

Smoking Status Core

Collection date of smoking status information:

(DD-MM-YYYY)

SMOKING STATUS

Has the participant smoked at least 100 tobacco cigarettes in his/her entire life?

- ☐ Yes
☐ No

Has the participant used at least 1 tobacco cigarette in his/her entire life (including cigarette, e-cigarette, vape, cigar etc.)?

- ☐ Yes
☐ No

How old was the participant when he/she first started smoking tobacco cigarettes?

(Provide age in years.)

What type of smoker would you currently say you are:

- ☐ An EVERY day smoker
☐ A FAIRLY REGULAR (some days) smoker
☐ A FORMER smoker
☐ Don't Know
☐ Refused

Has the participant EVER smoked tobacco cigarettes EVERY DAY for at least 6 months?

- ☐ Yes
☐ No

On the days that you smoke, on average, how many tobacco cigarettes does the participant smoke?

OR

If you are a former smoker, on the days that you smoked, on average, how many tobacco cigarettes did you smoke?

(Provide average number of cigarettes per day)

Over the past 30 days, on how many days did you smoke?

OR

If you are a former smoker, on average, on how many days did you smoke in a month?

(Every day smokers or former every day smokers should complete with '30'.)

(FOR Former Smokers): About how long has it been since you COMPLETELY quit smoking tobacco cigarettes?

Length of time since quitting measured in:

- ☐ Years
☐ Months
☐ Weeks
☐ Days

TOBACCO (NON-CIGARETTE) - PRODUCT USE**In his/her lifetime, has the participant**

	Yes	No
Smoked at least 50 cigars?	<input type="radio"/>	<input type="radio"/>
Smoked a pipe at least 50 times?	<input type="radio"/>	<input type="radio"/>
Used an e-cigarette or vape at least 50 times?	<input type="radio"/>	<input type="radio"/>
Used snuff, (such as Skoal, Skoal Bandit or Copenhagen) at least 20 times?	<input type="radio"/>	<input type="radio"/>
Used chewing tobacco (such as Redman, Levi Garrett or Beechnut) at least 20 times?	<input type="radio"/>	<input type="radio"/>

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