ADDITIONAL INFORMATION

Visual Analogue Score

To be completed every 2 weeks over Summer 2013

Please place a vertical mark along the line where you feel the severity of your symptoms lie. So, if you were to place a mark on the far left of the line, it would mean that you are completely symptom free. However, if you marked the far right of the line, your symptoms are as bad as they possibly could be.

| Nasal Symptoms: | |
|-----------------|---------------------------|
| | Nasal Blockage/Congestion |
| | |
| | Runny nose |
| | Itchy nose |
| | Sneezing |
| | |
| Eye Symptoms: | |
| | Itchy eyes |
| | Watery eyes |
| | |