

BASELINE EXACERBATION QUESTIONNAIRE

ID NUMBER: FORM CODE: BEQ Visit VERSION: 1.0 10/26/10 Number SEQ #
0a) Form Date
instructions. This form should be completed during the participant's visit. Thease read the questions exactly as written.
1) Have you had an episode of breathing problems in the last 12 months? (Y/N)
If Yes
2) How many episodes of breathing problems have you had in the last 12 months?
How was/were the episode(s) of breathing problem(s) treated? Please answer for each episode (if more than one) by checking all relevant treatments given for each episode.
3) For the first episode of breathing problems you had in the last 12 months:
3a) Did you take additional antibiotics after contacting
your healthcare provider by telephone or email? (Y/N)
3b) Did you take additional oral steroids after contacting
your healthcare provider by telephone or email? (Y/N)
3c) Did you take additional antibiotics but without
contacting a healthcare provider? (Y/N)
3d) Did you take additional oral steroids but without
contacting a healthcare provider? (Y/N)
3e) Were you evaluated in a physician's office or
urgent care? (Y/N)
During that visit were you given (check all that apply):
3e1) An additional antibiotic
3e2) Additional steroids
3e3) Don't know
3e4) Don't remember
3f) Were you evaluated in an Emergency Department?
During that visit were you given (check all that apply):
3f1) An additional antibiotic

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	3f2) Additional steroids
	3f3) Don't know
	3f4) Don't remember
	3g) Were you admitted to the hospital?
	og/ Word you durinted to the hoopital.
4)	(do not ask) Did the participant have a second episode?
5)	For the second episode of breathing problems you had in the last 12 months:
	5a) Did you take additional antibiotics after contacting
	your healthcare provider by telephone or email? (Y/N)
	5b) Did you take additional oral steroids after contacting
	your healthcare provider by telephone or email? (Y/N)
	5c) Did you take additional antibiotics but without
	contacting a healthcare provider? (Y/N)
	5d) Did you take additional oral steroids but without
	contacting a healthcare provider? (Y/N)
	5e) Were you evaluated in a physician's office or
	urgent care? (Y/N)
	During that visit were you given (check all that apply):
	5e1) An additional antibiotic
	5e2) Additional steroids
	5e3) Don't know
	5e4) Don't remember
	5f) Were you evaluated in an Emergency Department?
	During that visit were you given (check all that apply):
	5f1) An additional antibiotic
	5f2) Additional steroids
	5f3) Don't know
	5f4) Don't remember
	5g) Were you admitted to the hospital?
6)	(do not ask) Did the participant have a third episode?

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7) I	For the third e	piso	de d	of br	eath	ning pr	oble	ms :	you had in the last 12 i	months:				
	7a) Did you ta	ake	addi	ition	al a	ntibiot	ics a	fter	contacting			1		
	your healthca	re p	rovi	ider	by t	elepho	one o	or er	mail? (Y/N)					
	7b) Did you ta	ake	addi	ition	al o	ral ste	roids	afte	er contacting			1		
	your healthcare provider by telephone or email? (Y/N)													
	7c) Did you ta	ake	addi	ition	al a	ntibiot	ics b	ut w	rithout			1		
	contacting a healthcare provider? (Y/N)													
	7d) Did you ta													
				-										
	7e) Were you]		
	•	•	•								ths:			
	_				-	_	•		all that apply):					
	·									apply):				
	7e2) Addi	tion	al st	tero	ids							1		
	7e3) Don'	't kn	ow									1		
	7e4) Don'	't rei	men	nbei	۲									
	7f) Were you	eva	luat	ed i	n an	Emei	gen	cy D	epartment?					
	During tha	at vi:	sit v	vere	you	ı giver	ı (ch	eck	all that apply):					
	_				-	-	-							
	7f2) Addit	iona	al ste	eroi	ds .									
	7f3) Don't	kno	ow .											
	7f4) Don't	ren	nem	ber										
	,													
												1		
8) ((do not ask) D	id th	e pa	artic	ipar	nt have	a fo	ourth	n episode?			→If no,	skip to	end
9) I	For the fourth	epis	ode	of l	orea	thing	orobl	lems	s you had in the last 12	2 months:				
	9a) Did you ta	ake	addi	ition	al a	ntibiot	ics a	fter	contacting			1		
	your healthca	re p	rovi	ider	by t	elepho	one o	or er	mail? (Y/N)					
	9b) Did you ta	ake	addi	ition	al o	ral ste	roids	afte	er contacting			1		
	your healthca	re p	rovi	ider	by t	elepho	one o	or er	mail? (Y/N)					

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	9c) Did you take additional antibiotics but without	
	contacting a healthcare provider? (Y/N)	
	9d) Did you take additional oral steroids but without	
	contacting a healthcare provider? (Y/N)	
	9e) Were you evaluated in a physician's office or	
	urgent care? (Y/N)	
	During that visit were you given (check all that apply):	
	9e1) An additional antibiotic	
	9e2) Additional steroids	
	9e3) Don't know	
	9e4) Don't remember	
	9f) Were you evaluated in an Emergency Department?	
	During that visit were you given (check all that apply):	
	9f1) An additional antibiotic	
	9f2) Additional steroids	
	9f3) Don't know	
	9f4) Don't remember	
	9g) Were you admitted to the hospital?	
10)	0) (do not ask) Did the participant have a fifth episode?	t
11)) For the fifth episode of breathing problems you had in the last 12 months:	
	11a) Did you take additional antibiotics after contacting	
	your healthcare provider by telephone or email? (Y/N)	
	11b) Did you take additional oral steroids after contacting	
	your healthcare provider by telephone or email? (Y/N)	
	11c) Did you take additional antibiotics but without	
	contacting a healthcare provider? (Y/N)	
	11d) Did you take additional oral steroids but without	
	contacting a healthcare provider? (Y/N)	
	11e) Were you evaluated in a physician's office or	
	urgent care? (Y/N)	
	During that visit were you given (check all that apply):	

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	11e1) An additional antibiotic
	11e2) Additional steroids
	11e3) Don't know
	11e4) Don't remember
	11f) Were you evaluated in an Emergency Department?
	During that visit were you given (check all that apply):
	11f1) An additional antibiotic
	11f2) Additional steroids
	11f3) Don't know
	11f4) Don't remember
	11g) Were you admitted to the hospital?
12)) (do not ask) Did the participant have a sixth episode?
13)) For the sixth episode of breathing problems you had in the last 12 months:
	13a) Did you take additional antibiotics after contacting
	your healthcare provider by telephone or email? (Y/N)
	13b) Did you take additional oral steroids after contacting
	your healthcare provider by telephone or email? (Y/N)
	13c) Did you take additional antibiotics but without
	contacting a healthcare provider? (Y/N)
	13d) Did you take additional oral steroids but without
	contacting a healthcare provider? (Y/N)
	13e) Were you evaluated in a physician's office or
	urgent care? (Y/N)
	During that visit were you given (check all that apply): 13e1) An additional antibiotic
	13e2) Additional steroids
	13e3) Don't know
	13e4) Don't remember
	13f) Were you evaluated in an Emergency Department?

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During that	at visit	were yo	u giv	en (ched	ck	all that apply):		_	
13f1) An a	additior	nal antik	oiotic						
13f2) Add	itional	steroids	S						
13f3) Dor	't knov	v							
13f4) Dor	't reme	ember							
13a) Were vo	u adm	itted to	the h	ospital?					