

### SMOKING STATUS

**1. Do you currently smoke cigarettes, cigars, or a pipe ON A DAILY BASIS?**

- NO (SKIP TO# 2)       YES       Don't know       Refused

**1a. On average, how many of EACH do you smoke per day?**

\_\_\_\_\_ cigarettes

\_\_\_\_\_ cigars

\_\_\_\_\_ bowls of tobacco       Don't know       Refused

**1b. How soon after you wake up do you usually smoke your first cigarette, cigar, or bowl of tobacco?**

\_\_\_\_\_ minutes → (GO TO PHYSICAL ACTIVITY FORM)

- Don't know       Refused

[ASK QUESTIONS 2 TO 2b IF RESPONDENT DOESN'T CURRENTLY SMOKE ON A DAILY BASIS.]

**2. Did you EVER smoke cigarettes, cigars, or a pipe on a daily basis?**

- NO (SKIP TO# 3)       YES       Don't know       Refused

**2a. When you were smoking your heaviest, how many of EACH did you smoke on an average day?**

\_\_\_\_\_ cigarettes

\_\_\_\_\_ cigars

\_\_\_\_\_ bowls of tobacco       Don't know       Refused

**2b. When did you quit smoking on a daily basis? (month and year)**

\_\_\_\_\_ (NOW GO TO# 3 -- NEXT PAGE)

- Don't know       Refused

**SMOKING STATUS**

**3. Do you currently smoke cigarettes, cigars, or a pipe ON A LESS THAN DAILY BASIS?**

NO (GO TO PHYSICAL ACTIVITY FORM)     YES     *Don't know*     *Refused*

**3a. What do you smoke?** [CHECK ALL THAT APPLY]

cigarettes

cigars

pipe

*Don't know*

*Refused*

**3b. On average, how often do you smoke?** [CHECK ONE]

at least once a week

at least once a month

less than once a month

*Don't know*

*Refused*