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Tobacco Use (Standard)

Patient Name: _____ Date: _____

Please answer according to your personal tobacco use:

Tobacco Use:

- ☐ Nonsmoker
- ☐ Current Smoker
- ☐ Chew Tobacco
- ☐ E-Cigarette (Vaping)

When did you start using tobacco? _____

How soon after you wake up do you use tobacco?

- ☐ Within 5 minutes
- ☐ 6-30 minutes
- ☐ 31-60 minutes
- ☐ 60+ minutes

Frequency of Use:

- ☐ Only Some Days
- ☐ Light Use (1/4 pack/day)
- ☐ Moderate Use (1/2 pack/day)
- ☐ Heavy Use (1 pack or more/day)
- ☐ Chew Tobacco Daily

Are you interested in quitting?

- ☐ Yes
- ☐ No