

## 2003-04 Questionnaire

### CARDIOVASCULAR DISEASE - CDQ\_C

CDQ.001 {Have you/Has SP} ever had any pain or discomfort in {your/her/his} chest?

YES .....	1
NO .....	2 (CDQ.010)
REFUSED .....	7 (CDQ.010)
DON'T KNOW.....	9 (CDQ.010)

CDQ.002 {Do you/Does she/Does he} get it when {you/she/he} walk uphill or hurry?

YES .....	1
NO .....	2 (CDQ.008)
NEVER WALKS UPHILL OR HURRIES.....	3
REFUSED .....	7 (CDQ.008)
DON'T KNOW.....	9 (CDQ.008)

CDQ.003 {Do you/Does she/Does he} get it when {you/she/he} walk at an ordinary pace on level ground?

YES .....	1
NO .....	2
REFUSED .....	7
DON'T KNOW.....	9

**BOX 1**

**CHECK ITEM CDQ.003A:**  
IF 'YES' (CODE '1') IN CDQ.002 OR CDQ.003, CONTINUE.  
OTHERWISE, GO TO CDQ.008.

CDQ.004 What {do you/does she/does he} do if {you/she/he} get it while {you/she/he} are walking? {Do you/Does she/Does he} stop or slow down, or continue at the same pace?

CHECK "STOP OR SLOW DOWN" IF SP CARRIES ON AFTER TAKING NITROGLYCERINE.

STOP OR SLOW DOWN.....	1
CONTINUE AT THE SAME PACE .....	2 (CDQ.008)
REFUSED .....	7 (CDQ.008)
DON'T KNOW.....	9 (CDQ.008)

CDQ.005 If {you/she/he} stand still, what happens to it? Is the pain or discomfort relieved or not relieved?

RELIEVED..... 1  
NOT RELIEVED ..... 2 (CDQ.008)  
REFUSED ..... 7 (CDQ.008)  
DON'T KNOW..... 9 (CDQ.008)

CDQ.006 How soon is the pain relieved? Would you say . . .

10 minutes or less..... 1  
More than 10 minutes..... 2 (CDQ.008)  
REFUSED ..... 7 (CDQ.008)  
DON'T KNOW..... 9 (CDQ.008)

CDQ.009 Please look at this card and show me where the pain or discomfort is located.

CODE ALL THAT APPLY.  
PROBE FOR ADDITIONAL AREAS.

HAND CARD CDQ1

1..... 1  
2..... 2  
3..... 3  
4..... 4  
5..... 5  
6..... 6  
7..... 7  
8..... 8  
REFUSED ..... 77  
DON'T KNOW..... 99

CDQ.008 Have {you/she/he} ever had a severe pain across the front of {your/her/his} chest lasting for half an hour or more?

YES ..... 1  
NO ..... 2  
REFUSED ..... 7  
DON'T KNOW..... 9

CDQ.010 {Have you/Has SP} had shortness of breath either when hurrying on the level or walking up a slight hill?

YES ..... 1  
NO ..... 2  
REFUSED ..... 7  
DON'T KNOW..... 9

**BOX 2**

**CHECK ITEM CDQ.025:**  
IF SP AGE <= 49 YEARS, CONTINUE.  
OTHERWISE, GO TO END OF THE SECTION.

CDQ.031 {Do you/Does SP} have to stop for breath when walking at {your/his/her} own pace on the level?

YES ..... 1  
NO ..... 2  
REFUSED ..... 7  
DON'T KNOW..... 9

CDQ.041 {Do you/Does SP} have to stop for breath after walking about 100 yards or after a few minutes on the level?

YES ..... 1  
NO ..... 2  
REFUSED ..... 7  
DON'T KNOW..... 9

CDQ.051 {Have you/Has SP} **ever** been awakened by trouble breathing or shortness of breath, other than when {you/s/he} had a cold?

YES ..... 1  
NO ..... 2  
REFUSED ..... 7  
DON'T KNOW..... 9

CDQ.071 {Have you/Has SP} **ever** had to sleep on 2 or more pillows to help {you/him/her} breathe?

YES ..... 1  
NO ..... 2  
REFUSED ..... 7  
DON'T KNOW..... 9