

## OPTIONAL QUESTIONNAIRE

### SECTION B. SMOKING

**Optional detailed information about smoking habits**

**1. When you were smoking, did you generally inhale the smoke: only to your mouth, down your throat only, or down into your chest? MOUNT ONLY 1 / THROAT 2 / CHEST 3 / DK 8888**

**2. Beginning when you started smoking regularly please indicate any changes in your smoking consumption of at least 5 cigarettes per day.**

From age	To age	Main commercial brand	How many on average			Filtered (1=yes 2=no)
			Number	1=day 2=week 3=month		
/_/_/_/	/_/_/_/	_____	/_/_/_/	/_/_/	/_/_/	
/_/_/_/	/_/_/_/	_____	/_/_/_/	/_/_/	/_/_/	
/_/_/_/	/_/_/_/	_____	/_/_/_/	/_/_/	/_/_/	
/_/_/_/	/_/_/_/	_____	/_/_/_/	/_/_/	/_/_/	
/_/_/_/	/_/_/_/	_____	/_/_/_/	/_/_/	/_/_/	

**3. Beginning when you started smoking regularly please indicate any changes in your smoking consumption of cigar.**

From age	To age	Main commercial brand	How many on average	
			Number	1=day 2=week 3=month
/_/_/_/	/_/_/_/	_____	/_/_/_/	/_/_/
/_/_/_/	/_/_/_/	_____	/_/_/_/	/_/_/
/_/_/_/	/_/_/_/	_____	/_/_/_/	/_/_/

**4. Beginning when you started smoking regularly please indicate any changes in your smoking consumption of pipe.**

From age	To age	Main commercial brand	How many on average	
			Grams	1=day 2=week 3=month
/_/_/_/	/_/_/_/	_____	/_/_/_/	/_/_/
/_/_/_/	/_/_/_/	_____	/_/_/_/	/_/_/
/_/_/_/	/_/_/_/	_____	/_/_/_/	/_/_/

**5. Beginning when you started smoking regularly please indicate any changes in your smoking consumption of snus/snuff/chewing tobacco.**

From age	To age	Main commercial brand	How many on average Number	1=day 2=week 3=month
/_/_/	/_/_/	_____	/_/_/	/_/_/
/_/_/	/_/_/	_____	/_/_/	/_/_/
/_/_/	/_/_/	_____	/_/_/	/_/_/

**Optional information about second-hand smoking**

**1. In general, have you ever been exposed to other people’s smoke on a daily or regular basis?** YES 1 / NO 2 / DK 8888

**For different exposure periods please respond:**

**2. At home:**

**2a. Exposure time.** FROM AGE \_\_\_\_ TO AGE \_\_\_\_ YEARS

**2b. How many people used to smoke at the same time in your presence?** \_\_\_\_\_ PERSONS

**2c. How many hours a day/week/month were you usually exposed to other people’s smoke?**  
 \_\_\_\_ DAY 1/ \_\_\_\_ WEEK 2 / \_\_\_\_ MONTH 3/ DK 8888

**3. At work:**

**3a. Exposure time.** FROM AGE \_\_\_\_ TO AGE \_\_\_\_ YEARS

**3b. How many people used to smoke at the same time in your presence?** \_\_\_\_\_ PERSONS

**3c. How many hours a day/week/month were you usually exposed to other people’s smoke?**  
 \_\_\_\_ DAY 1/ \_\_\_\_ WEEK 2 / \_\_\_\_ MONTH 3/ DK 8888

**4. Other places:**

**4a. Exposure time.** FROM AGE \_\_\_\_ TO AGE \_\_\_\_ YEARS

**4b. How many people used to smoke at the same time in your presence?** \_\_\_\_\_ PERSONS

**4c. How many hours a day/week/month were you usually exposed to other people’s smoke?**  
 \_\_\_\_ DAY 1/ \_\_\_\_ WEEK 2 / \_\_\_\_ MONTH 3/ DK 8888

**GUIDELINES FOR COMPLETING THE OPTIONAL SECTIONS OF THE QUESTIONNAIRE**

This questionnaire was designed for case-control studies. Questionnaire must be applied by trained interviewers and questions must not be modified in any way.

**Section B. Smoking****Optional detailed information about smoking habits**

1. If the patient reports to ever have smoked, indicate depth of inhalation of smoke
2. If the patient reports to ever have smoked, for every type of tobacco smoked (cigarette, cigar, pipe, or snus/snuff/chewing tobacco according to the countries' traditions) indicate relevant changes in smoking habits (5 per day)
  - 2a. Indicate age of beginning and age of end for each period of specific consumption habits
  - 2b. Indicate the main commercial brand of tobacco product smoked during each period of specific consumption habits
  - 2c. Indicate the average number of cigarettes smoked by the patient either by day, week, or month during each period of specific consumption habits
  - 2d. Indicate the type of cigarettes (with/without filter/ both) during each period of specific consumption habits

**Optional information about second-hand smoking**

1. Indicate if the patient has been ever exposed to other people's smoke
2. If the patient reports have been exposed to other people's smoke, please indicate exposures for home and for different exposure periods
  - 2a. Indicate age of beginning and age of end for each period of specific exposure
  - 2b. Indicate the average number of people smoking at the same time in front of the patient during each period of specific exposure
  - 2c. Indicate the time (hours a day/week/month) exposed to smoke during each period of specific exposure
3. If the patient reports have been exposed to other people's smoke, please indicate exposures for work and for different exposure periods
  - 3a. Indicate age of beginning and age of end for each period of specific exposure

3b. Indicate the average number of people smoking at the same time in front of the patient during each period of specific exposure

3c. Indicate the time (hours a day/week/month) exposed to smoke during each period of specific exposure