

# **Questionnaire survey to assess the impact of pollution on Health Status of Traffic Police, Kolkata**

Date

Place

## **A. Demography**

- Male/ Female:
- Age: Under 20/ 21-30/ 31-40/ 41-50/ 51-60/ Above 60
- Marital Status: Single/ Married/ Unmarried/ Widow/ Widower/ Divorced/ Separated
- Smoking: Yes/ No
- Regular Sporting Activities: Yes/ No
- Education: Up to Class IV/ Class V-X/ Class XI-XII/ Graduate/ Postgraduate/ Professional
- Working Life (years):
- Duty Hours:

## **B. Lifestyle and habits**

- Tobacco use: Yes/ No; If yes, Smoking/ Chewing; Cig/ Beedi per day.....; Years of smoking .....
- Alcohol use: Yes/ No; if yes, Regular/ Occasional
- Are you a diabetic? No/ Yes; If yes, do you take: Oral medicines/ Insulin/ Both

### C. Health related symptoms

Sl. No.	Physical Health Status	Mental Health Status
1.	High blood pressure: No/ Yes	Difficulty in concentration: No/ Yes
2.	Throat Irritation or Sore Throat: No/ Yes; If yes, Occasional/ Frequent	Physical and psychological Stress: No/ Yes
3.	Running nose: No/ Yes	Frequent Irritation: No/ Yes
4.	Sinusitis: No/ Yes	Sleeplessness: No/ Yes
5.	Sneezing: No/ Yes; If yes, Occasional/ Frequent	Nervousness: No/ Yes
6.	Nasal congestion: No/ Yes; If yes, Occasional/ Frequent	Feeling of loneliness: No/ Yes
7.	Eye irritation/ itching: No/ Yes; If yes, Occasional/ Frequent	Fatigue/drowsiness: No/ Yes
8.	Cough: No/ Yes; If yes, Occasional/ Frequent	
9.	Chest discomfort/ tightening: No/ Yes	
10.	Breathlessness: No/ Yes	
11.	Medically diagnosed Asthma: No/ Yes; If yes, taking inhaler/ medication? No/ Yes	
12.	Skin irritation/ itching? No/ Yes; If yes, Occasional/ Frequent	
13.	Roughness of Skin/ Dry Skin: No/ Yes	
14.	Lung problems: No/ Yes	
15.	Bronchitis: No/ Yes	
16.	Visibility problem: No/ Yes	
17.	Hearing problem? No/ Yes	
18.	Spinal cord/ back problem: No/ Yes	

**Comments**