

**The following questions are about cigarette smoking.**

**1. Do you currently smoke at least one cigarette a day?**

\_\_\_ yes → go to question 6

\_\_\_ no → go to question 2

**2. Have you smoked cigarettes on a daily basis in the past?**

\_\_\_ yes → continue with question 3

\_\_\_ no → go to question 10

**3. How old were you when you started to smoke on a daily basis?**

\_\_\_ years old

**4. How many months or years has it been since you stopped smoking?**

(If less than 1 month, put 1 month.)

\_\_\_ (months) or

\_\_\_ (years)

OR

\_\_\_ still smoke occasionally but not on a  
daily basis (0)

**5. How many years were you a regular smoker? (If less than 1 year, put 1 year)**

\_\_\_ (years) → go to question 10

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**6. On the average, how many cigarettes do you smoke each day?**

\_\_\_ (number of cigarettes, if less than 1, put 1)

**7. How soon after you wake up do you usually smoke your first cigarette?**

\_\_\_ minutes

**8. What brand do you usually smoke "now"?** \_\_\_\_\_

A. Are there 10 or 20 cigarettes in the packs you buy? \_\_\_

B. Are they Low (0) Medium (1) or High (2) tar? \_\_\_

C. Filter (1) or Nonfilter (0)? \_\_\_

D. Menthol (1) or Nonmenthol (0)? \_\_\_

E. Hard pack (1) or Softpack (0)? \_\_\_

F. Is the length of your brand:  
Regular size (0), or King size (1)? \_\_\_

**9. How old were you when you started to smoke on a daily basis?**

\_\_\_ years old

**9(a). Do you currently smoke (at least one a day) cigars, small cigars (cigarillos), or a pipe?**

\_\_\_ yes

\_\_\_ no

→ CONTINUE WITH QUESTION 20

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**10. Do you currently smoke (at least one a day) cigars, small cigars (cigarillos), or a pipe?**

\_\_\_ yes

\_\_\_ no

**11. Did you ever regularly (at least one a day) smoke cigars, small cigars (cigarillos), or a pipe?**

\_\_\_ yes

\_\_\_ no

**The following questions are concerned with your exposure to smoke from other people's cigarettes, cigars, and pipes.**

**12. If married or living in a marital-like relationship, does your spouse/partner smoke cigarettes, cigars or a pipe?**

no \_\_\_

yes \_\_\_

If yes, approximately how many cigarettes per day \_\_\_  
 cigars per day \_\_\_  
 pipe bowls per day \_\_\_

**13. Do any of the other people living in your home regularly (often) smoke cigarettes, cigars or pipes in your presence? (Answer NO if you live alone.)**

no \_\_\_

yes \_\_\_

**14. (For employed persons only)**

**Think of the co-workers you see every day or almost every day. How many of them smoke regularly (often) in your presence?**

(1) none \_\_\_ (2) few \_\_\_ (3) some \_\_\_ (4) most \_\_\_ (5) all \_\_\_

**15. Think of other friends and relatives (not living or working with you) you see every day or almost every day. How many of them smoke regularly (often) in your presence?**

(1) none \_\_\_ (2) few \_\_\_ (3) some \_\_\_ (4) most \_\_\_ (5) all \_\_\_ (0) not applicable \_\_\_

**16. In an average weekday (Monday through Friday), how many hours per day are you around other people who are smoking?**

(1) 0 hrs \_\_\_ (2) 1-3 hrs \_\_\_ (3) 4-6 hrs \_\_\_ (4) 7-9 hrs \_\_\_ (5) 10+ hrs \_\_\_

**17. On an average day of the weekend (Saturday & Sunday), how many hours per day are you around other people who are smoking?**

(1) 0 hrs \_\_\_ (2) 1-3 hrs \_\_\_ (3) 4-6 hrs \_\_\_ (4) 7-9 hrs \_\_\_ (5) 10+ hrs \_\_\_

**18. Did either of your parents smoke cigarettes, cigars, or a pipe at home when you were a child (0-11 years old) or adolescent (12-16 years old)?**

(0) neither smoked \_\_\_ (1) mother smoked \_\_\_ (2) father smoked \_\_\_ (3) both smoked \_\_\_

**19. Rate your indoor exposure to other's smoke during your childhood and adolescence.**

(0) no exposure \_\_\_ (1) light exposure \_\_\_ (2) medium exposure \_\_\_ (3) heavy exposure \_\_\_