Please administer questions before starting spirometry exam:

1. Have you been told that you had a heart attack or stroke in the last month?
   - Yes ➞ Don't perform test. **Skip to question 5.**
   - No ➞ Proceed with spirometry

2. Have you had any significant problems doing spirometry in the past?
   - Yes
   - No
   - Comments:

3. Did you have any caffeinated coffee, tea or cola, or other caffeinated drink, in the last 2 hours?
   - Yes
   - No
   - Don't Know

4. Did you smoke a cigarette, pipe or cigar during the last hour?
   - Yes
   - No

5. Spirometry was:
   - Completed. ➞ Time completed: [ ] : [ ] o am o pm
   - Not completed. If not completed, Reason not completed:
     - Refused
     - Physically unable
     - Cognitively unable
     - Equipment problem
     - Other, please specify:
Please perform the Maximal Inspiratory Pressure (MIP) measurement and complete the following items:

**Maximal inspiratory pressure (MIP) Measurement**

MIP reading:

- #1 cmH2O
- #2 cmH2O
- #3 cmH2O
- #4 cmH2O
- #5 cmH2O

**Degree of effort that participant expended during the MIP maneuvers:**

- Poor
- Fair
- Good
- Maximal

**MIP measurement was:**

- Completed. Time Completed:  
  - am
  - pm
- Not completed. If not completed,
  
  Reason not completed:
  
  - Refused
  - Physically unable
  - Cognitively unable
  - Equipment problem
  - Other, please specify:

For MESA Field Center Use Only:

- Technician ID:
- Reviewer ID:
- Data Entry ID:

08/11/2004