

Nasal symptom questionnaire
(*Am J Respir Crit Care Med* 2006; 173: 71-78)

Patient code:

1.Nasal blockage (/1)

- Yes
- No

2.Impaired sense of smell (/1)

- Yes
- No

3.Sneezing (/1)

- Yes
- No

4.Postnasal drip (/1)

- Yes
- No

5.Rhinorrhea (/1)

- Yes
- No