

ARE YOU READY TO QUIT SMOKING?

Name _____ Date ____/____/____

How soon after you wake up do you smoke your first cigarette?

Within 5 minutes _____ 6 to 30 minutes _____ more than 30 minutes _____

Which of the following statements best describes your interest in quitting:

I wish to quit now _____

I wish to quit smoking soon, but not right away _____

I want to continue smoking, but have thought about quitting _____

I want to continue smoking and have no interest in quitting _____

How many attempts —one day or more— have you made at quitting smoking in the past year until today?

0 _____

1 _____

2 _____

3 _____

4 _____

5 _____

6+ _____

How much pressure do you get from family members or close friends to stop smoking?

No pressure _____

A lot of pressure _____