HEALTH DIARY

HOUSING, HEATING AND HEALTH STUDY 2006

BOOK TWO
JUNE 26 - AUGUST 20

Name	
Address	
Doctor's Name	
Doctor's Phone	
ID Code	
School (if applicable)	

IF LOST PLEASE RETURN TO:

HE KAINGA ORANGA
PUBLIC HEALTH DEPARTMENT
WELLINGTON SCHOOL OF MEDICINE
PO BOX 7343
WELLINGTON SOUTH

HEALTH DIARY

HOUSING, HEATING AND HEALTH STUDY 2006

This record of your cold symptoms will help the Research Team and your community health worker know how many times and how sick you have been during this winter.

Symptoms can be things like a cough or wheezing sound, a runny nose, or a headache.

A score of 0 means there are no symptoms

A score of 1 means mild symptoms

A score of 2 means moderate symptoms

A score of 3 means severe symptoms

SYMPTOMS MILD Day cough or None Severe and/or Mild Moderate wheezing sudden onset Coughed/ wheezed Sleep disturved by cough or wheeze Night cough Coughed or wheezed all night None, slept well or wheezing occasionally Runny/stuffed Extremely blocked/ runny Mild None Moderate nose Moderate Sore throat Difficulty None Mild scratchiness discomfort swallowing

Record your symptoms every day (put the If you have any questions, you can contact your community health worker: chart on the fridge door or next to your bed to help you remember). If you are frightened at any stage, call 111. Do you have asthma? (please circle) If yes, do you take asthma medicine? YES YES NO NO What kind of asthma medicine? **Reliever Name: Preventer Name:** Strength (µg): Strength (µg): Do you take any additional medicine? If so what is its name, strength and frequency? Name: Strength: Frequency:

WEEK ONE:

JUNE 26th - JULY 2nd









COMPLETE THIS CHART EVERY DAY EVEN IF YOU DON'T HAVE A COLD

EXAMPLE

Date	Sun Jun 25	Mon Jun 26	Tue Jun 27	Wed Jun 28	Thu Jun 29	Fri Jun 30	Sat Jul 01	Sun Jul 02
Did you have a cold/flu today?	Yes							
Did you take time off work/school because you were sick today?	No							
Runny nose or sneezing	1							
Blocked or stuffy nose	2							
Sore throat or hoarse voice	2							
Headaches or face-aches	1							
Aches or pains elsewhere	1							
Chill, fever or shivery	0							
Cough during the day	3							
Wheeze during the day	1							

	COMMENTS:	
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WEEK TWO:

JULY 3rd-JULY 9th









Date	Mon Jul 03	Tue Jul 04	Wed Jul 05	Thu Jul 06	Fri Jul 07	Sat Jul 08	Sun Jul 09
Did you have a cold/flu today?							
Did you take time off work/school because you were sick today?							
Runny nose or sneezing							
Blocked or stuffy nose							
Sore throat or hoarse voice							
Headaches or face-aches							
Aches or pains elsewhere							
Chill, fever or shivery							
Cough during the day							
Wheeze during the day							

	COMMENTS:	
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WEEK THREE:

JULY 10th- JULY 16th









Date	Mon Jul 10	Tue Jul 11	Wed Jul 12	Thu Jul 13	Fri Jul 14	Sat Jul 15	Sun Jul 16
Did you have a cold/flu today?							
Did you take time off work/school because you were sick today?							
Runny nose or sneezing							
Blocked or stuffy nose							
Sore throat or hoarse voice							
Headaches or face-aches							
Aches or pains elsewhere							
Chill, fever or shivery							
Cough during the day							
Wheeze during the day							

	COMMENTS:	
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WEEK FOUR:

JULY 17th- JULY 23rd









Date	Mon Jul 17	Tue Jul 18	Wed Jul 19	Thu Jul 20	Fri Jul 21	Sat Jul 22	Sun Jul 23
Did you have a cold/flu today?							
Did you take time off work/school because you were sick today?							
Runny nose or sneezing							
Blocked or stuffy nose							
Sore throat or hoarse voice							
Headaches or face-aches							
Aches or pains elsewhere							
Chill, fever or shivery							
Cough during the day							
Wheeze during the day							

	COMMENTS:	
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WEEK FIVE:

JULY 24th- JULY 30th











Date	Mon Jul 24	Tue Jul 25	Wed Jul 26	Thu Jul 27	Fri Jul 28	Sat Jul 29	Sun Jul 30
Did you have a cold/flu today?							
Did you take time off work/school because you were sick today?							
Runny nose or sneezing							
Blocked or stuffy nose							
Sore throat or hoarse voice							
Headaches or face-aches							
Aches or pains elsewhere							
Chill, fever or shivery							
Cough during the day							
Wheeze during the day							

	COMMENTS:	
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WEEK SIX:

JULY 31st- AUGUST 6th











Date	Mon Jul 31	Tue Aug 01	Wed Aug 02	Thu Aug 03	Fri Aug 04	Sat Aug 05	Sun Aug 06
Did you have a cold/flu today?							
Did you take time off work/school because you were sick today?							
Runny nose or sneezing							
Blocked or stuffy nose							
Sore throat or hoarse voice							
Headaches or face-aches							
Aches or pains elsewhere							
Chill, fever or shivery							
Cough during the day							
Wheeze during the day							

COMMENTS:		

WEEK SEVEN:

AUGUST 7th- AUGUST 13th









Date	Mon Aug 07	Tue Aug 08	Wed Aug 09	Thu Aug 10	Fri Aug 11	Sat Aug 12	Sun Aug 13
Did you have a cold/flu today?							
Did you take time off work/school because you were sick today?							
Runny nose or sneezing							
Blocked or stuffy nose							
Sore throat or hoarse voice							
Headaches or face-aches							
Aches or pains elsewhere							
Chill, fever or shivery							
Cough during the day							
Wheeze during the day							

	COMMENTS:	1
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WEEK EIGHT:

AUGUST 14th- AUGUST 20th









Date	Mon Aug 14	Tue Aug 15	Wed Aug 16	Thu Aug 17	Fri Aug 18	Sat Aug 19	Sun Aug 20
Did you have a cold/flu today?							
Did you take time off work/school because you were sick today?							
Runny nose or sneezing							
Blocked or stuffy nose							
Sore throat or hoarse voice							
Headaches or face-aches							
Aches or pains elsewhere							
Chill, fever or shivery							
Cough during the day							
Wheeze during the day							

	COMMENTS:	
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