

Symptom questionnaire

1. Do you usually get short of breath? Can you circle the number in the table below that best describes you?

Grade	Degree of breathlessness related to activities
1	Not troubled by breathlessness except on strenuous exercise
2	Short of breath when hurrying on the level or walking up a slight hill
3	Walks slower than most people on the level, stops after a mile or so, or stops after 15 minutes walking at own pace
4	Stops for breath after walking about 100 yds or after a few minutes on level ground
5	Too breathless to leave the house, or breathless when undressing

2. Do you have a cough on most days (or nights)? Yes / No
3. How long have you had this cough? days/weeks/months/years
4. Do you wheeze? Yes / No
5. Do you usually produce phlegm (mucous) from your chest? Yes / No
6. Do you produce a teaspoon or more of phlegm (mucous) from your chest most days?
Yes / No
7. Have you taken antibiotics or steroid tablets for your chest, on more than on occasion, in the last year? Yes / No
8. Have you coughed up blood in the last year? Yes / No
- a. If yes, when was the last time:.....
9. Have you lost weight in the last few months, without wanting to?
Yes / No
- a. If yes, how much weight have you lost?.....
10. In the last 3 months have you had an angina type pain in your chest? Yes / No

The provider will use the WHO performance status tool with each participant. The provider will assist participants as necessary, for example by reading the statements as questions. The provider will record each participant's performance status.

The WHO performance status classification categorises patients as:

0	able to carry out all normal activity without restriction
1	restricted in strenuous activity but ambulatory and able to carry out light work
2	ambulatory and capable of all self-care but unable to carry out any work activities; up and about more than 50% of waking hours
3	symptomatic and in a chair or in bed for greater than 50% of the day but not bedridden
4	completely disabled; cannot carry out any self-care; totally confined to bed or chair