**Smoking Cessation Questionnaire**

# **Birmingham Public Health Measurement Toolbox**

1. What is your current smoking status? (Select all that apply)

[ ] Current smoker – cigarette/pipe

[ ] Current smoker – vape/e-cigs only

[ ] Current smoker – shisha

[ ] Ex-smoker

[ ] Never smoked

1. If you are a current smoker, how many cigarettes/pipes/vapes do you smoke on average each day?
2. Do you regularly use any of the following? (Select all that apply)

[ ] Khat

[ ] Paan

[ ] Betel Nut

1. Do you want to stop smoking?

[ ] Yes

[ ] No

[ ] Not applicable