

Ithaca College Environmental Health and Safety Periodic Respiratory Protection Program Medical Questionnaire

1. Name _____
2. Social Security Number ___ - ___ - _____
3. Clock Number _____
4. Present Occupation Plant _____
6. Address _____
7. _____
- City State Zip Code
8. Telephone Number (____) _____
9. Interviewer _____
10. Date _____
11. What is your marital status? 1. Single____ 2. Married____ 3. Widowed____ 4. Separated/Divorced____

OCCUPATIONAL HISTORY

- 12A. In the past year, did you work full time (30 hours per week or more) for six (6) months or more? 1. Yes____ 2. No____
- If yes:
- B. In the past year, did you work in a dusty job? 1. Yes____ 2. No____
3. Does not apply____
- C. Was dust exposure 1. Mild____ 2. Moderate____ 3. Severe____
- D. In the past year, were you exposed to gas or chemical fumes in your work? 1. Yes____ 2. No____
- E. Was exposure 1. Mild____ 2. Moderate____ 3. Severe____
- F. In the past year, what was your
1. Job or occupation? _____
2. Position or job title? _____

RECENT MEDICAL HISTORY

- 13A. Do you consider yourself to be in good health? Yes____ No____
- If no, state reason _____
- 13B. In the past year, have you developed Yes No
- | | | |
|------------------|------|------|
| Epilepsy? | ____ | ____ |
| Rheumatic fever? | ____ | ____ |
| Kidney disease? | ____ | ____ |
| Bladder disease? | ____ | ____ |
| Diabetes? | ____ | ____ |
| Jaundice? | ____ | ____ |
| Cancer? | ____ | ____ |

CHEST COLDS AND CHEST ILLNESSES

- 14A. If you get a cold, does it usually go to your chest? ("Usually" means more than half the time.) 1. Yes____ 2. No____
3. Don't get colds ____
- 15A. During the past year, have you had any chest illnesses that have kept you off work, indoors at home, or in bed? 1. Yes____ 2. No____
3. Does not apply____
- If yes:
- B. Did you produce phlegm with any of these chest illnesses? 1. Yes____ 2. No____
3. Does not apply____
- C. In the past year, how many such illnesses with (increased) phlegm did you have that lasted a week or more? Number of illnesses____ No such illnesses____

