HALT-C Trial

Cigarette Smoking History– Risk Factors AS

Form # 142 Version B: 12/03/2001

SECTION A: GENERAL INFORMATION

A1. Affix ID Label H	lere →			
A2. Patient initials:				
A3. Visit number: _				
A4. Visit Date: MM	/ DD / YYYY/	//		
A5. Initials of person completing Section A:				
Note: This is a patient administered form.				

SECTION B: HISTORY OF CIGARETTE SMOKING

Circle or write in the correct answer.

- B1. Have you ever smoked cigarettes?
 - 1. YES (CONTINUE TO QUESTION B2)
 - 2. NO (STOP HERE)
- B2. How old were you when you started to smoke regularly? (Write in the age <u>or</u> circle the phrase that applies to you.)

____ Age in Years

- 1. I'VE NEVER SMOKED REGULARLY (STOP HERE)
- -8. I DO NOT KNOW

B3. Do you smoke cigarettes now?

- 1. YES (GO TO QUESTION B6)
- **2.** NO
- B4. *If you do not currently smoke cigarettes:* How old were you when you last quit smoking?

____ Age in Years

B5. If you do not currently smoke cigarettes:

On average, how many cigarettes did you smoke per day before quitting? (Circle one answer.)

- **1.** 1-5 cigarettes per day
- **2.** 6-14 cigarettes per day (1/2 pack per day)
- **3.** 15-24 cigarettes per day (1 pack per day)
- **4.** 25-34 cigarettes per day (1 ½ packs per day)
- 5. 35-44 cigarettes per day (2 packs per day)
- 6. 45 or more cigarettes per day (more than 2 packs per day)

B6. If you currently smoke cigarettes:

On average, how many cigarettes do you now smoke per day? (Circle one answer.)

- **1.** 1-5 cigarettes per day
- 2. 6-14 cigarettes per day (1/2 pack per day)
- **3.** 15-24 cigarettes per day (1 pack per day)
- **4.** 25-34 cigarettes per day (1 ½ packs per day)
- 5. 35-44 cigarettes per day (2 packs per day)
- 6. 45 or more cigarettes per day (more than 2 packs per day)

Thank you for completing this questionnaire.