

QUESTIONNAIRE

Code _____

Sex

- Male
- Female

Nationality _____

Age _____ Date of birth _____

Do you smoke currently?

- YES
- NO
- Non-responder

How many subjects do you usually live?

- 1
- 2
- 3
- 4
- > 4
- Non-responder

Number of smokers among subjects who usually live with you

- 1
- 2
- 3
- 4
- > 4
- none
- Non-responder