participation in the trial
- 1 Yes, has signed the informed consent
 - 2 No, smokes currently less than 5 cigarettes a day
 - 3 No, cancer diagnosed earlier (excluding non-melanoma skin cancer and carcinoma situ), what? _____
 - 4 No, coronary heart disease NYHA 3 or 4
 - 5 No, chronic renal failure
 - 6 No, takes additional vitamin A 20,000 units or more a day
 - 7 No, takes additional vitamin E 20 mg or more a day
 - 8 No, chronic alcoholism
 - 9 No, cirrhosis in the liver
 - 10 No, takes peroral anticoagulant (Marcoumar, Marevan, Trombol)
 - 11 No, the subject is not willing to participate in the trial
 - 12 No, other reason; what _____
14. Date of next examination ____ / ____ 19____, time _____
15. Interviewer code _____
16. Fast _____ hours; if less than 12 hours, what has eaten during the past 12 hours?
17. Blood sample taken.
- 0 No
 - 1 Yes, number of frozen serum samples _____
18. Identification number of serum samples _____
19. Code of nurse taking blood samples _____
20. Chest x-ray taken:
- 1 No, reason: _____
 - 2 Yes