

ASTHMA QUESTIONNAIRE
(To be completed by the Proposer)

Name of Proposer : _____

I.C. No. : _____ Proposal No. : _____

Note: An 'Attack of Asthma' would be considered to be present if you have suffered from mild wheezing followed by shortness of breath that require the use of an inhaler or Asthma medicine (bronchodilators) to control the same. Please use the definition to indicate the number of attacks that you have suffered in the past years.

1 At what age did you have your first attack?	
2 How many attacks have you had for the past 3 years?	
3 When was the last attack?	
4 Which of these are applicable for the control of your asthma? (a) I take medication daily to control my asthma (b) I only require medication when I have an attack (c) I only use an inhaler when I have an attack (d) I also use steroids off and on for my asthma	
5 Please indicate the medication and dosage that you are taking for the control of your asthma.	
6 When was the last time that you used steroids?	
7 Please state name and address of the doctor whom you normally consult on your asthma and when was the last consultation.	
8 How much time have you taken off work during the last 3 years due to the attacks?	
9 Have you ever been admitted to a hospital in the last 3 years due to an attack? If so, please give full details e.g. dates, duration, which hospital.	

I declare that the answers I have given are, to the best of my knowledge, true and that I have not withheld any material information that may influence the assessment or acceptance of this proposal.

I agree that this form will constitute part of my proposal for medical and health insurance and that failure to disclose any material fact known to me may invalidate the contract.

Signature of Proposer

Date