

Bronchiectasis Health Questionnaire (BHQ)

This questionnaire is designed to assess how bronchiectasis affects your life. Please read each question carefully and answer by **SELECTING the response that best applies to you. It is important that you answer all questions as honestly as you can.**

Participant ID				

Date							
D	D	M	M	Y	Y	Y	Y

Visit Number

Participant ID				

1. In the last 2 weeks, I have been tired.

- 1. All of the time
- 2. Most of the time
- 3. A good bit of the time
- 4. Some of the time
- 5. A little of the time
- 6. Hardly any of the time
- 7. None of the time

2. In the last 2 weeks, I have been much slower at doing things than other people of my age.

- 1. All of the time
- 2. Most of the time
- 3. A good bit of the time
- 4. Some of the time
- 5. A little of the time
- 6. Hardly any of the time
- 7. None of the time

3. In the last 2 weeks, I have felt anxious.

- 1. All of the time
- 2. Most of the time
- 3. A good bit of the time
- 4. Some of the time
- 5. A little of the time
- 6. Hardly any of the time
- 7. None of the time

4. In the last 2 weeks, my chest has felt clear.

- 1. All of the time
- 2. Most of the time
- 3. A good bit of the time
- 4. Some of the time
- 5. A little of the time
- 6. Hardly any of the time
- 7. None of the time

5. In the last 2 weeks, I have been embarrassed because of my phlegm (sputum).

- 1. All of the time
- 2. Most of the time
- 3. A good bit of the time
- 4. Some of the time
- 5. A little of the time
- 6. Hardly any of the time
- 7. None of the time

6. In the last 2 weeks, I have felt short of breath.

- 1. All of the time
- 2. Most of the time
- 3. A good bit of the time
- 4. Some of the time
- 5. A little of the time
- 6. Hardly any of the time
- 7. None of the time

Participant ID				

7. In the last 2 weeks, my sleep has been disrupted because of my bronchiectasis.

- 1. Every night
- 2. Most nights
- 3. Several nights
- 4. Some nights
- 5. Occasionally
- 6. Rarely
- 7. Never

8. In the last 2 weeks, I have had coughing bouts.

- 1. Every day
- 2. Most days
- 3. Several days
- 4. Some days
- 5. Occasionally
- 6. Rarely
- 7. Never

9. In the last 2 weeks, my phlegm (sputum) contained blood.

- 1. Every time
- 2. Most times
- 3. Several times
- 4. Sometimes
- 5. Occasionally
- 6. Rarely
- 7. Never

Participant ID				

10. In the last one year, I have taken courses of antibiotics for a chest infection.

- 1. More than five times
- 2. Five times
- 3. Four times
- 4. Three times
- 5. Twice
- 6. Once
- 7. None

Thank you for completing this questionnaire!