



## **APPENDIX AVAILABLE ON WEB**

### **Research Report 138**

## **Health Effects of Real-World Exposure to Diesel Exhaust in Persons with Asthma**

### **Appendix G. Symptom Monitoring Diary and Peak Flow Chart**

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Note: Appendices Available on the Web appear in a different order than in the original Investigators' Report. HEI has not changed these documents. Appendices were relettered as follows:

Appendix E was originally Appendix B  
Appendix F was originally Appendix C  
Appendix G was originally Appendix D  
Appendix H was originally Appendix E

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Although this document was produced with partial funding by the United States Environmental Protection Agency under Assistance Award CR-83234701 to the Health Effects Institute, it has not been subjected to the Agency's peer and administrative review and therefore may not necessarily reflect the views of the Agency, and no official endorsement by it should be inferred. The contents of this document also have not been reviewed by private party institutions, including those that support the Health Effects Institute; therefore, it may not reflect the views or policies of these parties, and no endorsement by them should be inferred.

This document was reviewed by the HEI Health Review Committee  
but did not undergo the HEI scientific editing and production process.

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**APPENDIX D: SYMPTOM MONITORING DIARY AND PEAK FLOW CHART**

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SYMPTOM MONITORING DIARY AND PEAK FLOW CHART

**CONFIDENTIAL**

## SYMPTOM MONITORING DIARY

### HOW TO FILL THE DIARY IN

- Symptom **Diary 1** should be **started one week before** the arranged date of the **1<sup>st</sup>** exposure visit (either Hyde Park or Oxford Street)
- Symptom **Diary 2** should be **started the day after** the **1<sup>st</sup>** exposure visit
- Please remember to fill in the diary **everyday** – It is equally important to complete the diary on weekends and holidays
- At the end of the monitoring period there every shaded box should be filled in
- Please make a note on the form if you are ill in any way which may affect your breathing
- When complete please return the symptom diary to the Asthma Laboratory in the pre-paid envelope
- (If possible keep a photocopy of the diary in case it becomes lost in the post)
- In the boxes to the right of '**DAYTIME SYMPTOMS**', put a **number in each box** to represent the **severity of that symptom** experienced over **that day**. The number entered should range **between 0 (zero) and 3 (three)**:
  - 0 = No symptoms**
  - 1 = Mild symptoms**
  - 2 = Moderate symptoms**
  - 3 = Severe symptoms**
- In the boxes to the right of '**USE OF RELIEVER**', write down how many times you needed to use your 'reliever' inhaler (Blue – Ventolin) over that day, even if it's zero.
- In the boxes to the right of '**NOCTURNAL SYMPTOMS**', Write **YES** or **NO**, to indicate if you were troubled, whilst in bed, with symptoms of your asthma.

Thank you for your time and efforts completing this diary.

# SYMPTOM MONITORING DIARY

DATE STARTED: \_\_\_\_\_ DATE OF EXPOSURE: \_\_\_\_\_ DATE FINISHED: \_\_\_\_\_

	<b>SYMPTOM DIARY 1</b> (WEEK BEFORE EXPOSURE)							EXPOSURE DAY	<b>SYMPTOM DIARY 2</b> (WEEK AFTER EXPOSURE)						
	DAY								DAY						
	1	2	3	4	5	6	7		1	2	3	4	5	6	7
<b>DAYTIME SYMPTOMS</b>															
<b>a. Breathlessness</b>															
<b>b. Chest Tightness</b>															
<b>c. Wheeze</b>															
<b>d. Cough</b>															
<b>e. Sputum Production</b>															
<b>USE OF RELIEVER</b>															
<b>NOCTURNAL SYMPTOMS</b>															
<b>YES or NO</b>															

## PEAK FLOW CHART

### HOW TO MEASURE AND RECORD YOUR PEAK FLOW

- Please fill in the date you start the recording
- **Chart 1** should be started the **week before** the **1<sup>st</sup>** exposure visit (either Hyde Park or Oxford Street)
- **Chart 2** should be started the **day after** the **1<sup>st</sup>** exposure visit (either Hyde Park or Oxford Street)
- Try to fill in the chart **every day** – It is equally important to measure your peak flow on weekends and holidays
- Try to take **four readings per day** at approximately the times indicated on the chart - in 24hour clock
- If you forget to do a reading, leave that space blank
- Please make a note on the form if you were ill in any way which may affect your breathing
- Always measure your peak flow **before taking any inhaler**
- To perform a blow, take a deep breath in, and do a short sharp blow into the meter as hard and fast as possible. Estimate the reading to the nearest 10 units, then reset the pointer
- Remember to reset the pointer at the beginning of each blow. Hold the meter on its side and take care not to obstruct the scale with your hand.
- On each occasion **blow 3 times. Mark with a cross or dot on the chart the best of the 3 readings OR write in the number**
- When you have completed both charts, please return them to the Asthma Laboratory in the pre-paid envelope
- (If possible keep a photocopy of the charts in case they become lost in the post)

Thank you for your time and efforts completing these charts.

# PEAK FLOW CHART 1

DATE STARTED: \_\_\_\_\_

DATE OF EXPOSURE: \_\_\_\_\_

DATE FINISHED: \_\_\_\_\_

PEAK FLOW	DAY																											
	1				2				3				4				5				6				7			
	08:00	12:00	18:00	22:00	08:00	12:00	18:00	22:00	08:00	12:00	18:00	22:00	08:00	12:00	18:00	22:00	08:00	12:00	18:00	22:00	08:00	12:00	18:00	22:00	08:00	12:00	18:00	22:00
600 -																												
500 -																												
400 -																												
300 -																												
200 -																												
180 -																												
160 -																												
140 -																												

## PEAK FLOW CHART 2

DATE STARTED: \_\_\_\_\_

DATE OF EXPOSURE: \_\_\_\_\_

DATE FINISHED: \_\_\_\_\_

