LONDON SCHOOL OF HYGIENE CARDIOVASCULAR QUESTIONNAIRE
AND DIAGNOSTIC CRITERIA

LONDON SCHOOL
OF HYGIENE CARDIOVASCULAR QUESTIONNAIRE

Section A: Chest Pain on Effort

1. Have you ever had any pain or discomfort in your chest? 
   Yes 
   No

1a. If "No", have you ever had any pressure or heaviness in your chest? 
   Yes 
   No

If "No", proceed to Section C. 
If "Yes", ask next question. (If during the remainder of Section A an answer is recorded in a box marked *, proceed to Section B.)

2. Do you get it when you walk uphill or hurry? 
   Yes 
   No *
   Never hurries or walks uphill

3. Do you get it when you walk at an ordinary pace on the level? 
   Yes 
   No

4. What do you do if you get it while you are walking? 
   Stop or slow down 
   Carry on *

(Record "Stop or slow down" if subject carries on after taking nitroglycerine.)

5. If you stand still, what happens to it? 
   Relieved 
   Not relieved *
6. How soon?
   10 minutes or less
   More than 10 minutes

7. Will you show me where it was?
   (Record all areas mentioned.)
   Sternum (upper or middle)
   Sternum (lower)
   Left anterior chest
   Left arm
   Other

8. Do you feel it anywhere else?
   (If “Yes”, record additional information above)
   Yes
   No

9. Did you see a doctor because of this pain (or discomfort)?
   Yes
   No
   If “Yes”, what did he say it was? __________________________

Section B: Possible Infarction

10. Have you ever had a severe pain across the front of your chest lasting for half an hour or more?
    Yes
    No
    If “Yes”, ask question 11.

11. Did you see a doctor because of this pain?
    Yes
    No
    If “Yes”, what did he say it was? __________________________ (code later)

    How many of these attacks have you had? ______________________

    1st attack: date ________ duration of pain ______________________
    2nd attack: date ________ duration of pain ______________________ (code later)

Section C: Intermittent Claudication

If an answer is recorded in a box marked *, no further questions need be asked.

12. Do you get pain in either leg on walking?
    Yes
    No
13. Does this pain ever begin when you are standing still or sitting?
   Yes ✔
   No 

14. In what part of your leg do you feel it?
   Pain includes calf/calves
   Pain does not include calf/calves ✔
   If calves not mentioned, ask: Anywhere else?

15. Do you get it if you walk uphill or hurry?
   Yes
   No ✔
   Never hurries or walks uphill

16. Do you get it if you walk at an ordinary pace on the level?
   Yes
   No

17. Does the pain ever disappear while you are walking?
   Yes ✔
   No

18. What do you do if you get it when you are walking?
   Stop or slow down
   Carry on ✔

19. What happens to it if you stand still?
   Relieved
   Not relieved

20. How soon?
   10 minutes or less
   More than 10 minutes

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**Diagnostic Criteria for Angina Pectoris, Possible Infarction and Intermittent Claudication**

*Angina" is defined as being present in subjects who answer as follows:
Q. 1 : "Yes"
Q. 2 or 3 : "Yes"
Q. 4 : "Stop or slow down"
Q. 5 : "Relieved"
Q. 6 : "10 minutes or less"
Q. 7 : (a) Sternum (upper or middle, or lower), or (b) left anterior chest and left arm.
(If interviewing instructions are correctly observed throughout, it is sufficient to check the answer to Q. 7.)