
Underage Tobacco Use Survey (UTUS) – Main Questionnaire (Online)

AGE. What is your age?

_____ years (DISPLAY WARNING IF <13 OR >20)
(IF OUT OF RANGE AFTER 3 TIMES, TERMINATE)

IF AGE 13-17, CONFIRM THAT PARENTAL CONSENT WAS PREVIOUSLY OBTAINED

- IF PARENTAL CONSENT NOT PREVIOUSLY OBTAINED, TERMINATE THE INTERVIEW

SEX. What is your sex?

Male - 1
Female - 2

AWARE / EVER USED

(Question 3a last modified in Q3'25)

- 3a. The next several questions are about electronic cigarettes or e-cigarettes, such as JUUL[®], Vuse[®], NJOY[®], Geek Bar[®], Elf Bar[®], or Lost Mary[®]. You may also know them as vapes, mods, e-cigs, e-hookahs, or vape-pens.

For the rest of this survey, these products and devices will be called e-cigarettes.

E-Cigarettes are battery powered devices that usually contain a nicotine-based liquid that is vaporized and inhaled.

Have you ever seen or heard of e-cigarettes before this study?

Yes - 1
No - 2

(ASK Q.4a IF 'YES' AT Q.3a)

- 4a. Have you **ever used** an e-cigarette, even once or twice?

Yes - 1
No - 2

- 3b. Have you ever seen or heard of cigarettes (ones that have to be lit and burned) before this study?

Yes - 1
No - 2

(ASK Q.4b IF 'YES' AT Q.3b)

- 4b. Have you **ever smoked** a cigarette, even one or two puffs?

Yes - 1
No - 2

- 3c. The next question is about the use of cigars, cigarillos, or little cigars such as Swisher Sweets[®], Black and Mild[®], Garcia y Vega[®], Cheyenne[™], White Owl[®], or Dutch Masters[®]. Have you ever seen or heard of cigars, cigarillos, or little cigars before this study?

Yes - 1
No - 2

(ASK Q.4c IF 'YES' AT Q.3c)

- 4c. Have you **ever smoked** a cigar, cigarillo, or little cigar, even one or two puffs?

Yes - 1
No - 2

AWARE / EVER USED (Continued)

- 3d. The following question is about the use of chewing tobacco, snuff, or dip, such as Copenhagen®, Grizzly®, Skoal®, or Longhorn®. Do not think about snus or dissolvable tobacco products when answering this question.
Have you ever seen or heard of chewing tobacco, snuff, or dip before this study?

Yes - 1
No - 2

(ASK Q.4d IF 'YES' AT Q.3d)

- 4d. Have you **ever used** chewing tobacco, snuff, or dip, even just a small amount?

Yes - 1
No - 2

- 3e. The next question is about smoking tobacco in a hookah, which is a type of waterpipe. Shisha (or hookah tobacco) is smoked in a hookah.

Have you ever seen or heard of smoking tobacco in a hookah or waterpipe before this study?

Yes - 1
No - 2

(ASK Q.4e IF 'YES' AT Q.3e)

- 4e. Have you **ever smoked** tobacco in a hookah or waterpipe, even one or two puffs?

Yes - 1
No - 2

- 3f. And the following question is about pipes filled with tobacco (not hookah or waterpipe).
Have you ever seen or heard of pipes filled with tobacco (not hookah or waterpipe) before this study?

Yes - 1
No - 2

(ASK Q.4f IF 'YES' AT Q.3f)

- 4f. Have you **ever used** pipes filled with tobacco (not hookah or waterpipe), even just one time?

Yes - 1
No - 2

- 3g. The next question is about snus, which is a type of smokeless tobacco product. It usually comes in small pouches, although some snus may be sold as loose snus. Typically, with most kinds of smokeless tobacco, you spit, but you do not need to spit when using snus. Common brands include Camel Snus® or General Snus®. Do not think about chewing tobacco, snuff, or dip when answering this question.

Have you ever seen or heard of snus before this study?

Yes - 1
No - 2

AWARE / EVER USED (Continued)

(ASK Q.4g IF 'YES' AT Q.3g)

4g. Have you **ever used** Snus, such as Camel Snus or General Snus, even just one time?

Yes - 1

No - 2

(Question 3h modified in Q1'23)

3h. The next section is about "heated tobacco products" such as IQOS®, glo™, and Eclipse®. You may know them as heated cigarettes or "heat-not-burn" tobacco products. "Heated tobacco products" heat tobacco sticks ("heatsticks") or capsules to produce a vapor. They are different from e-cigarettes, which heat a liquid to produce a vapor.

Do not think about e-cigarettes when answering these questions.

Have you ever seen or heard of "heated tobacco products" before this study?

Yes - 1

No - 2

(ASK Q.4h IF 'YES' AT Q.3h)

4h. Have you **ever used** a "heated tobacco product", even just one time?

Yes - 1

No - 2

(Questions 3h1, 3h8, 3h9, and 4h1 added in Q2'21 and removed in Q2'24)

AWARE / EVER USED (Continued)

(Question 3i last modified in Q3'25)

- 3i. The next section is about “nicotine pouches” such as Zyn™, on!®, Juice Head® or Velo®. These small, flavored pouches contain nicotine that comes from tobacco. Users place them in their mouth. Nicotine pouches are different from other smokeless tobacco products such as snus, dip, or chewing tobacco, because they do not contain any tobacco leaf.

Do not think about other forms of smokeless tobacco, such as chewing tobacco, snuff, dip, snus, or products used to quit tobacco like nicotine gum (such as Nicorette®) or Nicoderm® when answering these questions.

Have you ever seen or heard of “nicotine pouches” before this study?

Yes - 1
No - 2

(Question 3i1 added in Q4'21; modified in Q1'23)

- 3i1. [Ask if ‘Yes’ at Q.3i] How did you first see or hear of nicotine pouches?

A friend/peer/classmate told me about them	-1
A family member told me about them	-2
Advertisement at gas stations, convenience stores, or other retail stores	-3
Advertisement in newspapers or magazines	-4
Advertisement at festivals, nightclubs, or bars	-5
Advertisement on websites or social media sites	-6
Heard or read a story in the news	-7
Saw nicotine pouches in person in a store, mall, convenience store	-8
Saw someone else using a nicotine pouch	-9
Saw them on social media (e.g., YouTube or Instagram)	-10
Other, specify _____	-90
Don't know/don't recall	-99

(ASK Q.4i IF ‘YES’ AT Q.3i) (Question 4i modified in Q1'23)

- 4i. Have you **ever used** nicotine pouches, even just one time?

Yes - 1
No - 2

AWARE / EVER USED (Continued)

(Questions 3ii, 3ii1 and 4i1 added in Q1'23)

3ii. The next section is about other oral nicotine products, such as Lucy® or Rogue®, that might come in the form of non-medical lozenges, gum, tablets, and/or gummies.

Do not think about nicotine pouches, other forms of smokeless tobacco, such as chewing tobacco, snuff, dip, snus, or products used to quit tobacco like nicotine gum (such as Nicorette®) or Nicoderm® when answering these questions.

Have you ever seen or heard of such other oral nicotine products before this study?

Yes - 1

No - 2

3ii1. [Ask if 'Yes' at Q.3ii] How did you first see or hear of these other oral nicotine products that might come in the form of non-medical lozenges, gum, tablets, and/or gummies?

A friend/peer/classmate told me about them	-1
A family member told me about them	-2
Advertisement at gas stations, convenience stores, or other retail stores	-3
Advertisement in newspapers or magazines	-4
Advertisement at festivals, nightclubs, or bars	-5
Advertisement on websites or social media sites	-6
Heard or read a story in the news	-7
Saw oral nicotine products in person in a store, mall, convenience store	-8
Saw someone else using an oral nicotine product	-9
Saw them on social media (e.g., YouTube or Instagram)	-10
Other, specify _____	-90
Don't know/don't recall	-99

(ASK Q.4i1 IF 'YES' AT Q.3ii)

4i1. Have you **ever used** an oral nicotine product in the form of non-medical lozenges, gum, tablets, and/or gummies, even just one time?

Yes - 1

No - 2

E-CIGARETTE SECTION

(If ever tried E-Cigarettes at Q.4a, show intro and ask Q.5a; otherwise, skip to directional before Cigarette section.)

(Intro text last modified in Q3'25)

The next several questions are about electronic cigarettes or e-cigarettes such as JUUL, Vuse, NJOY, Geek Bar, Elf Bar, or Lost Mary. You may also know them as vapes, mods e-cigs, e-hookahs, or vape-pens.

5a. [If Q4a is 'Yes'] How old were you when you **first used** an e-cigarette, even once or twice?

- | | | | |
|------------------------|----|--------------|-----|
| 8 years old or younger | -1 | 15 years old | -8 |
| 9 years old | -2 | 16 years old | -9 |
| 10 years old | -3 | 17 years old | -10 |
| 11 years old | -4 | 18 years old | -11 |
| 12 years old | -5 | 19 years old | -12 |
| 13 years old | -6 | 20 years old | -13 |
| 14 years old | -7 | | |

RESPONSE VALIDATION: If age of onset > current age, ask:

5av. ***“Earlier you mentioned that you were [INSERT AGE] years old, but now you just said that you were [INSERT Q.5a response] years old when you first used an e-cigarette. Please confirm the age that you first used an e-cigarette.”***

[REDISPLAY RESPONSE LIST FROM Q.5a AND RECORD VALIDATION RESPONSE IN A SEPARATE VARIABLE]

[ONLY ASK VALIDATION ONCE. IF STILL FAIL AFTER VALIDATION, ACCEPT RESPONSE AND RECORD “UNKNOWN AGE OF ONSET”]

6a. [If age of onset = current age -1] Did you first use an e-cigarette within the past 12 months (that is, starting from MM/DD/YYYY)?

- | | |
|-----|-----|
| Yes | - 1 |
| No | - 2 |

(Questions 7a and 7a1 added in Q1'23)

7a. [If Q4a is 'Yes'] Why did you **first use** an e-cigarette? *(select all that apply)*

- | | |
|---|-----|
| A friend used them | -1 |
| A family member used them | -2 |
| To try to quit using other tobacco products, such as cigarettes | -3 |
| They cost less than other tobacco products, such as cigarettes | -4 |
| They were easier to get than other tobacco products, such as cigarettes | -5 |
| I've seen people on TV, online, or in movies use them | -6 |
| They are less harmful than other forms of tobacco, such as cigarettes | -7 |
| They were available in flavors, such as menthol, mint, candy, fruit, or chocolate | -8 |
| I could use them unnoticed at home or at school | -9 |
| I could use them to do tricks | -10 |
| I was curious about them | -11 |
| I was feeling anxious, stressed, or depressed | -12 |
| To get a high or buzz from nicotine | -13 |
| I used them for some other reason (specify) _____ | -90 |

E-CIGARETTE SECTION (CONTINUED)

(Question 7a1 moved after Q18a in Q3'23)

- 8a. [If Q4a is 'Yes'] In total, how many times have you used an e-cigarette in your **entire life**? Count each occasion that you used an e-cigarette, even if the occasion was just a few puffs.

1 time, even just a few puffs	-1
2 to 10 times	-2
11 to 20 times	-3
21 to 50 times	-4
51 to 99 times	-5
100 or more times	-6
Don't know	-99
Refused	-98

- 9a. [If Q4a is 'Yes'] When was the last time you used an e-cigarette, even one or two times?
(Please select the first answer that fits.)

Earlier today	-1
Not today but sometime during the past 7 days	-2
Not during the past 7 days but sometime during the past 30 days	-3
Not during the past 30 days but sometime during the past 6 months	-4
Not during the past 6 months but sometime during the past year	-5
1 to 4 years ago	-6
5 or more years ago	-7

E-CIGARETTE SECTION (CONTINUED)

**Questions 10-18 are for past 30 day (P30D) users
(If Q9a is 1-3, ask Q.10a; otherwise, skip to Q.19a.)**

10a. [If Q9a is 1-3] During the **past 30 days**, on how many days did you use e-cigarettes?

__ _ Number of days (1-30)

11a. [If Q9a is 1-3] During the past 30 days, **on the days you used** an e-cigarette, about how many times per day did you use it?

1 time per day	-1
2 to 5 times per day	-2
6 to 10 times per day	-3
11 to 20 times per day	-4
More than 20 times per day	-5

(Question 12a1 and 12a2 punches last modified in Q3'25)

12a1. [If Q9a is 1-3] Which of the following best describes the types of e-cigarettes you have used in the past 30 days? (*select all that apply*)

A disposable e-cigarette (for example, Elf Bar or Puff/Puff Bar)	-1
An e-cigarette that uses pre-filled pods or cartridges (for example, JUUL or Vuse)	-2
An e-cigarette with a tank that you refill with liquids	-3
A mod system (an e-cigarette that can be customized by the user with their own combination of batteries or other parts)	-4
I don't know the type	-99

12a2. [If Q12a1 is 1-4 and more than one selected] Which of the following best describes the type of e-cigarette you used most often? (*select one answer*) [Only display types mentioned at Q.12a1 and "don't know"]

A disposable e-cigarette (for example, Elf Bar or Puff/Puff Bar)	-1
An e-cigarette that uses pre-filled pods or cartridges (for example, JUUL or Vuse)	-2
An e-cigarette with a tank that you refill with liquids	-3
A mod system (an e-cigarette that can be customized by the user with their own combination of batteries or other parts)	-4
I don't know the type	-99

E-CIGARETTE SECTION (CONTINUED)

(Brand list for Questions 12a and 13a last modified in Q1'26)

12a. [If Q9a is 1-3] During the past 30 days, what e-cigarette brand or brands did you use? *(select all that apply)***(Display brand list)**

BLU	-1	MR. FOG [Added Q1'25]	-21
BREEZE [Added Q1'25]	-19	NJOY	-6
ELFBAR or EBDESIGN or EBCREATE	-13	POSH [Added Q1'23]	-16
[Added Q1'23; Modified Q4'23]			
ESCO BARS [Added Q1'24]	-17	PUFF or PUFF BAR	-7
FOGER [Added Q1'26]	-23	RAZ [Added Q3'25]	-22
GEEK BAR [Added Q1'25]	-20	SMOK (including NOVO)	-8
HYDE [Added Q4'21]	-12	STIG	-9
JUUL	-3	SUORIN	-10
LEAP [Added Q1'23]	-14	VUSE	-11
LOGIC	-4	Some other brand not listed here	-90 (specify) _____
LOST MARY [Added Q1'24]	-18	Not sure	-99
MOJO [Added Q1'23]	-15		

13a. [If more than 1 brand mentioned at Q.12a] During the past 30 days, what brand of e-cigarettes did you usually use? *(select one answer)* [Only display brands mentioned at Q.12a, "no usual" and "not sure"]

[PROGRAMMING NOTE: AUTOMARK Q.13a IF ONLY 1 BRAND MENTIONED AT Q.12a]

I did not have a usual brand	-97	MR. FOG [Added Q1'25]	-21
BLU	-1	NJOY	-6
BREEZE [Added Q1'25]	-19	POSH [Added Q1'23]	-16
ELFBAR or EBDESIGN or EBCREATE	-13	PUFF or PUFF BAR	-7
[Added Q1'23; Modified Q4'23]			
ESCO BARS [Added Q1'24]	-17	RAZ [Added Q3'25]	-22
FOGER [Added Q1'26]	-23	SMOK (including NOVO)	-8
GEEK BAR [Added Q1'25]	-20	STIG	-9
HYDE [Added Q4'21]	-12	SUORIN	-10
JUUL	-3	VUSE	-11
LEAP [Added Q1'23]	-14	Some other brand	-90 (specify) _____
LOGIC	-4	not listed here	
LOST MARY [Added Q1'24]	-18	Not sure	-99
MOJO [Added Q1'23]	-15		

(Questions 14a and 15a list last modified in Q3'25)

14a. [If Q9a is 1-3] What flavor or flavors were the e-cigarettes that you used during the past 30 days? *(select all that apply)*

Tobacco	-1
Menthol	-2
Mint	-3
Spice (such as cinnamon, vanilla, or clove) [Modified Q3'25]	-4
Fruit	-5
Chocolate	-6
Alcoholic drinks (such as wine, cognac, margarita, or other cocktails)	-7
Non-alcoholic drinks (such as coffee, soda, lemonade, or other beverage) [Added Q3'25]	-9
Candy, desserts, or other sweets	-8
Unflavored [Added Q3'25]	-10
Some other flavor not listed here (specify) _____	-90
Don't Know	-99

E-CIGARETTE SECTION (CONTINUED)

15a. [If more than one response at Q.14a] During the past 30 days, which flavor variety did you usually use? (*select one answer*) [Only display flavors mentioned at Q.14a, "no usual" and "don't know"]
[PROGRAMMING NOTE: AUTOMARK Q.15a IF ONLY 1 FLAVOR MENTIONED AT Q.14a]

I did not have a usual flavor	-97
Tobacco	-1
Menthol	-2
Mint	-3
Spice (such as cinnamon, vanilla, or clove) [Modified Q3'25]	-4
Fruit	-5
Chocolate	-6
Alcoholic drinks (such as wine, cognac, margarita, or other cocktails)	-7
Non-alcoholic drinks (such as coffee, soda, lemonade, or other beverage) [Added Q3'25]	-9
Candy, desserts, or other sweets	-8
Unflavored [Added Q3'25]	-10
Some other flavor not listed here (specify) _____	-90
Don't Know	-99

(Questions 15aa-15ab added in Q3'25)

15aa. [If Q.14a is any of 1-9, 90 or 99] Did any of the flavors that you used in the past 30 days have names or descriptions that included the word "ice" or "iced" (for example, blueberry ice or strawberry ice)?

Yes	- 1
No	- 2
Don't Know	-99

15ab. [If Q.14a is any of 1-9, 90 or 99] Did any of the flavors that you used in the past 30 days have a name that **did not describe a specific flavor**, such as "solar," "purple," "jazz," "island bash," "fusion" or some other word or phrase?

Yes	- 1
No	- 2
Don't Know	-99

(Question 15a1 added in Q1'23)

15a1. [If Q9a is 1-3] Did any of the e-cigarettes that you used in the past 30 days contain nicotine?
(*select one answer*)

Yes, contained nicotine (without any flavorings)	-1
Yes, contained nicotine and also flavors	-2
No, did not contain nicotine (flavors only)	-3
Other (specify) _____	-4
Don't know	-5

(Question 16a modified in Q1'23)

16a. [If Q9a is 1-3] During the past 30 days, how did you usually get your e-cigarettes, pods, tanks, cartridges, or e-liquid refills? (*select one answer*)

I bought them myself	-1
I had someone else buy them for me	-2
I asked someone to give me some	-3
Someone offered them to me	-4
I got them from a friend	-8
I got them from a family member	-9
I took them from a store or another person	-10
I got them some other way (specify _____)	-90

E-CIGARETTE SECTION (CONTINUED)

(Question 17a deleted in Q1'23)

(Question 17a1 added in Q1'23, modified Q2'24)

17a1. [If Q.16a is response 2, 3, 4, 8, or 9] Earlier you answered that you got or bought your e-cigarette devices, pods, cartridges, or e-liquid refills from another person, such as a friend or family member during the past 30 days. How old was this person? *(select one answer)*

Younger than 18 years old	-1
18 years old	-2
19 years old	-3
20 years old	-4
21 years old or older	-5
I don't know	-99

(Question 18a list last modified in Q3'25)

18a. [If Q16a is "I bought them myself"] During the past 30 days, where did you usually buy your e-cigarette devices, pods, tanks, cartridges, or e-liquid refills? *(select one answer)*

A gas station or convenience store	-1
A grocery store	-2
A drugstore	-3
A mall or shopping center kiosk/stand	-4
(NOT USED)	-5
On the Internet (such as a product website or store website like EBAY or FACEBOOK MARKETPLACE) [TEXT IN PARENTHESIS ADDED Q1'23]	-6
Through the mail	-7
A vape shop	-8
A tobacco specialty store	-9
Through a delivery service (such as DOORDASH or POSTMATES) [ADDED Q1'23]	-10
Some other place not listed here	-90

(Questions 18a1-18a3 added in Q3'24)

18a1. [If Q16a is "I bought them myself"] You mentioned that you usually bought your e-cigarette devices, pods, tanks, cartridges, or e-liquid refills yourself in the past 30 days. During that time, how often were you asked to show proof of age? *(Select one answer)*

Always	-1
Usually	-2
About half of the time	-3
Rarely	-4
Never	-5
Don't remember	-6

E-CIGARETTE SECTION (CONTINUED)

18a2. [If Q18a is response 1-4 OR 6-10] You mentioned that you usually bought your e-cigarette devices, pods, tanks, cartridges, or e-liquid refills [INSERT PARTICIPANT RESPONSE FROM Q18a]. How were you able to buy these products? *(select all that apply)*

PROGRAMMER INSTRUCTIONS

Response from Q18a	TEXT TO PIPE INTO Q18a2
1	at a gas station or convenience store
2	at a grocery store
3	at a drugstore
4	at a mall or shopping center kiosk/stand
6	on the Internet
7	through the mail
8	at a vape shop
9	at a tobacco specialty store
10	through a delivery service

I was not asked to show an ID		-1
I was ID-ed and used a fake ID		-2
I was ID-ed, used my legal ID and it was accepted		-3
I knew the person behind the counter		-4
Other	(specify) _____	-5
Don't know		-6

(Question 18a2a added in Q3'25)

18a2a. [If Q.18a2 is 2 or 3] Was your ID digitally verified or scanned before your purchase?

Yes, my ID was scanned or digitally verified	- 1
No, my ID was visually checked but not scanned	- 2
Don't Know/Not sure	-99

18a3. [If Q16a is "I bought them myself"] In your opinion, how easy is it for people your age to buy e-cigarettes themselves? To answer use a scale from 1 to 5 where '1' means "VERY EASY" and '5' means "VERY DIFFICULT". You can use any number from 1 to 5 to indicate your answer.

Very Easy				Very Difficult
-1	-2	-3	-4	-5

7a1. [If Q9a is 1-3] Why do you **currently use** e-cigarettes? *(select all that apply)*

A friend uses them	-1
A family member uses them	-2
To try to quit using other tobacco products, such as cigarettes	-3
They cost less than other tobacco products, such as cigarettes	-4
They are easier to get than other tobacco products, such as cigarettes	-5
I've seen people on TV, online, or in movies use them	-6
They are less harmful than other forms of tobacco, such as cigarettes	-7
They are available in flavors, such as menthol, mint, candy, fruit, or chocolate	-8
I can use them unnoticed at home or at school	-9
I can use them to do tricks	-10
I am curious about them	-11
Because I feel anxious, stressed, or depressed	-12
To get a high or buzz from nicotine	-13
I use them for some other reason (specify) _____	-90

E-CIGARETTE SECTION (CONTINUED)

19a. [If Q9a > 3 (i.e., lifetime history of use but not in the past 30 days)] Have you completely stopped using e-cigarettes (or vaping)?

Yes - 1
No - 2

20a. [If Q9a = 1-3 (P30D user)] Are you seriously thinking about stopping e-cigarettes (or vaping)?
(Please choose the first answer that fits)

Yes, within the next 30 days -1
Yes, within the next 6 months -2
Yes, within the next 12 months -3
Yes, but not within the next 12 months -4
No, I am not seriously thinking about stopping -5

CIGARETTE SECTION

(If ever tried Cigarettes at Q.4b, show intro and ask Q.5b; otherwise, skip to directional before Cigar section.)

The next several questions are about smoking cigarettes (ones that have to be lit and burned).

5b. [If Q4b is 'Yes'] How old were you when you **first smoked** a cigarette, even one or two puffs?

8 years old or younger	-1	15 years old	-8
9 years old	-2	16 years old	-9
10 years old	-3	17 years old	-10
11 years old	-4	18 years old	-11
12 years old	-5	19 years old	-12
13 years old	-6	20 years old	-13
14 years old	-7		

RESPONSE VALIDATION: If age of onset > current age, ask:

5bv. *“Earlier you mentioned that you were [INSERT AGE] years old, but now you just said that you were [INSERT Q.5b response] years old when you first smoked a cigarette. Please confirm the age that you first smoked a cigarette.”*

[REDISPLAY RESPONSE LIST FROM Q.5b AND RECORD VALIDATION RESPONSE IN A SEPARATE VARIABLE]

[ONLY ASK VALIDATION ONCE. IF STILL FAIL AFTER VALIDATION, ACCEPT RESPONSE AND RECORD “UNKNOWN AGE OF ONSET”]

6b. [If age of onset = current age -1] Did you first smoke a cigarette within the past 12 months (that is, starting from MM/DD/YYYY)?

Yes - 1
No - 2

8b. [If Q4b is 'Yes'] How many cigarettes have you smoked in your **entire life**? A pack usually has 20 cigarettes in it.

1 or more puffs but never a whole cigarette	-1
1 cigarette	-2
2 to 10 cigarettes (about ½ a pack total)	-3
11 to 20 cigarettes (about ½ a pack to 1 pack)	-4
21 to 50 cigarettes (more than 1 pack, but less than 3 packs)	-5
51 to 99 cigarettes (more than 2 ½ packs, but less than 5 packs)	-6
100 or more cigarettes (5 packs or more)	-7

CIGARETTE SECTION (CONTINUED)

9b. [If Q4b is 'Yes'] When was the last time you smoked a cigarette, even one or two puffs? (*Please select the first answer that fits.*)

Earlier today	-1
Not today but sometime during the past 7 days	-2
Not during the past 7 days but sometime during the past 30 days	-3
Not during the past 30 days but sometime during the past 6 months	-4
Not during the past 6 months but sometime during the past year	-5
1 to 4 years ago	-6
5 or more years ago	-7

Questions 10-18 are for past 30 day (P30D) users
(If Q9b is 1-3, ask Q.10b; otherwise, skip to Q.19b.)

10b. [If Q9b is 1-3] During the **past 30 days**, on how many days did you smoke cigarettes?

__ _ Number of days (1-30)

11b. [If Q9b is 1-3] During the past 30 days, **on the days you smoked**, about how many cigarettes did you smoke per day? A pack usually has 20 cigarettes in it.

Less than 1 cigarette per day	-1
1 cigarette per day	-2
2 to 5 cigarettes per day	-3
6 to 10 cigarettes per day	-4
11 to 20 cigarettes per day	-5
More than 20 cigarettes per day	-6

(Brand list for Questions 12b and 13b last modified in Q4'23)

12b. [If Q9b is 1-3] During the past 30 days, what brand or brands of cigarettes did you smoke? (*select all that apply*)

(Display brand list)

305's	-1	NEWPORT	-10
AMERICAN SPIRIT	-2	L&M	-11
BASIC	-3	PALL MALL	-12
CAMEL	-4	PARLIAMENT	-13
GPC	-5	PYRAMID	-14
DORAL	-6	USA GOLD	-15
HESTIA [Added Q4'23]	-17	VLN [Added Q4'23]	-18
KOOL	-7	WINSTON	-16
MARLBORO	-8	Some other brand not listed here	-90 (specify) _____
MAVERICK	-9	Not sure	-99

CIGARETTE SECTION (CONTINUED)

13b. [If more than 1 brand mentioned at Q.12b] During the past 30 days, what brand of cigarettes did you usually smoke? (*select one answer*) [Only display brands mentioned at Q.12b, "no usual" and "not sure"]

[PROGRAMMING NOTE: AUTOMARK Q.13b IF ONLY 1 BRAND MENTIONED AT Q.12b]

I did not smoke a usual brand	-97	NEWPORT	-10
305's	-1	L&M	-11
AMERICAN SPIRIT	-2	PALL MALL	-12
BASIC	-3	PARLIAMENT	-13
CAMEL	-4	PYRAMID	-14
GPC	-5	USA GOLD	-15
DORAL	-6	VLN [Added Q4'23]	-18
HESTIA [Added Q4'23]	-17	WINSTON	-16
KOOL	-7	Some other brand	-90 (specify) _____
MARLBORO	-8	not listed here	
MAVERICK	-9	Not sure	-99

14b. [If Q9b is 1-3] Menthol cigarettes are cigarettes that taste like mint. In the past 30 days, were the cigarettes you smoked menthol, non-menthol (or regular) or did you smoke both types?

Menthol	-1
Non-Menthol	-2
Both types	-3
Don't Know	-99

15b. [If Q14b is 'Both types'] During the past 30 days, were the cigarettes that you usually smoked menthol or non-menthol? (*select one answer*)

[PROGRAMMING NOTE: AUTOMARK Q.15b IF MENTION '1', '2', OR '99' AT Q.14b]

I did not smoke a usual type	-1
Menthol	-2
Non-Menthol	-3
Not sure	-99

CIGARETTE SECTION (CONTINUED)

(Question 16b modified in Q1'23)

16b. [If Q9b is 1-3] During the past 30 days, how did you usually get your cigarettes? (*select one answer*)

I bought them myself	-1
I had someone else buy them for me	-2
I asked someone to give me some	-3
Someone offered them to me	-4
(NOT USED)	-5,-6,-7
I got them from a friend	-8
I got them from a family member	-9
I took them from a store or another person	-10
I got them some other way (specify _____)	-90

(Question 17b deleted in Q1'23)

(Question 17b1 added in Q1'23, modified Q2'24)

17b1. [If Q.16b is is response 2, 3, 4, 8, or 9] Earlier you answered that you got or bought your cigarettes from another person, such as a friend or family member during the past 30 days. How old was this person? (*select one answer*)

Younger than 18 years old	-1
18 years old	-2
19 years old	-3
20 years old	-4
21 years old or older	-5
I don't know	-99

(Question 18b list last modified in Q3'25)

18b. [If Q16b is "I bought them myself"] During the past 30 days, where did you usually buy your cigarettes? (*select one answer*)

A gas station or convenience store	-1
A grocery store	-2
A drugstore	-3
A mall or shopping center kiosk/stand	-4
(NOT USED)	-5
On the Internet (such as a product website or store website like EBAY or FACEBOOK MARKETPLACE) [TEXT IN PARENTHESIS ADDED Q1'23]	-6
Through the mail	-7
A vape shop	-8
A tobacco specialty store	-9
Through a delivery service (such as DOORDASH OR POSTMATES) [ADDED Q1'23]	-10
Some other place not listed here	-90

CIGARETTE SECTION (CONTINUED)

19b. [If Q9b > 3 (i.e., lifetime history of use but not in the past 30 days)] Have you completely stopped smoking cigarettes?

Yes - 1
No - 2

20b. [If Q9b = 1-3 (P30D user)] Are you seriously thinking about stopping smoking cigarettes? (Please choose the first answer that fits)

Yes, within the next 30 days -1
Yes, within the next 6 months -2
Yes, within the next 12 months -3
Yes, but not within the next 12 months -4
No, I am not seriously thinking about stopping -5

CIGAR SECTION

(If ever tried Cigars at Q.4c, show intro and ask Q.5c; otherwise, skip to directional before Chew/Snuff/Dip section.)

The next several questions are about the use of cigars, cigarillos, or little cigars.

5c. [If Q4c is 'Yes'] How old were you when you **first smoked** a cigar, cigarillo, or little cigar, even one or two puffs?

- | | | | |
|------------------------|----|--------------|-----|
| 8 years old or younger | -1 | 15 years old | -8 |
| 9 years old | -2 | 16 years old | -9 |
| 10 years old | -3 | 17 years old | -10 |
| 11 years old | -4 | 18 years old | -11 |
| 12 years old | -5 | 19 years old | -12 |
| 13 years old | -6 | 20 years old | -13 |
| 14 years old | -7 | | |

RESPONSE VALIDATION: If age of onset > current age, ask:

5cv. *“Earlier you mentioned that you were [INSERT AGE] years old, but now you just said that you were [INSERT Q.5c response] years old when you first smoked a cigar. Please confirm the age that you first smoked a cigar.”*

[REDISPLAY RESPONSE LIST FROM Q.5c AND RECORD VALIDATION RESPONSE IN A SEPARATE VARIABLE]

[ONLY ASK VALIDATION ONCE. IF STILL FAIL AFTER VALIDATION, ACCEPT RESPONSE AND RECORD “UNKNOWN AGE OF ONSET”]

6c. [If age of onset = current age -1] Did you first smoke a cigar, cigarillo, or little cigar within the past 12 months (that is, starting from MM/DD/YYYY)?

- | | |
|-----|-----|
| Yes | - 1 |
| No | - 2 |

8c. [If Q4c is 'Yes'] How many cigars, cigarillos, or little cigars have you smoked in your **entire life**?

- | | |
|---------------------------------------|----|
| 1 or more puffs but never a whole one | -1 |
| 1 | -2 |
| 2 to 10 | -3 |
| 11 to 20 | -4 |
| 21 to 50 | -5 |
| 51 to 99 | -6 |
| 100 or more | -7 |

CIGAR SECTION (CONTINUED)

9c. [If Q4c is 'Yes'] When was the last time you smoked a cigar, cigarillo, or little cigar, even one or two puffs? (*Please select the first answer that fits.*)

Earlier today	-1
Not today but sometime during the past 7 days	-2
Not during the past 7 days but sometime during the past 30 days	-3
Not during the past 30 days but sometime during the past 6 months	-4
Not during the past 6 months but sometime during the past year	-5
1 to 4 years ago	-6
5 or more years ago	-7

Questions 10-18 are for past 30 day (P30D) users
(If Q9c is 1-3, ask Q.10c; otherwise, skip to Q.19c.)

10c. [If Q9c is 1-3] During the **past 30 days**, on how many days did you smoke cigars, cigarillos, or little cigars?

__ _ Number of days (1-30)

11c. [If Q9c is 1-3] During the past 30 days, **on the days you smoked**, about how many cigars, cigarillos, or little cigars did you smoke per day?

Less than 1 cigar, cigarillo, or little cigar per day	-1
1 per day	-2
2 to 5 per day	-3
6 to 10 per day	-4
11 to 20 per day	-5
More than 20 per day	-6

CIGAR SECTION (CONTINUED)

12c1. During the past 30 days, which of the following types of cigars have you smoked? *(select all that apply)*

- Regular Cigars -1
- Cigarillos -2
- Little Cigars -3
- Not sure -4

12c2. [If multiples selected at Q12c1] During the past 30 days, which type of cigars did you smoke most often? *(select one answer)* [Only display types mentioned at Q.12c1 and "not sure"]
 [PROGRAMMING NOTE: AUTOMARK Q.12c2 IF ONLY 1 TYPE MENTIONED AT Q.12c1]

- Regular Cigars -1
- Cigarillos -2
- Little Cigars -3
- Not sure -4

(Brand list for Questions 12c and 13c last modified in Q3'21)

12c. [If Q9c is 1-3] During the past 30 days, what brands of cigars, cigarillos, or little cigars did you smoke? *(select all that apply)*

(Display brand list)

- | | | | |
|--------------------------------|-----|----------------------------------|---------------------|
| ARTURO FUENTE | -1 | PHILLIES | -8 |
| BACKWOODS [Added Q2'21] | -14 | PRIME TIME | -9 |
| BLACK & MILD | -2 | ROMEO Y JULIETA | -10 |
| CHEYENNE | -3 | SWISHER SWEETS | -11 |
| COHIBA | -4 | WHITE OWL | -12 |
| DUTCH MASTERS | -5 | ZIG ZAG | -13 |
| GAME [Added Q3'21] | -15 | | |
| GARCIA Y VEGA | -6 | Some other brand not listed here | -90 (specify) _____ |
| MACANUDO | -7 | Not sure | -99 |

13c. [If more than 1 brand mentioned at Q.12c] During the past 30 days, what brand of cigars, cigarillos, or little cigars did you usually smoke? *(select one answer)* [Only display brands mentioned at Q.12c, "no usual" and "not sure"]

[PROGRAMMING NOTE: AUTOMARK Q.13c IF ONLY 1 BRAND MENTIONED AT Q.12c]

- | | | | |
|--------------------------------|-----|------------------------|---------------------|
| I did not smoke a usual brand | -97 | PHILLIES | -8 |
| ARTURO FUENTE | -1 | PRIME TIME | -9 |
| BACKWOODS [Added Q2'21] | -14 | ROMEO Y JULIETA | -10 |
| BLACK & MILD | -2 | SWISHER SWEETS | -11 |
| CHEYENNE | -3 | WHITE OWL | -12 |
| COHIBA | -4 | ZIG ZAG | -13 |
| DUTCH MASTERS | -5 | | |
| GAME [Added Q3'21] | -15 | Some other brand | -90 (specify) _____ |
| GARCIA Y VEGA | -6 | not listed here | |
| MACANUDO | -7 | Not sure | -99 |

CIGAR SECTION (CONTINUED)

(Questions 14c and 15c list last modified in Q3'25)

14c. [If Q9c is 1-3] What flavor or flavors were the cigars, cigarillos, or little cigars that you smoked during the past 30 days? *(select all that apply)*

Tobacco (Regular)	-1
Menthol	-2
Mint	-3
Spice (such as cinnamon, vanilla, or clove) [Modified Q3'25]	-4
Fruit	-5
Chocolate	-6
Alcoholic drinks (such as wine, cognac, margarita, or other cocktails)	-7
Non-alcoholic drinks (such as coffee, soda, lemonade, or other beverage) [Added Q3'25]	-9
Candy, desserts, or other sweets	-8
Some other flavor not listed here (specify) _____	-90
Don't Know	-99

15c. [If more than one response at Q.14c] During the past 30 days, which flavor variety did you usually smoke? *(select one answer)* [Only display flavors mentioned at Q.14c, "no usual" and "don't know"]

[PROGRAMMING NOTE: AUTOMARK Q.15c IF ONLY 1 FLAVOR MENTIONED AT Q.14c]

I did not smoke a usual flavor	-97
Tobacco (Regular)	-1
Menthol	-2
Mint	-3
Spice (such as cinnamon, vanilla, or clove) [Modified Q3'25]	-4
Fruit	-5
Chocolate	-6
Alcoholic drinks (such as wine, cognac, margarita, or other cocktails)	-7
Non-alcoholic drinks (such as coffee, soda, lemonade, or other beverage) [Added Q3'25]	-9
Candy, desserts, or other sweets	-8
Some other flavor not listed here (specify) _____	-90
Don't Know	-99

(Questions 15c1-15c2 added in Q3'25)

15c1. [If Q9c is 1-3] Did any of the flavors that you used in the past 30 days have names or descriptions that included the word "ice" or "iced" (for example, blueberry ice or strawberry ice)?

Yes	- 1
No	- 2
Don't Know	-99

15c2. [If Q9c is 1-3] Did any of the flavors that you used in the past 30 days have a name that **did not describe a specific flavor**, such as "solar," "purple," "jazz," "island bash," "fusion" or some other word or phrase?

Yes	- 1
No	- 2
Don't Know	-99

CIGAR SECTION (CONTINUED)

(Question 16c modified in Q1'23)

16c. [If Q9c is 1-3] During the past 30 days, how did you usually get your cigars, cigarillos, or little cigars?
(select one answer)

I bought them myself	-1
I had someone else buy them for me	-2
I asked someone to give me some	-3
Someone offered them to me	-4
(NOT USED)	-5,-6,-7
I got them from a friend	-8
I got them from a family member	-9
I took them from a store or another person	-10
I got them some other way (specify_____)	-90

(Question 17c deleted in Q1'23)

(Question 17c1 added in Q1'23, modified Q2'24)

17c1. [If Q.16c is is response 2, 3, 4, 8, or 9] Earlier you answered that you got or bought your cigars, cigarillos, or little cigars from another person, such as a friend or family member during the past 30 days. How old was this person? (select one answer)

Younger than 18 years old	-1
18 years old	-2
19 years old	-3
20 years old	-4
21 years old or older	-5
I don't know	-99

(Question 18c list last modified in Q3'25)

18c. [If Q16c is "I bought them myself"] During the past 30 days, where did you usually buy your cigars, cigarillos, or little cigars? (select one answer)

A gas station or convenience store	-1
A grocery store	-2
A drugstore	-3
A mall or shopping center kiosk/stand	-4
(NOT USED)	-5
On the Internet (such as a product website or store website like EBAY or FACEBOOK MARKETPLACE) [TEXT IN PARENTHESIS ADDED Q1'23]	-6
Through the mail	-7
A vape shop	-8
A tobacco specialty store	-9
Through a delivery service (such as DOORDASH or POSTMATES) [ADDED Q1'23]	-10
Some other place not listed here	-90

19c. [If Q9c > 3 (i.e., lifetime history of use but not in the past 30 days)] Have you completely stopped smoking cigars, cigarillos, or little cigars?

Yes	- 1
No	- 2

20c. [If Q9c = 1-3 (P30D user)] Are you seriously thinking about stopping smoking cigars, cigarillos, or little cigars? (Please choose the first answer that fits)

Yes, within the next 30 days	-1
Yes, within the next 6 months	-2
Yes, within the next 12 months	-3
Yes, but not within the next 12 months	-4
No, I am not seriously thinking about stopping	-5

CHEWING TOBACCO/SNUFF/DIP SECTION

(If ever tried Chewing Tobacco, Snuff, or Dip at Q.4d, show intro and ask Q.5d; otherwise, skip to directional before Hookah section.)

The next several questions are about the use of chewing tobacco, snuff, or dip.

Do not think about snus or dissolvable tobacco products when you answer these questions.

5d. [If Q4d is 'Yes'] How old were you when you **first used** chewing tobacco, snuff, or dip?

8 years old or younger	-1	15 years old	-8
9 years old	-2	16 years old	-9
10 years old	-3	17 years old	-10
11 years old	-4	18 years old	-11
12 years old	-5	19 years old	-12
13 years old	-6	20 years old	-13
14 years old	-7		

RESPONSE VALIDATION: If age of onset > current age, ask:

5dv. *“Earlier you mentioned that you were [INSERT AGE] years old, but now you just said that you were [INSERT Q.5d response] years old when you first used chewing tobacco, snuff, or dip. Please confirm the age that you first used chewing tobacco, snuff, or dip.”*

[REDISPLAY RESPONSE LIST FROM Q.5d AND RECORD VALIDATION RESPONSE IN A SEPARATE VARIABLE]

[ONLY ASK VALIDATION ONCE. IF STILL FAIL AFTER VALIDATION, ACCEPT RESPONSE AND RECORD “UNKNOWN AGE OF ONSET”]

6d. [If age of onset = current age -1] Did you first use chewing tobacco, snuff, or dip within the past 12 months (that is, starting from MM/DD/YYYY)?

Yes - 1
No - 2

8d. [If Q4d is 'Yes'] How many times have you used chewing tobacco, snuff, or dip in your **entire life**? Count each occasion you used chewing tobacco, snuff or dip.

1 time	-1
2 to 10 times	-2
11 to 20 times	-3
21 to 50 times	-4
51 to 99 times	-5
100 or more times	-6

CHEWING TOBACCO/SNUFF/DIP SECTION (CONTINUED)

9d. [If Q4d is 'Yes'] When was the last time you used chewing tobacco, snuff, or dip? (*Please select the first answer that fits.*)

Earlier today	-1
Not today but sometime during the past 7 days	-2
Not during the past 7 days but sometime during the past 30 days	-3
Not during the past 30 days but sometime during the past 6 months	-4
Not during the past 6 months but sometime during the past year	-5
1 to 4 years ago	-6
5 or more years ago	-7

Questions 10-18 are for past 30 day (P30D) users
(If Q9d is 1-3, ask Q.10d; otherwise, skip to Q.19d.)

10d. [If Q9d is 1-3] During the **past 30 days**, on how many days did you use chewing tobacco, snuff, or dip?

__ _ Number of days (1-30)

11d. [If Q9d is 1-3] During the past 30 days, **on the days you used** chewing tobacco, snuff, or dip, about how many times per day did you use it?

1 time per day	-1
2 to 5 times per day	-2
6 to 10 times per day	-3
11 to 20 times per day	-4
More than 20 times per day	-5

12d1. [If Q9d is 1-3] Smokeless tobacco is available in several different forms, including chewing tobacco, snuff or dip in loose form such as long cut or fine cut, and snuff or dip in a pouch. During the past 30 days, which types of smokeless tobacco have you used? (*select all that apply*)

Chewing tobacco	-1
Snuff or dip in loose form (long cut or fine cut)	-2
Snuff or dip in a pouch	-3
Not sure	-99

12d2. [If more than one type mentioned at Q12d1] During the past 30 days, which type of smokeless tobacco did you usually use? (*select one answer*) [Only display types mentioned at Q.12d1 and "not sure"]

[PROGRAMMING NOTE: AUTOMARK Q.12d2 IF ONLY 1 TYPE MENTIONED AT Q.12d1]

Chewing tobacco	-1
Snuff or dip in loose form (long cut or fine cut)	-2
Snuff or dip in a pouch	-3
Not sure	-99

CHEWING TOBACCO/SNUFF/DIP SECTION (CONTINUED)

(Brand list for Questions 12d and 13d last modified in Q3'21)

12d. [If Q9d is 1-3] During the past 30 days, what brand or brands of chewing tobacco, snuff, or dip did you use? *(select all that apply)*

(Display brand list)			
BEECHNUT	-1	LONGHORN	-6
COPENHAGEN	-2	AMERICA'S BEST CHEW	-7
GRIZZLY	-3	SKOAL	-8
KODIAK	-4	STOKER'S [Added Q3'21]	-9
LEVI GARRETT	-5	Some other brand not listed here	-90 (specify) _____
		Not sure	-99

13d. [If more than 1 brand mentioned at Q.12d] During the past 30 days, what brand of chewing tobacco, snuff, or dip did you usually use? *(select one answer)* [Only display brands mentioned at Q.12d, "no usual" and "not sure"]

[PROGRAMMING NOTE: AUTOMARK Q.13d IF ONLY 1 BRAND MENTIONED AT Q.12d]

I did not have a usual brand	-97	LONGHORN	-6
BEECHNUT	-1	AMERICA'S BEST CHEW	-7
COPENHAGEN	-2	SKOAL	-8
GRIZZLY	-3	STOKER'S [Added Q3'21]	-9
KODIAK	-4	Some other brand	-90 (specify) _____
LEVI GARRETT	-5	not listed here	
		Not sure	-99

(Questions 14d and 15d list last modified in Q3'25)

14d. [If Q9d is 1-3] What flavor or flavors were the chewing tobacco, snuff, or dip that you used during the past 30 days? *(select all that apply)*

Tobacco (natural, original, straight)	-1
Wintergreen	-2
Mint	-3
Spice (such as cinnamon, vanilla, or clove) [Modified Q3'25]	-4
Fruit	-5
Chocolate	-6
Alcoholic drinks (such as wine, cognac, margarita, or other cocktails)	-7
Non-alcoholic drinks (such as coffee, soda, lemonade, or other beverage) [Added Q3'25]	-9
Candy, desserts, or other sweets	-8
Some other flavor not listed here (specify) _____	-90
Don't Know	-99

15d. [If more than one response at Q.14d] During the past 30 days, which flavor variety did you usually use? *(select one answer)* [Only present flavors mentioned at Q.14d, "no usual" and "don't know"]

[PROGRAMMING NOTE: AUTOMARK Q.15d IF ONLY 1 FLAVOR MENTIONED AT Q.14d]

I did not have a usual flavor	-97
Tobacco (natural, original, straight)	-1
Wintergreen	-2
Mint	-3
Spice (such as cinnamon, vanilla, or clove) [Modified Q3'25]	-4
Fruit	-5
Chocolate	-6
Alcoholic drinks (such as wine, cognac, margarita, or other cocktails)	-7
Non-alcoholic drinks (such as coffee, soda, lemonade, or other beverage) [Added Q3'25]	-9
Candy, desserts, or other sweets	-8
Some other flavor not listed here (specify) _____	-90
Don't Know	-99

CHEWING TOBACCO/SNUFF/DIP SECTION (CONTINUED)

(Question 16d modified in Q1'23)

16d. [If Q9d is 1-3] During the past 30 days, how did you usually get your chewing tobacco, snuff, or dip? (*select one answer*)

I bought it myself	-1
I had someone else buy it for me	-2
I asked someone to give me some	-3
Someone offered it to me	-4
(NOT USED)	-5,-6,-7
I got it from a friend	-8
I got it from a family member	-9
I took it from a store or another person	-10
I got it some other way (specify_____)	-90

(Question 17d deleted in Q1'23)

(Question 17d1 added in Q1'23, modified Q2'24)

17d1. [If Q16d is response 2, 3, 4, 8, or 9] Earlier you answered that you got or bought your chewing tobacco, snuff or dip from another person, such as a friend or family member during the past 30 days. How old was this person? (*select one answer*)

Younger than 18 years old	-1
18 years old	-2
19 years old	-3
20 years old	-4
21 years old or older	-5
I don't know	-99

(Questions 18d list last modified in Q3'25)

18d. [If Q16d is "I bought it myself"] During the past 30 days, where did you usually buy your chewing tobacco, snuff, or dip? (*select one answer*)

A gas station or convenience store	-1
A grocery store	-2
A drugstore	-3
A mall or shopping center kiosk/stand	-4
(NOT USED)	-5
On the Internet (such as a product website or store website like EBAY or FACEBOOK MARKETPLACE) [TEXT IN PARENTHESIS ADDED Q1'23]	-6
Through the mail	-7
A vape shop	-8
A tobacco specialty store	-9
Through a delivery service (such as DOORDASH or POSTMATES) [ADDED Q1'23]	-10
Some other place not listed here	-90

CHEWING TOBACCO/SNUFF/DIP SECTION (CONTINUED)

19d. [If Q9d > 3 (i.e., lifetime history of use but not in the past 30 days)] Have you completely stopped using chewing tobacco, snuff, or dip?

Yes - 1

No - 2

20d. [If Q9d = 1-3 (P30D user)] Are you seriously thinking about stopping chewing tobacco, snuff, or dip? (Please choose the first answer that fits)

Yes, within the next 30 days -1

Yes, within the next 6 months -2

Yes, within the next 12 months -3

Yes, but not within the next 12 months -4

No, I am not seriously thinking about stopping -5

HOOKAH SECTION

(If ever tried Hookah at Q.4e, show intro and ask Q.5e; otherwise, skip to directional before Pipe section.)

The next several questions are about smoking tobacco in a hookah, which is a type of waterpipe. Shisha (or hookah tobacco) is smoked in a hookah.

5e. [If Q4e is 'Yes'] How old were you when you **first smoked** tobacco in a hookah or waterpipe, even one or two puffs?

8 years old or younger	-1	15 years old	-8
9 years old	-2	16 years old	-9
10 years old	-3	17 years old	-10
11 years old	-4	18 years old	-11
12 years old	-5	19 years old	-12
13 years old	-6	20 years old	-13
14 years old	-7		

RESPONSE VALIDATION: If age of onset > current age, ask:

5ev. *“Earlier you mentioned that you were [INSERT AGE] years old, but now you just said that you were [INSERT Q.5e response] years old when you first smoked tobacco in a hookah or waterpipe. Please confirm the age that you first smoked tobacco in a hookah or waterpipe.”*

[REDISPLAY RESPONSE LIST FROM Q.5e AND RECORD VALIDATION RESPONSE IN A SEPARATE VARIABLE]

[ONLY ASK VALIDATION ONCE. IF STILL FAIL AFTER VALIDATION, ACCEPT RESPONSE AND RECORD “UNKNOWN AGE OF ONSET”]

6e. [If age of onset = current age -1] Did you first smoke tobacco in a hookah or waterpipe within the past 12 months (that is, starting from MM/DD/YYYY)?

Yes - 1
No - 2

8e. [If Q4e is 'Yes'] How many times have you smoked tobacco in a hookah in your **entire life**? Count each sitting or session where you smoked tobacco in a hookah, whether alone or with others.

1 time	-1
2 to 10 times	-2
11 to 20 times	-3
21 to 50 times	-4
51 to 99 times	-5
100 or more times	-6

HOOKAH SECTION (CONTINUED)

9e. [If Q4e is 'Yes'] When was the last time you smoked tobacco in a hookah or waterpipe, even one or two puffs? (*Please select the first answer that fits.*)

Earlier today	-1
Not today but sometime during the past 7 days	-2
Not during the past 7 days but sometime during the past 30 days	-3
Not during the past 30 days but sometime during the past 6 months	-4
Not during the past 6 months but sometime during the past year	-5
1 to 4 years ago	-6
5 or more years ago	-7

Q.10-11 (DAYS USED / TIMES USED PER DAY) NOT ASKED FOR HOOKAH STARTING Q1'26

Q.12-15 (BRAND/FLAVOR QUESTIONS) NOT ASKED FOR HOOKAH

Q.16-18 (ACCESS QUESTIONS) NOT ASKED FOR HOOKAH

Q.19-20 (STOPPED USING / INTENT TO STOP) NOT ASKED FOR HOOKAH STARTING Q1'26

PIPE SECTION

(If ever tried Pipe at Q.4f, show intro and ask Q.5f; otherwise, skip to directional before Snus section.)

The next several questions are about smoking pipes filled with tobacco (not hookah or waterpipe).

5f. [If Q4f is 'Yes'] How old were you when you **first smoked** a pipe filled with tobacco, even one or two puffs?

8 years old or younger	-1	15 years old	-8
9 years old	-2	16 years old	-9
10 years old	-3	17 years old	-10
11 years old	-4	18 years old	-11
12 years old	-5	19 years old	-12
13 years old	-6	20 years old	-13
14 years old	-7		

RESPONSE VALIDATION: If age of onset > current age, ask:

5fv. *“Earlier you mentioned that you were [INSERT AGE] years old, but now you just said that you were [INSERT Q.5f response] years old when you first smoked a pipe filled with tobacco. Please confirm the age that you first smoked a pipe filled with tobacco.”*

[REDISPLAY RESPONSE LIST FROM Q.5f AND RECORD VALIDATION RESPONSE IN A SEPARATE VARIABLE]

[ONLY ASK VALIDATION ONCE. IF STILL FAIL AFTER VALIDATION, ACCEPT RESPONSE AND RECORD “UNKNOWN AGE OF ONSET”]

6f. [If age of onset = current age -1] Did you first smoke a pipe filled with tobacco within the past 12 months (that is, starting from MM/DD/YYYY)?

Yes - 1
No - 2

8f. [If Q4f is 'Yes'] How many times have you smoked a pipe filled with tobacco in your **entire life**? Count each session where you smoked tobacco in a pipe, whether you smoked all of the tobacco that was in the pipe or not.

1 time	-1
2 to 10 times	-2
11 to 20 times	-3
21 to 50 times	-4
51 to 99 times	-5
100 or more times	-6

PIPE SECTION (CONTINUED)

9f. [If Q4f is 'Yes'] When was the last time you smoked a pipe filled with tobacco, even one or two puffs? (*Please select the first answer that fits.*)

Earlier today	-1
Not today but sometime during the past 7 days	-2
Not during the past 7 days but sometime during the past 30 days	-3
Not during the past 30 days but sometime during the past 6 months	-4
Not during the past 6 months but sometime during the past year	-5
1 to 4 years ago	-6
5 or more years ago	-7

Q.10-11 (DAYS USED / TIMES USED PER DAY) NOT ASKED FOR PIPE STARTING Q1'26

Q.12-15 (BRAND/FLAVOR QUESTIONS) NOT ASKED FOR PIPE

Q.16-18 (ACCESS QUESTIONS) NOT ASKED FOR PIPE

Q.19-20 (STOPPED USING / INTENT TO STOP) NOT ASKED FOR PIPE STARTING Q1'26

SNUS SECTION

(If ever tried Snus at Q.4g, show intro and ask Q.5g; otherwise, skip to directional before Heated Tobacco Products section.)

The next several questions are about the use of snus.

Do not think about chewing tobacco, snuff, or dip when you answer these questions.

5g. [If Q4g is 'Yes'] How old were you when you **first used** snus?

8 years old or younger	-1	15 years old	-8
9 years old	-2	16 years old	-9
10 years old	-3	17 years old	-10
11 years old	-4	18 years old	-11
12 years old	-5	19 years old	-12
13 years old	-6	20 years old	-13
14 years old	-7		

RESPONSE VALIDATION: If age of onset > current age, ask:

5gv. ***“Earlier you mentioned that you were [INSERT AGE] years old, but now you just said that you were [INSERT Q.5g response] years old when you first used snus. Please confirm the age that you first used snus.”***

[REDISPLAY RESPONSE LIST FROM Q.5g AND RECORD VALIDATION RESPONSE IN A SEPARATE VARIABLE]

[ONLY ASK VALIDATION ONCE. IF STILL FAIL AFTER VALIDATION, ACCEPT RESPONSE AND RECORD “UNKNOWN AGE OF ONSET”]

6g. [If age of onset = current age -1] Did you first use snus within the past 12 months (that is, starting from MM/DD/YYYY)?

Yes - 1
No - 2

8g. [If Q4g is 'Yes'] How many snus pouches have you used in your **entire life**?

1 pouch	-1
2 to 10 pouches	-2
11 to 20 pouches	-3
21 to 50 pouches	-4
51 to 99 pouches	-5
100 or more pouches	-6

9g. [If Q4g is 'Yes'] When was the last time you used snus, even one or two pouches? (*Please select the first answer that fits.*)

Earlier today	-1
Not today but sometime during the past 7 days	-2
Not during the past 7 days but sometime during the past 30 days	-3
Not during the past 30 days but sometime during the past 6 months	-4
Not during the past 6 months but sometime during the past year	-5
1 to 4 years ago	-6

5 or more years ago

-7

SNUS SECTION (CONTINUED)

Q.10-11 (DAYS USED / TIMES USED PER DAY) NOT ASKED FOR SNUS STARTING Q1'26

Q.12-15 (BRAND/FLAVOR QUESTIONS) NOT ASKED FOR SNUS STARTING Q1'26

Q.16-18 (ACCESS QUESTIONS) NOT ASKED FOR SNUS STARTING Q1'26

Q.19-20 (STOPPED USING / INTENT TO STOP) NOT ASKED FOR SNUS STARTING Q1'26

HEATED TOBACCO PRODUCT SECTION

(If ever tried Heated Tobacco Products at Q.4h, show intro and ask Q.5h; otherwise, skip to directional before Oral Nicotine Products section.)

(Introduction modified in Q1'23)

These next questions are about the use of "heated tobacco products". Some people refer to these products as "heat-not-burn" tobacco products.

Do not think about e-cigarettes when answering these questions.

5h. [If Q4h is 'Yes'] How old were you when you **first used** a heated tobacco product?

8 years old or younger	-1	15 years old	-8
9 years old	-2	16 years old	-9
10 years old	-3	17 years old	-10
11 years old	-4	18 years old	-11
12 years old	-5	19 years old	-12
13 years old	-6	20 years old	-13
14 years old	-7		

RESPONSE VALIDATION: If age of onset > current age, ask:

5hv. ***"Earlier you mentioned that you were [INSERT AGE] years old, but now you just said that you were [INSERT Q.5h response] years old when you first used a heated tobacco product. Please confirm the age that you first used a heated tobacco product."***

[REDISPLAY RESPONSE LIST FROM Q.5h AND RECORD VALIDATION RESPONSE IN A SEPARATE VARIABLE]

[ONLY ASK VALIDATION ONCE. IF STILL FAIL AFTER VALIDATION, ACCEPT RESPONSE AND RECORD "UNKNOWN AGE OF ONSET"]

6h. [If age of onset = current age -1] Did you first use a heated tobacco product within the past 12 months (that is, starting from MM/DD/YYYY)?

Yes - 1
No - 2

(Questions 7h and 7h1 added in Q1'23)

7h. [If Q4h is 'Yes'] Why did you **first use** a heated tobacco product? *(select all that apply)*

A friend used them	-1
A family member used them	-2
To try to quit using other tobacco products, such as cigarettes	-3
They cost less than other tobacco products, such as cigarettes	-4
They were easier to get than other tobacco products, such as cigarettes	-5
I've seen people on TV, online, or in movies use them	-6
They are less harmful than other forms of tobacco, such as cigarettes	-7
They were available in flavors, such as menthol, mint, candy, fruit, or chocolate	-8
I could use them unnoticed at home or at school	-9
I could use them to do tricks	-10
I was curious about them	-11
I was feeling anxious, stressed, or depressed	-12
To get a high or buzz from nicotine	-13
I used them for some other reason (specify) _____	-90

HEATED TOBACCO PRODUCT SECTION (CONTINUED)

(Question 7h1 moved after Q18h in Q3'23)

8h. [If Q4h is 'Yes'] How many heated tobacco sticks or capsules have you used in your **entire life**?

1	-1
2 to 10	-2
11 to 20	-3
21 to 50	-4
51 to 99	-5
100 or more	-6

9h. [If Q4h is 'Yes'] When was the last time you used a heated tobacco product, even one or two times? *(Please select the first answer that fits.)*

Earlier today	-1
Not today but sometime during the past 7 days	-2
Not during the past 7 days but sometime during the past 30 days	-3
Not during the past 30 days but sometime during the past 6 months	-4
Not during the past 6 months but sometime during the past year	-5
1 to 4 years ago	-6
5 or more years ago	-7

HEATED TOBACCO PRODUCT SECTION (CONTINUED)

**Questions 10-18 are for past 30 day (P30D) users
(If Q9h is 1-3, ask Q.10h; otherwise, skip to Q.19h.)**

10h. [If Q9h is 1-3] During the **past 30 days**, on how many days did you use a heated tobacco product?

__ _ Number of days (1-30)

11h. [If Q9h is 1-3] During the past 30 days, **on the days you used** heated tobacco products, about how many tobacco sticks or capsules did you use per day?

Less than 1 per day	-1
1 per day	-2
2 to 5 per day	-3
6 to 10 per day	-4
11 to 20 per day	-5
More than 20 per day	-6

(Brand list for Questions 12h and 13h last modified in Q2'23)

12h. [If Q9h is 1-3] During the past 30 days, what brand or brands of heated tobacco products did you use? *(select all that apply)*

(Display brand list. Only show IQOS® if 'Yes' at Q.4h1)

ECLIPSE	-1
GLO	-2
IQOS	-3
PAX	-4
PLOOM	-5
Some other brand not listed here	-90 (specify) _____
Not sure	-99

HEATED TOBACCO PRODUCT SECTION (CONTINUED)

13h. [If more than 1 brand mentioned at Q.12h] During the past 30 days, what brand of heated tobacco products did you usually use? (*select one answer*) [Only display brands mentioned at Q.12h, "no usual" and "not sure"]

[PROGRAMMING NOTE: AUTOMARK Q.13h IF ONLY 1 BRAND MENTIONED AT Q.12h]

I did not have a usual brand	-97
ECLIPSE	-1
GLO	-2
IQOS	-3
PAX	-4
PLOOM	-5
Some other brand not listed here	-90 (specify) _____
Not sure	-99

14h. [If Q9h is 1-3] Menthol heated tobacco product tobacco sticks or capsules taste like mint. In the past 30 days, were the tobacco sticks or capsules that you used menthol, non-menthol (or regular) or did you use both types?

Menthol	-1
Non-Menthol	-2
Both types	-3
Don't Know	-99

15h. [If Q.14h is "Both types"] During the past 30 days, were the tobacco sticks or capsules that you usually used menthol or non-menthol? (*select one answer*)

[PROGRAMMING NOTE: AUTOMARK Q.15h IF MENTION '1', '2', OR '99' AT Q.14h]

I did not use a usual type	-97
Menthol	-1
Non-menthol	-2
Not sure	-99

(Question 16h modified in Q1'23)

16h. [If Q9h is 1-3] During the past 30 days, how did you usually get your tobacco sticks or capsules? (*select one answer*)

I bought them myself	-1
I had someone else buy them for me	-2
I asked someone to give me some	-3
Someone offered them to me	-4
(NOT USED)	-5,-6,-7
I got them from a friend	-8
I got them from a family member	-9
I took them from a store or another person	-10
I got them some other way (specify_____)	-90

HEATED TOBACCO PRODUCT SECTION (CONTINUED)

(Question 17h deleted in Q1'23)

(Question 17h1 added in Q1'23, modified Q2'24)

17h1. [If Q.16h is response 2, 3, 4, 8, or 9] Earlier you answered that you got or bought your tobacco sticks or capsules from another person, such as a friend or family member during the past 30 days. How old was this person? *(select one answer)*

Younger than 18 years old	-1
18 years old	-2
19 years old	-3
20 years old	-4
21 years old or older	-5
I don't know	-99

(Questions 18h list last modified in Q3'25)

18h. [If Q16h is "I bought them myself"] During the past 30 days, where did you usually buy your tobacco sticks or capsules? *(select one answer)*

A gas station or convenience store	-1
A grocery store	-2
A drugstore	-3
A mall or shopping center kiosk/stand	-4
(NOT USED)	-5
On the Internet (such as a product website or store website like EBAY or FACEBOOK MARKETPLACE) [TEXT IN PARENTHESIS ADDED Q1'23]	-6
Through the mail	-7
A vape shop	-8
A tobacco specialty store	-9
Through a delivery service (such as DOORDASH or POSTMATES) [ADDED Q1'23]	-10
Some other place not listed here	-90

7h1. [If Q9h is 1-3] Why do you **currently use** heated tobacco products? *(select all that apply)*

A friend uses them	-1
A family member uses them	-2
To try to quit using other tobacco products, such as cigarettes	-3
They cost less than other tobacco products, such as cigarettes	-4
They are easier to get than other tobacco products, such as cigarettes	-5
I've seen people on TV, online, or in movies use them	-6
They are less harmful than other forms of tobacco, such as cigarettes	-7
They are available in flavors, such as menthol, mint, candy, fruit, or chocolate	-8
I can use them unnoticed at home or at school	-9
I can use them to do tricks	-10
I am curious about them	-11
Because I feel anxious, stressed, or depressed	-12
To get a high or buzz from nicotine	-13
I use them for some other reason (specify) _____	-90

HEATED TOBACCO PRODUCT SECTION (CONTINUED)

19h. [If Q9h > 3 (i.e., lifetime history of use but not in the past 30 days)] Have you completely stopped using heated tobacco products?

Yes - 1

No - 2

20h. [If Q9h = 1-3 (P30D user)] Are you seriously thinking about stopping using heated tobacco products? (Please choose the first answer that fits)

Yes, within the next 30 days -1

Yes, within the next 6 months -2

Yes, within the next 12 months -3

Yes, but not within the next 12 months -4

No, I am not seriously thinking about stopping -5

NICOTINE POUCHES SECTION (ADDED Q3'25, REVISED Q1'26)

[If Ever tried pouches (Q4i=Yes) – ASK THIS SECTION (POUCHES). OTHERWISE, SKIP TO DIRECTIONS BEFORE NEXT SECTION (OTHER OTDN).]

The next few questions are specifically about nicotine pouches (such as Zyn™, on!®, or Juice Head®).

(Questions 5j, 5jv, 6j and 7j added in Q1'26)

5j. [If Q4i is 'Yes'] How old were you when you **first used** a nicotine pouch, even once or twice?

8 years old or younger	-1	15 years old	-8
9 years old	-2	16 years old	-9
10 years old	-3	17 years old	-10
11 years old	-4	18 years old	-11
12 years old	-5	19 years old	-12
13 years old	-6	20 years old	-13
14 years old	-7		

RESPONSE VALIDATION: If age of onset > current age, ask:

5jv. ***“Earlier you mentioned that you were [INSERT AGE] years old, but now you just said that you were [INSERT Q.5j response] years old when you first used a nicotine pouch. Please confirm the age that you first used a nicotine pouch.”***

[REDISPLAY RESPONSE LIST FROM Q.5j AND RECORD VALIDATION RESPONSE IN A SEPARATE VARIABLE]

[ONLY ASK VALIDATION ONCE. IF STILL FAIL AFTER VALIDATION, ACCEPT RESPONSE AND RECORD “UNKNOWN AGE OF ONSET”]

6j. [If age of onset = current age -1] Did you first use a nicotine pouch within the past 12 months (that is, starting from MM/DD/YYYY)?

Yes - 1
No - 2

7j. [If Q4i is 'Yes'] Why did you **first use** a nicotine pouch? *(select all that apply)*

A friend used them	-1
A family member used them	-2
To try to quit using other tobacco products, such as cigarettes	-3
They cost less than other tobacco products, such as cigarettes	-4
They were easier to get than other tobacco products, such as cigarettes	-5
I've seen people on TV, online, or in movies use them	-6
They are less harmful than other forms of tobacco, such as cigarettes	-7
They were available in flavors, such as menthol, mint, candy, fruit, or chocolate	-8
I could use them unnoticed at home or at school	-9
I was curious about them	-10
I was feeling anxious, stressed, or depressed	-11
To get a high or buzz from nicotine	-12
I used them for some other reason (specify) _____	-90

NICOTINE POUCHES SECTION (CONTINUED)

8j. How many times have you used a nicotine pouch in your **entire life**? Count each occasion you used a nicotine pouch.

1 time	-1
2 to 10 times	-2
11 to 20 times	-3
21 to 50 times	-4
51 to 99 times	-5
100 or more times	-6

9j. When was the last time you used a nicotine pouch, even one or two times? (*Please select the first answer that fits.*)

Earlier today	-1
Not today but sometime during the past 7 days	-2
Not during the past 7 days but sometime during the past 30 days	-3
Not during the past 30 days but sometime during the past 6 months	-4
Not during the past 6 months but sometime during the past year	-5
1 to 4 years ago	-6
5 or more years ago	-7

**Questions 10-18 are for past 30 day (P30D) users
(If Q9j is 1-3, ask Q.10j; otherwise, skip to NEXT SECTION.)**

10j. [If Q9j is 1-3] During the **past 30 days**, on how many days did you use a nicotine pouch?

__ _ Number of days (1-30)

11j. [If Q9j is 1-3] During the past 30 days, **on the days you used** nicotine pouches, about how many times per day did you use it?

1 time per day	-1
2 to 5 times per day	-2
6 to 10 times per day	-3
11 to 20 times per day	-4
More than 20 times per day	-5

NICOTINE POUCHES SECTION (CONTINUED)

- 12j. [If Q9j is 1-3] During the past 30 days, what brand or brands of nicotine pouches did you use?
(select all that apply)

(Display brand list)

COTTON MOUTH	-1	VELO	-8
FRĒ	-2	ZOLT	-9
JUICE HEAD	-3	ZONE	-10
KRAVE	-4	ZYN	-11
LUCY	-5		
ON!	-6	Some other brand not listed here	-90
ROGUE	-7	(specify) _____	
		Not sure	-99

- 12j1. [If Q12j is 'ON!'] The on!® brand comes in different varieties. During the past 30 days, which on!® products did you use? (select all that apply)

on!® PLUS	- 1
on!® Nicotine Pouches	- 2
Not sure [SINGLE SELECT]	-99

- 13j. [If more than 1 brand mentioned at Q.12j] During the past 30 days, what brand of pouches did you usually use? (select one answer) [Only display brands mentioned at Q.12j, "no usual" and "not sure"]

[PROGRAMMING NOTE: AUTOMARK Q.13j IF ONLY 1 BRAND MENTIONED AT Q.12j]

(Display brand list)

I did not have a usual brand	-1	VELO	-9
COTTON MOUTH	-2	ZOLT	-10
FRĒ	-3	ZONE	-11
JUICE HEAD	-4	ZYN	-12
KRAVE	-5		
LUCY	-6	Some other brand not listed here	-90
ON!	-7	(specify) _____	
ROGUE	-8	Not sure	-99

- 13j1. [If Q13j is 'ON!'] The on!® brand comes in different varieties. During the past 30 days, which on!® products did you usually use? (select one answer)

on!® PLUS	- 1
on!® Nicotine Pouches	- 2
Not sure	-99

NICOTINE POUCHES SECTION (CONTINUED)

14j. [If Q9j is 1-3] What flavor or flavors were the nicotine pouches that you used during the past 30 days? *(select all that apply)*

Tobacco or Original	-1
Wintergreen	-2
Mint	-3
Spice (such as cinnamon, vanilla, or clove)	-4
Fruit	-5
Chocolate	-6
Alcoholic drinks (such as wine, cognac, margarita, or other cocktails)	-7
Non-alcoholic drinks (such as coffee, soda, lemonade, or other beverage)	-9
Candy, desserts, or other sweets	-8
Unflavored	-10
Some other flavor not listed here (specify) _____	-90
Don't Know	-99

15j. [If more than one response at Q.14j] During the past 30 days, which flavor variety did you usually use? *(select one answer)* [Only display flavors mentioned at Q.14j, "no usual" and "don't know"]
 [PROGRAMMING NOTE: AUTOMARK Q.15j IF ONLY 1 FLAVOR MENTIONED AT Q.14j]

I did not have a usual flavor	-97
Tobacco or Original	-1
Wintergreen	-2
Mint	-3
Spice (such as cinnamon, vanilla, or clove)	-4
Fruit	-5
Chocolate	-6
Alcoholic drinks (such as wine, cognac, margarita, or other cocktails)	-7
Non-alcoholic drinks (such as coffee, soda, lemonade, or other beverage)	-9
Candy, desserts, or other sweets	-8
Unflavored	-10
Some other flavor not listed here (specify) _____	-90
Don't Know	-99

15j1. [If Q.14j is any of 1-9, 90 or 99] Did any of the flavors that you used in the past 30 days have names or descriptions that included the word "ice" or "iced" (for example, blueberry ice or strawberry ice)?

Yes	- 1
No	- 2
Don't Know	-99

15j2. [If Q.14j is any of 1-9, 90 or 99] Did any of the flavors that you used in the past 30 days have a name that **did not describe a specific flavor**, such as "solar," "purple," "jazz," "island bash," "fusion" or some other word or phrase?

Yes	- 1
No	- 2
Don't Know	-99

NICOTINE POUCHES SECTION (CONTINUED)

(Questions 16j through 20j added in Q1'26)

16j. [If Q9j is 1-3] During the past 30 days, how did you usually get your nicotine pouches? (*select one answer*)

I bought them myself	-1
I had someone else buy them for me	-2
I asked someone to give me some	-3
Someone offered them to me	-4
I got them from a friend	-7
I got them from a family member	-8
I took them from a store or another person	-9
I got them some other way (specify _____)	-90

17j. [If Q.16j is is response 2, 3, 4, 8, or 9] Earlier you answered that you got or bought your nicotine pouches from another person, such as a friend or family member during the past 30 days. How old was this person? (*select one answer*)

Younger than 18 years old	-1
18 years old	-2
19 years old	-3
20 years old	-4
21 years old or older	-5
I don't know	-99

18j. [If Q16j is "I bought them myself"] During the past 30 days, where did you usually buy your nicotine pouches? (*select one answer*)

A gas station or convenience store	-1
A grocery store	-2
A drugstore	-3
A mall or shopping center kiosk/stand	-4
On the Internet (such as a product website or store website like EBAY or FACEBOOK MARKETPLACE)	-5
Through the mail	-6
A vape shop	-7
A tobacco specialty store	-8
Through a delivery service (such as DOORDASH or POSTMATES)	-9
Some other place not listed here	-90

18j1. [If Q16j is "I bought them myself"] You mentioned that you usually bought your nicotine pouches yourself in the past 30 days. During that time, how often were you asked to show proof of age? (*Select one answer*)

Always	-1
Usually	-2
About half of the time	-3
Rarely	-4
Never	-5
Don't remember	-6

NICOTINE POUCHES SECTION (CONTINUED)

18j2. [If Q18j is response 1-4 OR 6-10] You mentioned that you usually bought your nicotine pouches [INSERT PARTICIPANT RESPONSE FROM Q18j]. How were you able to buy these products? *(select all that apply)*

PROGRAMMER INSTRUCTIONS

Response from Q18j	TEXT TO PIPE INTO Q18j2
1	at a gas station or convenience store
2	at a grocery store
3	at a drugstore
4	at a mall or shopping center kiosk/stand
6	on the Internet
7	through the mail
8	at a vape shop
9	at a tobacco specialty store
10	through a delivery service

I was not asked to show an ID		-1
I was ID-ed and used a fake ID		-2
I was ID-ed, used my legal ID and it was accepted		-3
I knew the person behind the counter		-4
Other	(specify) _____	-5
Don't know		-6

18j3. [If Q.18j2 is 2 or 3] Was your ID digitally verified or scanned before your purchase?

Yes, my ID was scanned or digitally verified	- 1
No, my ID was visually checked but not scanned	- 2
Don't Know/Not sure	-99

18j4. [If Q16j is "I bought them myself"] In your opinion, how easy is it for people your age to buy nicotine pouches themselves? To answer use a scale from 1 to 5 where '1' means "VERY EASY" and '5' means "VERY DIFFICULT". You can use any number from 1 to 5 to indicate your answer.

Very Easy				Very Difficult
-1	-2	-3	-4	-5

7j1. [If Q9j is 1-3] Why do you **currently use** nicotine pouches? *(select all that apply)*

A friend uses them	-1
A family member uses them	-2
To try to quit using other tobacco products, such as cigarettes	-3
They cost less than other tobacco products, such as cigarettes	-4
They are easier to get than other tobacco products, such as cigarettes	-5
I've seen people on TV, online, or in movies use them	-6
They are less harmful than other forms of tobacco, such as cigarettes	-7
They are available in flavors, such as menthol, mint, candy, fruit, or chocolate	-8
I can use them unnoticed at home or at school	-9
I am curious about them	-10
Because I feel anxious, stressed, or depressed	-11
To get a high or buzz from nicotine	-12
I use them for some other reason (specify) _____	-90

NICOTINE POUCHES SECTION (CONTINUED)

19j. [If Q9j > 3 (i.e., lifetime history of use but not in the past 30 days)] Have you completely stopped using nicotine pouches?

Yes - 1

No - 2

20j. [If Q9j = 1-3 (P30D user)] Are you seriously thinking about stopping using nicotine pouches?
(Please choose the first answer that fits)

Yes, within the next 30 days -1

Yes, within the next 6 months -2

Yes, within the next 12 months -3

Yes, but not within the next 12 months -4

No, I am not seriously thinking about stopping -5

OTHER ORAL NICOTINE PRODUCTS SECTION (ADDED Q3'25, REVISED Q1'26)

[If Ever tried other nicotine products (Q4i1=Yes) – ASK THIS SECTION. OTHERWISE, SKIP TO DIRECTIONS BEFORE FIRST PRODUCT USED.]

The next few questions are specifically about oral nicotine products (such as Lucy® or Rogue® lozenges, gum, or gummies), other than nicotine pouches.

Do not think about nicotine pouches or smokeless tobacco when answering these questions.

(Questions 5k, 5kv, 6k and 7k added in Q1'26)

5k. [If Q4i1 is 'Yes'] How old were you when you **first used** an oral nicotine product, even once or twice?

8 years old or younger	-1	15 years old	-8
9 years old	-2	16 years old	-9
10 years old	-3	17 years old	-10
11 years old	-4	18 years old	-11
12 years old	-5	19 years old	-12
13 years old	-6	20 years old	-13
14 years old	-7		

RESPONSE VALIDATION: If age of onset > current age, ask:

5kv. *“Earlier you mentioned that you were [INSERT AGE] years old, but now you just said that you were [INSERT Q.5k response] years old when you first used an oral nicotine product. Please confirm the age that you first used an oral nicotine product.”*

[REDISPLAY RESPONSE LIST FROM Q.5k AND RECORD VALIDATION RESPONSE IN A SEPARATE VARIABLE]

[ONLY ASK VALIDATION ONCE. IF STILL FAIL AFTER VALIDATION, ACCEPT RESPONSE AND RECORD “UNKNOWN AGE OF ONSET”]

6k. [If age of onset = current age -1] Did you first use an oral nicotine product within the past 12 months (that is, starting from MM/DD/YYYY)?

Yes - 1
No - 2

7k. [If Q4i1 is 'Yes'] Why did you **first use** an oral nicotine product? *(select all that apply)*

A friend used them	-1
A family member used them	-2
To try to quit using other tobacco products, such as cigarettes	-3
They cost less than other tobacco products, such as cigarettes	-4
They were easier to get than other tobacco products, such as cigarettes	-5
I've seen people on TV, online, or in movies use them	-6
They are less harmful than other forms of tobacco, such as cigarettes	-7
They were available in flavors, such as menthol, mint, candy, fruit, or chocolate	-8
I could use them unnoticed at home or at school	-9
I was curious about them	-10
I was feeling anxious, stressed, or depressed	-11
To get a high or buzz from nicotine	-12
I used them for some other reason (specify) _____	-90

OTHER ORAL NICOTINE PRODUCTS SECTION (CONTINUED)

8k. How many times have you used an oral nicotine product in your **entire life**? Count each occasion you used an oral nicotine product.

1 time	-1
2 to 10 times	-2
11 to 20 times	-3
21 to 50 times	-4
51 to 99 times	-5
100 or more times	-6

9k. When was the last time you used an oral nicotine product, even one or two times? (*Please select the first answer that fits.*)

Earlier today	-1
Not today but sometime during the past 7 days	-2
Not during the past 7 days but sometime during the past 30 days	-3
Not during the past 30 days but sometime during the past 6 months	-4
Not during the past 6 months but sometime during the past year	-5
1 to 4 years ago	-6
5 or more years ago	-7

**Questions 10-18 are for past 30 day (P30D) users
(If Q9kj is 1-3, ask Q.10k; otherwise, skip to NEXT SECTION)**

10k. [If Q9k is 1-3] During the **past 30 days**, on how many days did you use an oral nicotine products?

__ _ Number of days (1-30)

11k. [If Q9k is 1-3] During the past 30 days, **on the days you used** an oral nicotine product, about how many times per day did you use them?

1 time per day	-1
2 to 5 times per day	-2
6 to 10 times per day	-3
11 to 20 times per day	-4
More than 20 times per day	-5

OTHER ORAL NICOTINE PRODUCTS SECTION (CONTINUED)

12k. [If Q9k is 1-3] During the past 30 days, what brand or brands of oral nicotine products did you use? *(select all that apply)*

(Display brand list)

LUCY	-5	
NIC NAC	-12	
REVEL	-13	
ROGUE	-7	
VELO	-8	
	Some other brand not listed here	-90
	(specify) _____	
	Not sure	-99

13k. [If more than 1 brand mentioned at Q.12k] During the past 30 days, what brand of oral nicotine products did you usually use? *(select one answer)* [Only display brands mentioned at Q.12k, "no usual" and "not sure"]

[PROGRAMMING NOTE: AUTOMARK Q.13k IF ONLY 1 BRAND MENTIONED AT Q.12k]

(Display brand list)

I did not have a usual brand	-1	
LUCY	-6	
NIC NAC	-13	
REVEL	-14	
ROGUE	-8	
VELO	-9	
	Some other brand not listed here	-90
	(specify) _____	
	Not sure	-99

OTHER ORAL NICOTINE PRODUCTS SECTION (CONTINUED)

14k. [If Q9k is 1-3] What flavor or flavors were the oral nicotine products that you used during the past 30 days? *(select all that apply)*

Tobacco or Original	-1
Wintergreen	-2
Mint	-3
Spice (such as cinnamon, vanilla, or clove)	-4
Fruit	-5
Chocolate	-6
Alcoholic drinks (such as wine, cognac, margarita, or other cocktails)	-7
Non-alcoholic drinks (such as coffee, soda, lemonade, or other beverage)	-9
Candy, desserts, or other sweets	-8
Unflavored	-10
Some other flavor not listed here (specify) _____	-90
Don't Know	-99

15k. [If more than one response at Q.14k] During the past 30 days, which flavor variety did you usually use? *(select one answer)* [Only display flavors mentioned at Q.14k, "no usual" and "don't know"]

[PROGRAMMING NOTE: AUTOMARK Q.15k IF ONLY 1 FLAVOR MENTIONED AT Q.14k]

I did not have a usual flavor	-97
Tobacco or Original	-1
Wintergreen	-2
Mint	-3
Spice (such as cinnamon, vanilla, or clove)	-4
Fruit	-5
Chocolate	-6
Alcoholic drinks (such as wine, cognac, margarita, or other cocktails)	-7
Non-alcoholic drinks (such as coffee, soda, lemonade, or other beverage)	-9
Candy, desserts, or other sweets	-8
Unflavored	-10
Some other flavor not listed here (specify) _____	-90
Don't Know	-99

(Questions 16k through 20k added in Q1'26)

16k. [If Q9k is 1-3] During the past 30 days, how did you usually get your oral nicotine products? *(select one answer)*

I bought them myself	-1
I had someone else buy them for me	-2
I asked someone to give me some	-3
Someone offered them to me	-4
I got them from a friend	-5
I got them from a family member	-6
I took them from a store or another person	-10
I got them some other way (specify _____)	-90

OTHER ORAL NICOTINE PRODUCTS SECTION (CONTINUED)

17k. [If Q.16k is is response 2, 3, 4, 8, or 9] Earlier you answered that you got or bought your oral nicotine products from another person, such as a friend or family member during the past 30 days. How old was this person? (*select one answer*)

Younger than 18 years old	-1
18 years old	-2
19 years old	-3
20 years old	-4
21 years old or older	-5
I don't know	-99

18k. [If Q16k is "I bought them myself"] During the past 30 days, where did you usually buy your oral nicotine products? (*select one answer*)

A gas station or convenience store	-1
A grocery store	-2
A drugstore	-3
A mall or shopping center kiosk/stand	-4
On the Internet (such as a product website or store website like EBAY or FACEBOOK MARKETPLACE)	-5
Through the mail	-6
A vape shop	-7
A tobacco specialty store	-8
Through a delivery service (such as DOORDASH or POSTMATES)	-9
Some other place not listed here	-90

18k1. [If Q16k is "I bought them myself"] You mentioned that you usually bought your oral nicotine products yourself in the past 30 days. During that time, how often were you asked to show proof of age? (*Select one answer*)

Always	-1
Usually	-2
About half of the time	-3
Rarely	-4
Never	-5
Don't remember	-6

OTHER ORAL NICOTINE PRODUCTS SECTION (CONTINUED)

18k2. [If Q18k is response 1-4 OR 6-10] You mentioned that you usually bought your oral nicotine products [INSERT PARTICIPANT RESPONSE FROM Q18k]. How were you able to buy these products? *(select all that apply)*

PROGRAMMER INSTRUCTIONS

Response from Q18k	TEXT TO PIPE INTO Q18k2
1	at a gas station or convenience store
2	at a grocery store
3	at a drugstore
4	at a mall or shopping center kiosk/stand
6	on the Internet
7	through the mail
8	at a vape shop
9	at a tobacco specialty store
10	through a delivery service

I was not asked to show an ID		-1
I was ID-ed and used a fake ID		-2
I was ID-ed, used my legal ID and it was accepted		-3
I knew the person behind the counter		-4
Other	(specify) _____	-5
Don't know		-6

18k3. [If Q.18k2 is 2 or 3] Was your ID digitally verified or scanned before your purchase?

Yes, my ID was scanned or digitally verified	- 1
No, my ID was visually checked but not scanned	- 2
Don't Know/Not sure	-99

18k4. [If Q16k is "I bought them myself"] In your opinion, how easy is it for people your age to buy oral nicotine products themselves? To answer use a scale from 1 to 5 where '1' means "VERY EASY" and '5' means "VERY DIFFICULT". You can use any number from 1 to 5 to indicate your answer.

Very Easy				Very Difficult
-1	-2	-3	-4	-5

7k1. [If Q9k is 1-3] Why do you **currently use** oral nicotine products? *(select all that apply)*

A friend uses them	-1
A family member uses them	-2
To try to quit using other tobacco products, such as cigarettes	-3
They cost less than other tobacco products, such as cigarettes	-4
They are easier to get than other tobacco products, such as cigarettes	-5
I've seen people on TV, online, or in movies use them	-6
They are less harmful than other forms of tobacco, such as cigarettes	-7
They are available in flavors, such as menthol, mint, candy, fruit, or chocolate	-8
I can use them unnoticed at home or at school	-9
I am curious about them	-10
Because I feel anxious, stressed, or depressed	-11
To get a high or buzz from nicotine	-12
I use them for some other reason (specify) _____	-90

OTHER ORAL NICOTINE PRODUCTS SECTION (CONTINUED)

19k. [If Q9k > 3 (i.e., lifetime history of use but not in the past 30 days)] Have you completely stopped using oral nicotine products?

Yes - 1

No - 2

20k. [If Q9k = 1-3 (P30D user)] Are you seriously thinking about stopping using oral nicotine products? (Please choose the first answer that fits)

Yes, within the next 30 days -1

Yes, within the next 6 months -2

Yes, within the next 12 months -3

Yes, but not within the next 12 months -4

No, I am not seriously thinking about stopping -5

FIRST PRODUCT USED

(After all tobacco product modules are completed, ask the following question if respondent indicates that multiple tobacco products were first used at the same earliest age.)

(Question 21 list last modified in Q1'26)

21. You mentioned that you started using the following products at age [EARLIEST AGE].
Which type of tobacco did you try first? (*select one answer*)

(ONLY DISPLAY APPLICABLE PRODUCTS – THOSE WITH SAME AGE OF ONSET)

Cigarettes	-1
Cigars	-2
Chewing tobacco, snuff, or dip	-3
E-cigarettes	-4
Hookah	-5
A pipe filled with tobacco	-6
Snus	-7
Heated tobacco products	-8
Nicotine pouches [Modified Q1'26]	-9
Other oral nicotine products [Added Q1'26]	-11
I can't remember	-10

SUSCEPTIBILITY (AMONG AWARE/NEVER USERS)

(Questions 33a1-33i8 added in Q3'24)

(ASK Q33a1-Q33a4 IF 'YES' AT Q3a AND 'NO' AT Q.4a)

33a1. You mentioned earlier that you are aware of e-cigarettes but have never used them. Have you ever been curious about using an e-cigarette?

Definitely yes -1
 Probably yes -2
 Probably not -3
 Definitely not -4

33a2. Do you think that you will try an e-cigarette soon?

Definitely yes -1
 Probably yes -2
 Probably not -3
 Definitely not -4

33a3. Do you think you will use an e-cigarette in the next year?

Definitely yes -1
 Probably yes -2
 Probably not -3
 Definitely not -4

33a4. If one of your best friends were to offer you an e-cigarette, would you use it?

Definitely yes -1
 Probably yes -2
 Probably not -3
 Definitely not -4

(ASK Q33b1-Q33b4 IF 'YES' AT Q.3b AND 'NO' AT Q.4b)

33b1. You mentioned earlier that you are aware of cigarettes but have never smoked them. Have you ever been curious about smoking a cigarette?

Definitely yes -1
 Probably yes -2
 Probably not -3
 Definitely not -4

33b2. Do you think that you will try a cigarette soon?

Definitely yes -1
 Probably yes -2
 Probably not -3
 Definitely not -4

33b3. Do you think you will smoke a cigarette in the next year?

Definitely yes -1
 Probably yes -2
 Probably not -3
 Definitely not -4

SUSCEPTIBILITY (AMONG AWARE/NEVER USERS) - Continued

33b4. If one of your best friends were to offer you a cigarette, would you smoke it?

- Definitely yes -1
- Probably yes -2
- Probably not -3
- Definitely not -4

(ASK Q33h1-Q33h4 IF 'YES' AT Q3h AND 'NO' AT Q4h)

33h1. You mentioned earlier that you are aware of heated tobacco products but have never used them. Have you ever been curious about using a heated tobacco product?

- Definitely yes -1
- Probably yes -2
- Probably not -3
- Definitely not -4

33h2. Do you think that you will try a heated tobacco product soon?

- Definitely yes -1
- Probably yes -2
- Probably not -3
- Definitely not -4

33h3. Do you think you will use a heated tobacco product in the next year?

- Definitely yes -1
- Probably yes -2
- Probably not -3
- Definitely not -4

33h4. If one of your best friends were to offer you a heated tobacco product, would you use it?

- Definitely yes -1
- Probably yes -2
- Probably not -3
- Definitely not -4

(ASK Q33i1-Q33i4 IF 'YES' AT Q3i AND 'NO' AT Q.4i)

33i1. You mentioned earlier that you are aware of nicotine pouches but have never used them. Have you ever been curious about using a nicotine pouch?

- Definitely yes -1
- Probably yes -2
- Probably not -3
- Definitely not -4

33i2. Do you think that you will try a nicotine pouch soon?

- Definitely yes -1
- Probably yes -2
- Probably not -3
- Definitely not -4

SUSCEPTIBILITY (AMONG AWARE/NEVER USERS) - Continued

33i3. Do you think you will use a nicotine pouch in the next year?

- Definitely yes -1
- Probably yes -2
- Probably not -3
- Definitely not -4

33i4. If one of your best friends were to offer you a nicotine pouch, would you use it?

- Definitely yes -1
- Probably yes -2
- Probably not -3
- Definitely not -4

(ASK Q33i5-Q33i8 IF 'YES' AT Q3ii AND 'NO' AT Q.4i1)

33i5. You mentioned that you are aware of oral nicotine products that might come in the form of non-medical lozenges, gum, tablets, and/or gummies, but have never used them. Have you ever been curious about using these types of oral nicotine products?

- Definitely yes -1
- Probably yes -2
- Probably not -3
- Definitely not -4

33i6. Do you think that you will try these types of oral nicotine products soon?

- Definitely yes -1
- Probably yes -2
- Probably not -3
- Definitely not -4

33i7. Do you think you will use these types of oral nicotine products in the next year?

- Definitely yes -1
- Probably yes -2
- Probably not -3
- Definitely not -4

33i8. If one of your best friends were to offer you such types of oral nicotine products, would you use them?

- Definitely yes -1
- Probably yes -2
- Probably not -3
- Definitely not -4

HOUSEHOLD TOBACCO USE (AMONG ALL PARTICIPANTS)

(Question 34 added in Q3'24)

34. This next question asks about your experiences with tobacco products at home. Does anyone who lives with you now...? *(Select all that apply)*

A	Use e-cigarettes	-1
B	Smoke cigarettes	-2
C	Smoke cigars, cigarillos, or little cigars	-3
D	Use chewing tobacco, snuff, or dip	-4
E	Use snus	-5
F	Use nicotine pouches	-6
G	Use other oral nicotine products	-7
H	Smoke tobacco in a hookah or waterpipe	-8
I	Use heated tobacco products	-9
J	Smoke pipes filled with tobacco (not hookah or waterpipe)	-10
K	Smoke roll-your-own cigarettes	-11
L	No one who lives with me now uses any form of tobacco [SINGLE SELECT]	-12

SOCIAL MEDIA (AMONG ALL PARTICIPANTS) (Added Q3'24)

The next questions are about social media such as YouTube, Instagram, Snapchat, Twitter, Facebook, Reddit, TikTok, or Twitch.

35. How often do you use social media? *(Select one answer)*

Never / I don't use social media	-1
Less than one time per week	-2
About one time per week	-3
A few times per week	-4
Less than 1 hour, daily	-5
About 1-2 hours, daily	-6
About 3-4 hours, daily	-7
4 hours or more, daily	-8

36. [If Q35 is > 1] When you use social media, do you see posts or content (pictures, videos, or text) related to the following tobacco products? *(Select all that apply)*

A	E-cigarettes		-1
B	Cigarettes		-2
C	Cigars, cigarillos, or little cigars		-3
D	Chewing tobacco, snuff, or dip		-4
E	Hookah or waterpipe		-5
F	Snus		-6
G	Heated tobacco		-7
H	Nicotine pouches		-8
I	Other oral nicotine products		-9
J	Some other tobacco product	(specify: _____)	-10
K	I have not seen posts or content of any of these tobacco products on social media [SINGLE SELECT]		-11
L	I don't remember [SINGLE SELECT]		-12

SOCIAL MEDIA (Continued)

37. [If Q36 = 1-10] On which social media sites have you seen posts or content related to these tobacco products? *(Select all that apply)*

Facebook		-1
Instagram		-2
Snapchat		-3
TikTok		-4
Twitch		-5
X (fka. Twitter)		-6
Reddit		-7
YouTube		-8
Some other site	(specify: _____)	-9

38. [If Q36 = 1-10] Who usually posted the content related to tobacco products on your social media? *(Select all that apply)*

People I know in real life		-1
Online friends I have not met in real life		-2
Celebrities or social media influencers		-3
Product brands or sellers		-4
Online news articles		-5
Public health campaigns (e.g., Truth Initiative, Real Cost)		-6
Other	(specify: _____)	-7

QUALITY CONTROL #2

QC2. [QUALITY CONTROL TEST #2] Thank you for your answers so far. We appreciate your input. You're almost finished! Please select [INSERT COLOR] to continue with your survey.

(RANDOMIZE LIST)

RED	-1
BLUE	-2
YELLOW	-3
GREEN	-4

(SET "FLAG-4" IF PARTICIPANT DOES NOT SELECT THE CORRECT COLOR)

ADDITIONAL DEMOGRAPHIC QUESTIONS

These last few questions are for classifications purposes only.

(IF MALE, INSERT "Latino"; IF FEMALE, INSERT "Latina")

22. Are you Hispanic, [Latino/Latina], or of Spanish origin?

Yes	-1
No	-2
Don't Know	-99
Refused	-98

23. What race or races do you consider yourself to be?
(select all that apply.)

White	-1
Black or African American	-2
Native American or Alaska Native	-3
Native Hawaiian or Other Pacific Islander	-4
Asian	-5
Prefer not to answer	-98

24. Are you currently...
(select one answer)

A student in middle-school	-1
A student in high-school	-2
Home schooled	-3
A student in college or university	-4
Working part time, not in school	-5
Working full time, not in school	-6

25. [If above question is 'middle or high school' or 'home schooled'] What grade are you in? If you are on a holiday or summer break, please select the grade or year you will enter when you return to school. If you are home schooled, please select the grade you would be in if you were attending your local school

6th grade or below	-1
7th grade	-2
8th grade	-3
9th grade	-4
10th grade	-5
11th grade	-6
12th grade	-7
Other (not enrolled this year or last, or school not graded)	-8

ADDITIONAL DEMOGRAPHICS (Continued)

(Questions 31-32 added in Q3'23; Other/Specify removed in Q4'24)

31. Which of the following best describes you (select one)?

Lesbian or gay	-1
Heterosexual (straight), that is, not gay or lesbian	-2
Bisexual	-3
I am not sure	-4
I use a different term	-5
I prefer not to answer	-98

32. Some people describe themselves as transgender when their sex at birth does not match the way they think or feel about their gender. Are you transgender?

No, I am not transgender	-1
Yes, I am transgender	-2
I am not sure if I am transgender	-3
I don't know what this question is asking	-4
I use a different term	-5
I prefer not to answer	-98