

Smoking History

Name: _____ Sex: Male Female Date: _____

- How soon after you wake up do you smoke your first cigarette?
 Within 5 minutes 6-30 minutes more than 30 minutes
- Which of the following statements best describes you interest in quitting:
 I wish to quit now.
 I want to quit smoking soon, but not right away.
 I want to continue smoking but have thought about quitting.
 I want to continue to smoke and have no interest in quitting.
 Other: _____
- How many serious attempts (one day or more) have you made at quitting smoking in the past year?
 0 1 2 3 4 5 6 or more
- How much pressure do you get from family members or close friends to stop smoking?
 No pressure Lots of pressure
- Do you worry that you smoke more than is safe?
 Not at all Sometimes Most of the time
- Have you tried quitting in the last six months? Yes No
- What method(s) have you used to help you stop smoking in the past? (Check all that apply)
 Cold Turkey Nicotine patch Nicotine gum
 Hypnosis Acupuncture Group stop smoking clinic/program
 Other: _____
- How many years have you been smoking?
 Less than 5 5 to 10 11 to 15 16 to 20 More than 20
- Which of the following would keep you from succeeding in stopping smoking? (check all that apply)
 Little support from family or friends Cravings to smoke are too intense
 Fear of weight gain No will power
 Fear of failure Too much stress
 Other: _____
- In an average day, how many cigarettes do you usually smoke?
 Less than half a pack Half to 1 pack 1 to 2 packs 16 to 20 More than 3 packs