

## Section D: Smoking and Other Tobacco Products

The next questions are about your history of using tobacco products.

1. Have you smoked 100 or more cigarettes in your entire life? SMQ020\_R2 FMT\_YES\_NO.  
☐ Yes ☐ No → Go to question 11, page 14
  
2. How old were you when you started smoking cigarettes regularly? SMQ030\_R2 FMT\_NUMERIC.  
 Enter age when you started smoking:
  
3. Do you smoke cigarettes now? SMQ040\_R2 FMT\_YES\_NO.  
☐ Yes ☐ No → Go to question 9, page 14
  
4. Is your usual cigarette brand menthol or non-menthol? SMQ045\_R2 FMT\_SMQ045.  
☐ Menthol ☐ Non-menthol
  
5. On average, when you smoked during the past 30 days, about how many cigarettes did you smoke per day? *If you smoked less than 1 cigarette per day, enter 1 (1 pack = 20 cigarettes).*  
 Enter number of cigarettes per day:   SMQ050\_R2 FMT\_NUMERIC.
  
6. For about how many years have you smoked this amount? SMQ060\_R2 FMT\_NUMERIC.  
 Enter number of years:
  
7. Would you like to completely quit smoking cigarettes? SMQ064\_R2 FMT\_YES\_NO.  
☐ Yes ☐ No
  
8. During the past 12 months, has a doctor or other health professional talked to you about your smoking? SMQ065\_R2 FMT\_YES\_NO.  
☐ Yes ☐ No

Go to question 11, page 14 →

Self-Administered Questionnaire (SAQ)

Please answer questions 9 and 10 *only if* you answered NO to question 3. Otherwise, begin with question 11.

9. How old were you when you stopped smoking? SMQ120\_R2 FMT\_NUMERIC.

Enter the age you stopped smoking:

10. On average, over the entire time you smoked, about how many cigarettes did you smoke per day? *If you smoked less than 1 cigarette per day, enter 1 (1 pack = 20 cigarettes).*

Enter number of cigarettes daily:

SMQ140\_R2 FMT\_NUMERIC.

Everyone should answer the following questions.

Now think about a typical week.

11. How many hours per week are you currently exposed to cigarette smoke in social settings outside your own home? *(This would include time spent with friends or relatives who smoke, time spent in restaurants or taverns, or other social affairs where people are smoking.)*

Enter hours per week:

SMQ230\_R2 FMT\_NUMERIC.

12. Do any people currently smoke cigarettes inside your home?

☐ Yes

☐ No

SMQ185\_R2 FMT\_YES\_NO.

The next questions are about your use of tobacco products other than cigarettes (such as cigars, pipes, water pipes, hookahs, very small cigars that look like cigarettes, bidis, or cigarillos).

13. Have you ever smoked tobacco products other than cigarettes? *(Do not include electronic cigarettes or e-cigarettes.)*

☐ Yes

☐ No

SMQ233\_R2 FMT\_YES\_NO.

14. Do you now smoke tobacco products other than cigarettes every day, some days, or not at all?

☐ Every day

☐ Some days

☐ Not at all

SMQ240\_R2 FMT\_SMQFREQ.

15. Have you ever used any smokeless tobacco products, such as chewing tobacco, snuff, snus, dip, orbs, sticks, or strips?

- ☐ Yes ☐ No

SMQ250\_R2

FMT\_YES\_NO.

16. Do you now use any smokeless tobacco products, such as chewing tobacco, snuff, snus, dip, orbs, sticks, or strips?

- ☐ Every day  
☐ Some days  
☐ Not at all

SMQ260\_R2

FMT\_SMQFREQ.

17. In the past 12 months, how often has tobacco smoke entered your living space from somewhere else in or around your home (for example, from a neighbor)?

- ☐ Most of the time  
☐ Often  
☐ Sometimes  
☐ Rarely  
☐ Never

SMQ270\_R2

FMT\_SMQ270\_.

18. During the past 7 days, on how many days did you ride in a vehicle where someone other than you was smoking tobacco? *If none, then enter 0.*

Enter the number of days:

- ☐ Don't know

SMQ280\_R2

FMT\_NUMERIC.

19. Not counting motorcycles, in the vehicles that you or your family members who live with you own or lease, is smoking...

- ☐ Always allowed in all vehicles  
☐ Sometimes allowed in at least one vehicle  
☐ Never allowed in any vehicle  
☐ I/we don't own or lease a vehicle

SMQ290\_R2

FMT\_SMQ290\_.

Self-Administered Questionnaire (SAQ)

**20. Have you ever used electronic cigarettes, or e-cigarettes?**

*An electronic cigarette, or e-cigarette, is a new product that looks like a regular cigarette, but is not lighted like a cigarette. It runs on a battery and has a smoke-like vapor that is produced electronically. The vapor contains nicotine, but the e-cigarette does not contain or burn any tobacco.*

- ☐ Yes      ☐ No

SMQ300\_R2

FMT\_YES\_NO.

**21. Do you now use electronic cigarettes (e-cigarettes) every day, some days, or not at all?**

- ☐ Every day  
☐ Some days  
☐ Not at all

SMQ310\_R2

FMT\_SMQFREQ.

**22. Do you think secondhand smoke is...**

- ☐ Very harmful to one's health  
☐ Somewhat harmful to one's health  
☐ Not very harmful to one's health  
☐ Not harmful to one's health

SMQ320\_R2

FMT\_SMQ320\_.