2003-04 Questionnaire:

SMOKING AND TOBACCO USE - SMQMEC_C

SMQ.680   The following questions ask about use of tobacco or nicotine products in the past **5 days**.

During the past **5 days**, did {you/he/she} use any product containing nicotine including cigarettes, pipes, cigars, chewing tobacco, snuff, nicotine patches, nicotine gum, or any other product containing nicotine?

VERBAL INSTRUCTIONS TO SP:
Please select yes, no.

YES	1	
NO	2	(END OF SECTION)
REFUSED	7	(END OF SECTION)
DON'T KNOW	9	(END OF SECTION)

SMQ.690   Which of these products did {you/he/she} use? (CHECK ALL THAT APPLY)

VERBAL INSTRUCTIONS TO SP:
Please select all that you used.

Cigarettes	1
Pipes...	2
Cigars	3
Chewing tobacco	4
Snuff	5
Nicotine patches, gum, or other nicotine product...	6
REFUSED	77
DON'T KNOW	99

BOX 2

CHECK ITEM SMQ.700:
IF 'CIGARETTES' (CODE 1) IN SMQ.690, GO TO SMQ.710.
IF 'PIPES' (CODE 2) IN SMQ.690, GO TO SMQ.740.
IF 'CIGARS' (CODE 3) IN SMQ.690, GO TO SMQ.770.
IF 'CHEW' (CODE 4) IN SMQ.690, GO TO SMQ.800.
IF 'SNUFF' (CODE 5) IN SMQ.690, GO TO SMQ.817.
IF 'NICOTINE PRODUCT' (CODE 6) IN SMQ.690, GO TO SMQ.830.
IF 'REFUSED' (CODE 77) OR 'DON'T KNOW' (CODE 99) IN SMQ.690, GO TO SMQ.710.

SMQ.710   During the past **5 days** (including today), on how many days did {you/he/she} smoke cigarettes?

VERBAL INSTRUCTIONS TO SP:
Please enter a number.

|___|
ENTER NUMBER OF DAYS

REFUSED   7
DON'T KNOW...   9

SMQ.720   During the past **5 days**, on the days {you/he/she} smoked, how many cigarettes did {you/he/she} smoke each day?

IF R SAYS 95 OR MORE CIGARETTES PER DAY, ENTER 95.

VERBAL INSTRUCTIONS TO SP:
Please enter a number.

|___|___|___|
ENTER NUMBER OF CIGARETTES

REFUSED 777
DON'T KNOW...999

SMQ.725   When did {you/he/she} smoke {your/his/her} last cigarette? Was it . . .

today,...   1
yesterday, or..   2
3 to 5 days ago?   3
REFUSED   7
DON'T KNOW...   9

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| **BOX 3** |
| |
| **CHECK ITEM SMQ.730:** |
| IF 'PIPES' (CODE 2) IN SMQ.690, GO TO SMQ.740. |
| IF 'CIGARS' (CODE 3) IN SMQ.690, GO TO SMQ.770. |
| IF 'CHEW' (CODE 4) IN SMQ.690, GO TO SMQ.800. |
| IF 'SNUFF' (CODE 5) IN SMQ.690, GO TO SMQ.817. |
| IF 'NICOTINE PRODUCT' (CODE 6) IN SMQ.690, GO TO SMQ.830. |
| IF 'REFUSED' (CODE 77) OR 'DON'T KNOW' (CODE 99) IN SMQ.690, GO TO |
| SMQ.740. |
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SMQ.740   During the past **5 days** (including today), on how many days did {you/he/she} smoke a pipe?

           VERBAL INSTRUCTIONS TO SP:
           Please enter a number.

                               |___|
                               ENTER NUMBER OF DAYS

                               REFUSED 7
                               DON'T KNOW.. 9

SMQ.750   During the past **5 days**, on the days {you/he/she} smoked a pipe, how many pipes did {you/he/she} smoke each day?

           IF R SAYS LESS THAN 1 PIPE PER DAY, ENTER 1.

           VERBAL INSTRUCTIONS TO SP:
           Please enter a number.

                               |___|___|
                               ENTER NUMBER OF PIPES

                               REFUSED 77
                               DON'T KNOW.. 99

SMQ.755   When did {you/he/she} smoke {your/his/her} last pipe? Was it . . .

                               today,... 1
                               yesterday, or... 2
                               3 to 5 days ago? 3
                               REFUSED 7
                               DON'T KNOW.. 9

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                                   BOX 4

           CHECK ITEM SMQ.760:
           IF 'CIGARS' (CODE 3) IN SMQ.690, GO TO SMQ.770.
           IF 'CHEW' (CODE 4) IN SMQ.690, GO TO SMQ.800.
           IF 'SNUFF' (CODE 5) IN SMQ.690, GO TO SMQ.817.
           IF 'NICOTINE PRODUCT' (CODE 6) IN SMQ.690, GO TO SMQ.830.
           IF 'REFUSED' (CODE 77) OR 'DON'T KNOW' (CODE 99) IN SMQ.690, GO TO
           SMQ.770.
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SMQ.770   During the past **5 days** (including today), on how many days did {you/he/she} smoke cigars?

VERBAL INSTRUCTIONS TO SP:
Please enter a number.

|___|
ENTER NUMBER OF DAYS

REFUSED   7
DON'T KNOW...   9

SMQ.780   During the past **5 days**, on the days {you/he/she} smoked cigars, how many cigars did {you/he/she} smoke each day?

IF R SAYS LESS THAN 1 CIGAR PER DAY, ENTER 1.

VERBAL INSTRUCTIONS TO SP:
Please enter a number.

|___|___|
ENTER NUMBER OF CIGARS

REFUSED 77
DON'T KNOW... 99

SMQ.785   When did {you/he/she} smoke {your/his/her} last cigar? Was it . . .

today,...   1
yesterday, or...   2
3 to 5 days ago?   3
REFUSED   7
DON'T KNOW...   9

BOX 5

CHECK ITEM SMQ.790:
IF 'CHEW' (CODE 4) IN SMQ.690, GO TO SMQ.800.
IF 'SNUFF' (CODE 5) IN SMQ.690, GO TO SMQ.817.
IF 'NICOTINE PRODUCT' (CODE 6) IN SMQ.690, GO TO SMQ.830.
IF 'REFUSED' (CODE 77) OR 'DON'T KNOW' (CODE 99) IN SMQ.690, GO TO SMQ.800.

SMQ.800   During the past **5 days** (including today), on how many days did {you/he/she} use chewing tobacco, such as Redman, Levi Garrett or Beechnut?

VERBAL INSTRUCTIONS TO SP:
Please enter a number.

|___|
ENTER NUMBER OF DAYS

REFUSED 7
DON'T KNOW... 9

SMQ.815   When did {you/he/she} last use chewing tobacco? Was it . . .

today,... 1
yesterday, or.. 2
3 to 5 days ago? 3
REFUSED 7
DON'T KNOW... 9

BOX 5A

CHECK ITEM SMQ.816:
IF 'SNUFF' (CODE 5) IN SMQ.690, GO TO SMQ.817.
IF 'NICOTINE PRODUCT' (CODE 6) IN SMQ.690, GO TO SMQ.830.
IF 'REFUSED' (CODE 77) OR 'DON'T KNOW' (CODE 99) IN SMQ.690, GO TO SMQ.817.

SMQ.817   During the past **5 days** (including today), on how many days did {you/he/she} use snuff, such as Skoal, Skoal Bandits, or Copenhagen?

VERBAL INSTRUCTIONS TO SP:
Please enter a number.

|___|
ENTER NUMBER OF DAYS

REFUSED 7
DON'T KNOW... 9

SMQ.819   When did {you/he/she} last use snuff? Was it . . .

today,.. 1
yesterday, or... 2
3 to 5 days ago? 3
REFUSED 7
DON'T KNOW.. 9

BOX 6

CHECK ITEM SMQ.820:
IF 'NICOTINE PRODUCT' (CODE 6) IN SMQ.690, GO TO SMQ.830.
IF 'REFUSED' (CODE 77) OR 'DON'T KNOW' (CODE 99) IN SMQ.690, GO TO
SMQ.830.
OTHERWISE, GO TO END OF SECTION.

SMQ.830   During the past **5 days** (including today), on how many days did {you/he/she} use any product
containing nicotine to help {you/him/her} stop smoking? Include nicotine patches, gum, or any other
product containing nicotine.

VERBAL INSTRUCTIONS TO SP:
Please enter a number.

|___|
ENTER NUMBER OF DAYS

REFUSED 7
DON'T KNOW.. 9

SMQ.840   When did {you/he/she} last use a product containing nicotine? Was it . .

today,.. 1
yesterday, or... 2
3 to 5 days ago? 3
REFUSED 7
DON'T KNOW.. 9