

Integrated Smoking Cessation Treatment for Smokers with Serious Mental Illnesses

[Project Home](#) [Codebook](#)

Data Dictionary Codebook

09/03/2020 11:16am

^ Collapse all instruments

#	Variable / Field Name	Field Label <i>Field Note</i>	Field Attributes (Field Type, Validation, Choices, Calculations, etc.)
Instrument: Complete Survey Year 1 (complete_survey_year_1)			^ Collapse
1	study_id	Study ID	text
2	visit_1	Visit Date	text (datetime_mdy), Required
3	fact_sheet_year_1	<p>Hi</p> <p>This is a confidential survey.</p> <p>We are asking you to participate because you receive psychiatric rehabilitation services from Bay Cove Human Services or Vinfen</p> <p>We want to learn if teaching primary care doctors about safe and effective use of smoking cessation treatments improves the care they provide to smokers with serious mental illness that they treat.</p> <p>You will answer a short survey about your smoking, smoking cessation treatment, age and race. This should take less than 5 minutes to complete. We will ask you to complete this survey and answer these questions once a year for 3 years. We will not ask you to change your smoking.</p> <p>We will add 5 minutes to your meeting with your psychiatric rehabilitation team to ask you about your smoking. If you find this to be stressful, you can skip any questions that you don't want to answer.</p> <p>You may not receive any direct benefit.</p> <p>It is hoped that the findings from this study will help doctors, insurance companies and agencies such as the Department of Mental Health to provide and pay for the most effective smoking treatments for individuals with serious mental illness.</p> <p>Your participation is completely voluntary and you can stop the brief survey at any time.</p> <p>Your decision to participate or not will not affect in any way the medical care, psychiatric rehabilitation services or DMH services that you receive now or in the future. You do not have to take part in this study. Taking part in this study is up to you. There will be no penalty if you do not participate or if you stop the survey at any time; you will not lose any benefits you receive now or have a right to receive.</p> <p>During this survey, personal information about your health will be collected by your psychiatric rehabilitation team and shared with the MGH researchers who will see the responses identified only by a study number.</p> <p>You will receive \$5 for your time once you complete each annual survey.</p> <p>If you have questions or concerns please contact Madeleine Fontaine at 617- 643-4692.</p> <p>If you would like to speak to someone not involved in this research about your rights as a research subject, or any concerns or complaints you may have about the research, contact the Partners Human Research Committee at 617-424-4100.</p>	descriptive

4	consent_year_1	Do you want to participate by answering these questions?	<div>yesno</div> <div><div>1 Yes</div><div>0 No</div></div> <div>Custom alignment: LV</div>
5	blank		descriptive
6	name_1 <div>Show the field ONLY if: [consent_year_1]='1'</div>	First Name	text, Required
7	age_1 <div>Show the field ONLY if: [consent_year_1]='1'</div>	Age	text (number, Min: 19, Max: 90), Required
8	sex_1 <div>Show the field ONLY if: [consent_year_1]='1'</div>	Sex	<div>radio, Required</div> <div><div>1 Male</div><div>2 Female</div></div>
9	race_1 <div>Show the field ONLY if: [consent_year_1]='1'</div>	Race	<div>radio, Required</div> <div><div>1 White</div><div>2 Haitian, Black, or African American</div><div>3 Asian</div><div>4 Hawaiian or other Pacific Islander</div><div>5 American Indian/Alaska Native</div><div>7 Multi-race</div><div>6 Other</div></div> <div>Custom alignment: LV</div>
10	other_race <div>Show the field ONLY if: [consent_year_1] = '1' and [race_1] = '6'</div>	Other race	notes, Required
11	ethnic <div>Show the field ONLY if: [consent_year_1]='1'</div>	Ethnicity	<div>radio, Required</div> <div><div>1 Hispanic or Latino</div><div>2 Not Hispanic or Latino</div></div>
12	blank2_1dc2_cce2_be52_109		descriptive
13	currently_smoke <div>Show the field ONLY if: [consent_year_1]='1'</div>	Do you regularly smoke any tobacco products? (I.e. Cigarettes, Cigars, Cigarillos, Rollies, Mini Cigars, Pipe)	<div>radio, Required</div> <div><div>1 Yes</div><div>0 No</div><div>2 Prefer not to answer</div></div>
14	smoking_habits <div>Show the field ONLY if: [consent_year_1]='1' and [current ly_smoke]='1'</div>	Tell me about your smoking. How much do you normally smoke each day?	<div>notes, Required</div> <div>Custom alignment: LH</div>
15	cpd_1 <div>Show the field ONLY if: [consent_year_1]='1' and [current ly_smoke]='1'</div>	On average, approximately how many tobacco products do you smoke on a typical day? (I.e. Cigarettes, Cigars, Cigarillos, Rollies, Mini Cigars, Pipe)	<div>radio, Required</div> <div><div>1 less than 5</div><div>2 5 - 10</div><div>3 11 - 20</div><div>4 21 - 30</div><div>5 31 or more</div><div>6 calculation required</div></div> <div>Custom alignment: LV</div>
16	notes_for_type_of_tobacco <div>Show the field ONLY if: [consent_year_1]='1' and [current ly_smoke]='1'</div>	Notes for type of tobacco product	<div>notes</div> <div>Custom alignment: LV</div>

17	smoke_waking_up Show the field ONLY if: [consent_year_1]='1' and [current_ly_smoke]='1'	How soon after waking up do you smoke your first tobacco product?	radio, Required <table border="1"> <tr><td>1</td><td>Within 5 minutes</td></tr> <tr><td>2</td><td>6-30 minutes</td></tr> <tr><td>3</td><td>31-60 minutes</td></tr> <tr><td>4</td><td>Greater than 60 minutes</td></tr> <tr><td>5</td><td>Prefer not to answer</td></tr> </table>	1	Within 5 minutes	2	6-30 minutes	3	31-60 minutes	4	Greater than 60 minutes	5	Prefer not to answer					
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			Custom alignment: LV															
18	able_smoke_awakening Show the field ONLY if: [smoke_waking_up] = '2' or [smoke_waking_up] = '3' or [smoke_waking_up] = '4'	If you were able to, would you smoke right after waking up?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer									
1	Yes																	
0	No																	
2	Prefer not to answer																	
19	prevent_smoking Show the field ONLY if: [able_smoke_awakening] = '1'	What prevents you from smoking upon awakening?	checkbox, Required <table border="1"> <tr><td>1</td><td>prevent_smoking__1</td><td>I am not allowed to smoke in my house</td></tr> <tr><td>2</td><td>prevent_smoking__2</td><td>I dont have cigarettes when I get up</td></tr> <tr><td>3</td><td>prevent_smoking__3</td><td>I dont have time</td></tr> <tr><td>4</td><td>prevent_smoking__4</td><td>Other</td></tr> <tr><td>5</td><td>prevent_smoking__5</td><td>Prefer not to answer</td></tr> </table>	1	prevent_smoking__1	I am not allowed to smoke in my house	2	prevent_smoking__2	I dont have cigarettes when I get up	3	prevent_smoking__3	I dont have time	4	prevent_smoking__4	Other	5	prevent_smoking__5	Prefer not to answer
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4	prevent_smoking__4	Other																
5	prevent_smoking__5	Prefer not to answer																
			Custom alignment: LV															
20	other_1 Show the field ONLY if: [prevent_smoking(4)] = '1'	Other	notes, Required Custom alignment: LV															
21	blank2_1dc2_cce2_be522_348 Show the field ONLY if: [consent_year_1]='1' and [current_ly_smoke]='1'	The following questions are about your primary care doctor or prescribing nurse. This is the doctor or nurse you see every year for general medical concerns to do with your physical. This is not your psychiatrist or therapist.	descriptive															
22	pcp_clinic Show the field ONLY if: [consent_year_1]='1' and [current_ly_smoke]='1'	What is the name of the clinic where you see your primary care doctor?	text															
23	clinic_location Show the field ONLY if: [consent_year_1]='1' and [current_ly_smoke]='1'	Where is the clinic located?	text															
24	name_of_pcp Show the field ONLY if: [consent_year_1]='1' and [current_ly_smoke]='1'	What is your doctor's name?	text															
25	psych_name Show the field ONLY if: [consent_year_1]='1' and [current_ly_smoke]='1'	What is your psychiatrist's name?	text, Required															
26	doc_know_smoke Show the field ONLY if: [consent_year_1]='1' and [current_ly_smoke]='1'	Does your medical doctor know you smoke tobacco products?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>I don't know/Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	I don't know/Prefer not to answer									
1	Yes																	
0	No																	
2	I don't know/Prefer not to answer																	
27	seen_doc Show the field ONLY if: [consent_year_1]='1' and [current_ly_smoke]='1'	Have you seen your medical doctor in the past year?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer									
1	Yes																	
0	No																	
2	Prefer not to answer																	

28	any_treatment Show the field ONLY if: [consent_year_1]='1' and ([currently_smoke]='1' or [currently_smoke]='2')	In the past year, have you used anything to quit smoking?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																					
1	Yes																													
0	No																													
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29	what_treatment Show the field ONLY if: [any_treatment] = '1'	What did you use?	notes, Required Custom alignment: LV																											
30	doc_recommended_quit Show the field ONLY if: [consent_year_1]='1' and ([currently_smoke]='1' or [currently_smoke]='2') and ([seen_doc]='1' or [seen_n_doc]='2')	Has your medical doctor recommended that you quit smoking in the past year?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																					
1	Yes																													
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2	Prefer not to answer																													
31	often_recommended_quit Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1'	How often did your medical doctor recommend you quit smoking?	radio, Required <table border="1"> <tr><td>1</td><td>At every visit</td></tr> <tr><td>2</td><td>At most visits</td></tr> <tr><td>3</td><td>At some visits</td></tr> <tr><td>4</td><td>Prefer not to answer</td></tr> </table> Custom alignment: LV	1	At every visit	2	At most visits	3	At some visits	4	Prefer not to answer																			
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4	Prefer not to answer																													
32	quit_line_246aec Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1'	Has your medical doctor ever recommended that you call the quit-line?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																					
1	Yes																													
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33	doc_group_therapy Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1'	Did your medical doctor ever arrange for you to attend any smoking group to help you quit smoking?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																					
1	Yes																													
0	No																													
2	Prefer not to answer																													
34	attend_group_therapy Show the field ONLY if: [consent_year_1]='1' and [doc_group_therapy]='1'	Did you attend the smoking group?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																					
1	Yes																													
0	No																													
2	Prefer not to answer																													
35	blank2_1dc2_cce2_be522_7fa Show the field ONLY if: [consent_year_1]='1' and [doc_group_therapy]='1'		descriptive																											
36	doc_prescribed Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1'	In the past year, did your medical doctor prescribe medication, or suggest that you use nicotine patch, gum, lozenges or e-cigarettes to help you to quit smoking?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																					
1	Yes																													
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37	treatment Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1'	If yes, which? (Check all that apply)	checkbox, Required <table border="1"> <tr><td>1</td><td>treatment__1</td><td>Varenicline (i.e. Chantix)</td></tr> <tr><td>2</td><td>treatment__2</td><td>Bupropion (i.e. Zyban, Wellbutrin)</td></tr> <tr><td>3</td><td>treatment__3</td><td>Nicotine Patch</td></tr> <tr><td>4</td><td>treatment__4</td><td>Nicotine Gum/Lozenge</td></tr> <tr><td>5</td><td>treatment__5</td><td>E-cigarettes/Vape</td></tr> <tr><td>6</td><td>treatment__6</td><td>Pills to quit smoking</td></tr> <tr><td>7</td><td>treatment__7</td><td>Other</td></tr> <tr><td>8</td><td>treatment__8</td><td>Prefer not to answer</td></tr> <tr><td>9</td><td>treatment__9</td><td>Could not remember</td></tr> </table> Custom alignment: LV	1	treatment__1	Varenicline (i.e. Chantix)	2	treatment__2	Bupropion (i.e. Zyban, Wellbutrin)	3	treatment__3	Nicotine Patch	4	treatment__4	Nicotine Gum/Lozenge	5	treatment__5	E-cigarettes/Vape	6	treatment__6	Pills to quit smoking	7	treatment__7	Other	8	treatment__8	Prefer not to answer	9	treatment__9	Could not remember
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38	filled_var Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1' and [treatment(1)]='1'	Did you fill or get the prescription for varenicline (Chantix)?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																											
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39	took_var Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1' and [treatment(1)]='1' and [filled_var]='1'	Did you take any of the varenicline (Chantix)?	radio <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																											
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40	reason_no_var Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1' and [treatment(1)]='1' and ([filled_var]='0' or [took_var]='0')	why not?	checkbox, Required <table border="1"> <tr><td>1</td><td>reason_no_var__1</td><td>I don't need to take more medications</td></tr> <tr><td>2</td><td>reason_no_var__2</td><td>Fear of adverse effects,</td></tr> <tr><td>3</td><td>reason_no_var__3</td><td>Family/friends/media recommended not taking it</td></tr> <tr><td>4</td><td>reason_no_var__4</td><td>I took it before and didn't like the effect (their past experiences)</td></tr> <tr><td>5</td><td>reason_no_var__5</td><td>I didnt understand what the Treatment was about</td></tr> <tr><td>6</td><td>reason_no_var__6</td><td>I couldnt afford it</td></tr> <tr><td>7</td><td>reason_no_var__7</td><td>I'd rather go to smoking groups</td></tr> <tr><td>8</td><td>reason_no_var__8</td><td>I forgot</td></tr> <tr><td>9</td><td>reason_no_var__9</td><td>Other</td></tr> <tr><td>10</td><td>reason_no_var__10</td><td>Prefer not to answer</td></tr> <tr><td>11</td><td>reason_no_var__11</td><td>I didn't want to quit smoking</td></tr> </table> Custom alignment: LV	1	reason_no_var__1	I don't need to take more medications	2	reason_no_var__2	Fear of adverse effects,	3	reason_no_var__3	Family/friends/media recommended not taking it	4	reason_no_var__4	I took it before and didn't like the effect (their past experiences)	5	reason_no_var__5	I didnt understand what the Treatment was about	6	reason_no_var__6	I couldnt afford it	7	reason_no_var__7	I'd rather go to smoking groups	8	reason_no_var__8	I forgot	9	reason_no_var__9	Other	10	reason_no_var__10	Prefer not to answer	11	reason_no_var__11	I didn't want to quit smoking
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41	other_no_var_1 Show the field ONLY if: [reason_no_var(9)] = '1'	Other	notes, Required Custom alignment: LV																																	
42	time_var Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1' and [treatment(1)]='1' and [filled_var]='1' and [took_var]='1'	How long did you take varenicline (Chantix)?	radio, Required <table border="1"> <tr><td>1</td><td>less than 1 week</td></tr> <tr><td>2</td><td>less than 1 month</td></tr> <tr><td>3</td><td>less than 3 months</td></tr> <tr><td>4</td><td>3 months or more</td></tr> </table> Custom alignment: LV	1	less than 1 week	2	less than 1 month	3	less than 3 months	4	3 months or more																									
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43	refill_var Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1' and [treatment(1)]='1' and [filled_var]='1'	Did you refill or get more of your prescription for varenicline (Chantix)?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																											
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44	blank2_1dc2_cce2_be522_4bf Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1' and [treatment(1)]='1' and [filled_var]='1'		descriptive																																	
45	filled_bup Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1' and [treatment(2)]='1'	Did you fill or get the prescription for Bupropion (Zyban)?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																											
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46	<p>took_bup</p> <p>Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1' and [treatment (2)]='1' and [filled_bup]='1'</p>	Did you take any of the bupropion (Zyban)?	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																											
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47	<p>reasons_no_bup</p> <p>Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1' and [treatment (2)]='1' and ([filled_bup]='0' or [took_bup]='0')</p>	why not?	<p>checkbox, Required</p> <table border="1"> <tr><td>1</td><td>reasons_no_bup__1</td><td>I don't need to take more medications</td></tr> <tr><td>2</td><td>reasons_no_bup__2</td><td>Fear of adverse effects,</td></tr> <tr><td>3</td><td>reasons_no_bup__3</td><td>Family/friends/media recommended not taking it</td></tr> <tr><td>4</td><td>reasons_no_bup__4</td><td>I took it before and didn't like the effect (their past experiences)</td></tr> <tr><td>5</td><td>reasons_no_bup__5</td><td>I didn't understand what the Treatment was about</td></tr> <tr><td>6</td><td>reasons_no_bup__6</td><td>I couldn't afford it</td></tr> <tr><td>7</td><td>reasons_no_bup__7</td><td>I'd rather go to smoking groups</td></tr> <tr><td>8</td><td>reasons_no_bup__8</td><td>I forgot</td></tr> <tr><td>9</td><td>reasons_no_bup__9</td><td>Other</td></tr> <tr><td>10</td><td>reasons_no_bup__10</td><td>Prefer not to answer</td></tr> <tr><td>11</td><td>reasons_no_bup__11</td><td>I didn't want to quit smoking</td></tr> </table> <p>Custom alignment: LV</p>	1	reasons_no_bup__1	I don't need to take more medications	2	reasons_no_bup__2	Fear of adverse effects,	3	reasons_no_bup__3	Family/friends/media recommended not taking it	4	reasons_no_bup__4	I took it before and didn't like the effect (their past experiences)	5	reasons_no_bup__5	I didn't understand what the Treatment was about	6	reasons_no_bup__6	I couldn't afford it	7	reasons_no_bup__7	I'd rather go to smoking groups	8	reasons_no_bup__8	I forgot	9	reasons_no_bup__9	Other	10	reasons_no_bup__10	Prefer not to answer	11	reasons_no_bup__11	I didn't want to quit smoking
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49	<p>time_bup</p> <p>Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1' and [treatment (2)]='1' and [filled_bup]='1' and [took_bup]='1'</p>	How long did you take bupropion (Zyban)?	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>less than 1 week</td></tr> <tr><td>2</td><td>less than 1 month</td></tr> <tr><td>3</td><td>less than 3 months</td></tr> <tr><td>4</td><td>3 months or more</td></tr> </table> <p>Custom alignment: LV</p>	1	less than 1 week	2	less than 1 month	3	less than 3 months	4	3 months or more																									
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50	<p>refill_bup</p> <p>Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1' and [treatment (2)]='1' and [filled_bup]='1'</p>	Did you refill or get more of your prescription for bupropion (Zyban)?	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																											
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52	<p>took_patch</p> <p>Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1' and [treatment (3)]='1'</p>	Did you use nicotine patches?	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																											
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53	<p>reason_no_patch</p> <p>Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1' and [treatment(3)]='1' and [took_patch]='0'</p>	why not?	<p>checkbox, Required</p> <table border="1"> <tr> <td>1</td> <td>reason_no_patch__1</td> <td>I don't need to take more medications</td> </tr> <tr> <td>2</td> <td>reason_no_patch__2</td> <td>Fear of adverse effects,</td> </tr> <tr> <td>3</td> <td>reason_no_patch__3</td> <td>Family/friends/media recommended not using it</td> </tr> <tr> <td>4</td> <td>reason_no_patch__4</td> <td>I took it before and didn't like the effect (their past experiences)</td> </tr> <tr> <td>5</td> <td>reason_no_patch__5</td> <td>I didnt understand what the Treatment was about</td> </tr> <tr> <td>6</td> <td>reason_no_patch__6</td> <td>I couldnt afford it</td> </tr> <tr> <td>7</td> <td>reason_no_patch__7</td> <td>I'd rather go to smoking groups</td> </tr> <tr> <td>8</td> <td>reason_no_patch__8</td> <td>I forgot</td> </tr> <tr> <td>9</td> <td>reason_no_patch__9</td> <td>Other</td> </tr> <tr> <td>10</td> <td>reason_no_patch__10</td> <td>Prefer not to answer</td> </tr> <tr> <td>11</td> <td>reason_no_patch__11</td> <td>I didn't want to quit smoking</td> </tr> </table> <p>Custom alignment: LV</p>	1	reason_no_patch__1	I don't need to take more medications	2	reason_no_patch__2	Fear of adverse effects,	3	reason_no_patch__3	Family/friends/media recommended not using it	4	reason_no_patch__4	I took it before and didn't like the effect (their past experiences)	5	reason_no_patch__5	I didnt understand what the Treatment was about	6	reason_no_patch__6	I couldnt afford it	7	reason_no_patch__7	I'd rather go to smoking groups	8	reason_no_patch__8	I forgot	9	reason_no_patch__9	Other	10	reason_no_patch__10	Prefer not to answer	11	reason_no_patch__11	I didn't want to quit smoking
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56	<p>took_gum</p> <p>Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1' and [treatment(4)]='1'</p>	Did you use Nicotine gum or lozenges?	<p>radio, Required</p> <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> <tr> <td>2</td> <td>Prefer not to answer</td> </tr> </table>	1	Yes	0	No	2	Prefer not to answer																											
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70	other_no_pill Show the field ONLY if: [reason_smoking_gettin2_ce7(9)] = '1'	Other	notes, Required Custom alignment: LV																																	
71	time_pills Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1' and [treatment (6)]='1' and [filled_pills]='1' and [took_pills]='1'	How long did you use pills to quit smoking?	radio, Required <table><tr><td>1</td><td>less than 1 week</td></tr><tr><td>2</td><td>less than 1 month</td></tr><tr><td>3</td><td>less than 3 months</td></tr><tr><td>4</td><td>3 months or more</td></tr></table> Custom alignment: LV	1	less than 1 week	2	less than 1 month	3	less than 3 months	4	3 months or more																									
1	less than 1 week																																			
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72	refill_pills Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1' and [treatment (6)]='1' and [filled_pills]='1'	Did you refill or get more of your prescription for pills to quit smoking?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer																											
1	Yes																																			
0	No																																			
2	Prefer not to answer																																			
73	blank2_1dc2_cce2_be522_631 Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1' and [treatment (6)]='1' and [filled_pills]='1'		descriptive																																	

74	other_432768 Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1' and [treatment (7)]='1'	What other method or treatment did you use to quit smoking?	notes, Required Custom alignment: LV																																																			
75	other_time Show the field ONLY if: [consent_year_1]='1' and [doc_recommended_quit]='1' and [doc_prescribed]='1' and [treatment (7)]='1'	How long did you use this other method for?	radio, Required <table border="1"> <tr><td>1</td><td>less than 1 week</td></tr> <tr><td>2</td><td>less than 1 month</td></tr> <tr><td>3</td><td>less than 3 months</td></tr> <tr><td>4</td><td>3 months or more</td></tr> </table> Custom alignment: LV	1	less than 1 week	2	less than 1 month	3	less than 3 months	4	3 months or more																																											
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3	less than 3 months																																																					
4	3 months or more																																																					
76	health_issues Show the field ONLY if: [consent_year_1]='1' and [current ly_smoke]='1'	Do you have any health issues? if yes, which ones?	notes, Required Custom alignment: LV																																																			
77	illness_smoking Show the field ONLY if: [consent_year_1]='1' and [current ly_smoke]='1'	Have you had any of these health conditions, either in the past or currently?	checkbox, Required <table border="1"> <tr><td>1</td><td>illness_smoking__1</td><td>Heart Disease</td></tr> <tr><td>2</td><td>illness_smoking__2</td><td>Heart Attack</td></tr> <tr><td>3</td><td>illness_smoking__3</td><td>Cancer (Any type)</td></tr> <tr><td>4</td><td>illness_smoking__4</td><td>Emphysema/COPD</td></tr> <tr><td>5</td><td>illness_smoking__5</td><td>Chronic bronchitis</td></tr> <tr><td>6</td><td>illness_smoking__6</td><td>Asthma</td></tr> <tr><td>7</td><td>illness_smoking__7</td><td>Respiratory Problems (can't remember)</td></tr> <tr><td>8</td><td>illness_smoking__8</td><td>Rheumatoid Arthritis</td></tr> <tr><td>9</td><td>illness_smoking__9</td><td>Diabetes (high blood sugar)</td></tr> <tr><td>10</td><td>illness_smoking__10</td><td>Blindness/Cataracts/Macular Degeneration</td></tr> <tr><td>11</td><td>illness_smoking__11</td><td>Tuberculosis</td></tr> <tr><td>12</td><td>illness_smoking__12</td><td>Hypertension (high blood pressure)</td></tr> <tr><td>13</td><td>illness_smoking__13</td><td>Hypotension (low blood pressure)</td></tr> <tr><td>14</td><td>illness_smoking__14</td><td>Other</td></tr> <tr><td>15</td><td>illness_smoking__15</td><td>Prefer not to answer</td></tr> <tr><td>16</td><td>illness_smoking__16</td><td>None</td></tr> <tr><td>17</td><td>illness_smoking__17</td><td>Pneumonia</td></tr> </table> Custom alignment: LV	1	illness_smoking__1	Heart Disease	2	illness_smoking__2	Heart Attack	3	illness_smoking__3	Cancer (Any type)	4	illness_smoking__4	Emphysema/COPD	5	illness_smoking__5	Chronic bronchitis	6	illness_smoking__6	Asthma	7	illness_smoking__7	Respiratory Problems (can't remember)	8	illness_smoking__8	Rheumatoid Arthritis	9	illness_smoking__9	Diabetes (high blood sugar)	10	illness_smoking__10	Blindness/Cataracts/Macular Degeneration	11	illness_smoking__11	Tuberculosis	12	illness_smoking__12	Hypertension (high blood pressure)	13	illness_smoking__13	Hypotension (low blood pressure)	14	illness_smoking__14	Other	15	illness_smoking__15	Prefer not to answer	16	illness_smoking__16	None	17	illness_smoking__17	Pneumonia
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78	other_health Show the field ONLY if: [illness_smoking(14)] = '1'	Other Health conditions	notes, Required																																																			
79	blank2_1dc2_cce2_be522_b7b Show the field ONLY if: [consent_year_1]='1' and [current ly_smoke]='1'		descriptive																																																			
80	sf_1 Show the field ONLY if: [consent_year_1]='1' and [current ly_smoke]='1'	In general, would you say your health is:	radio, Required <table border="1"> <tr><td>1</td><td>Excellent</td></tr> <tr><td>2</td><td>Very Good</td></tr> <tr><td>3</td><td>Good</td></tr> <tr><td>4</td><td>Fair</td></tr> <tr><td>5</td><td>Poor</td></tr> <tr><td>6</td><td>Prefer not to answer</td></tr> </table> Custom alignment: LV	1	Excellent	2	Very Good	3	Good	4	Fair	5	Poor	6	Prefer not to answer																																							
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81	notes_1 Show the field ONLY if: [consent_year_1] = '1'	NOTES	notes Custom alignment: LV																										
82	staff_completed_survey	Study Staff who completed the survey	radio, Required <table><tr><td>1</td><td>Eve Manghis</td></tr><tr><td>2</td><td>Madeleine Fontaine</td></tr><tr><td>3</td><td>Mike Vilme</td></tr><tr><td>4</td><td>Chris McGovern</td></tr><tr><td>5</td><td>Lara Sullivan</td></tr><tr><td>6</td><td>Bianca Deeb</td></tr><tr><td>7</td><td>Shannon Brick</td></tr><tr><td>8</td><td>Kelsey Lowman</td></tr><tr><td>9</td><td>Hannah Broos</td></tr><tr><td>10</td><td>Karlie Marrs</td></tr><tr><td>11</td><td>Nina Cherilus</td></tr><tr><td>12</td><td>Kara Santacroce</td></tr><tr><td>13</td><td>Other</td></tr></table> Custom alignment: LV	1	Eve Manghis	2	Madeleine Fontaine	3	Mike Vilme	4	Chris McGovern	5	Lara Sullivan	6	Bianca Deeb	7	Shannon Brick	8	Kelsey Lowman	9	Hannah Broos	10	Karlie Marrs	11	Nina Cherilus	12	Kara Santacroce	13	Other
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13	Other																												
83	other_staff_year_1 Show the field ONLY if: [staff_completed_survey] = '13'	Name of Other Staff	text, Required Custom alignment: LV																										
84	complete_survey_year_1_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete																				
0	Incomplete																												
1	Unverified																												
2	Complete																												

Instrument: **Complete Survey Year 2 UPDATED** (complete_survey_year_2_abstinent)

^ Collapse

85	fact_sheet_y2	Hi This is a confidential survey. Just like last year's survey, you will answer short questions about your smoking. This should take less than 5 minutes to complete. We will ask you to complete this survey and answer these questions one more time next year. Remember, like last year, I am not going to ask you to change your smoking. Your participation is completely voluntary and you can stop the brief survey at any time. Your decision to participate or not will not affect in any way the medical care, psychiatric rehabilitation services or DMH services that you receive now or in the future. You will not lose any benefits you receive now or have a right to receive. During this survey, personal information about your health will be collected by your psychiatric rehabilitation team and shared with the MGH researchers who will see the responses identified only by a study number. You will receive \$5 cash for your time once you complete this survey. If you have questions or concerns please contact XXX If you would like to speak to someone not involved in this research about your rights as a research subject, or any concerns or complaints you may have about the research, contact the Partners Human Research Committee at 617-424-4100.	descriptive
86	name_y2	First Name [year_1_arm_1][name_1]	text
87	visit_y2	Visit Date	text (datetime_mdy), Required

88	consent_y2	Do you want to participate by answering these questions?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table> Custom alignment: LV	1	Yes	0	No																	
1	Yes																							
0	No																							
89	currently_smoke_y2	Do you currently smoke any tobacco products? (I.e. Cigarettes, Cigars, Cigarillos, Rollies, Mini Cigars, Pipe) Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td> <td>currently_smoke_y2__1</td> <td>Cigarettes</td> </tr> <tr> <td>2</td> <td>currently_smoke_y2__2</td> <td>Mini cigars (i.e. double diamonds)</td> </tr> <tr> <td>3</td> <td>currently_smoke_y2__3</td> <td>loose tobacco (roll your own)</td> </tr> <tr> <td>4</td> <td>currently_smoke_y2__4</td> <td>e-cigarettes/vaping</td> </tr> <tr> <td>5</td> <td>currently_smoke_y2__5</td> <td>Other</td> </tr> <tr> <td>6</td> <td>currently_smoke_y2__6</td> <td>Quit smoking</td> </tr> <tr> <td>7</td> <td>currently_smoke_y2__7</td> <td>Prefer not to answer</td> </tr> </table>	1	currently_smoke_y2__1	Cigarettes	2	currently_smoke_y2__2	Mini cigars (i.e. double diamonds)	3	currently_smoke_y2__3	loose tobacco (roll your own)	4	currently_smoke_y2__4	e-cigarettes/vaping	5	currently_smoke_y2__5	Other	6	currently_smoke_y2__6	Quit smoking	7	currently_smoke_y2__7	Prefer not to answer
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90	notes_y2 Show the field ONLY if: [currently_smoke_y2(1)] = '1' or [currently_smoke_y2(2)] = '1' or [currently_smoke_y2(3)] = '1' or [currently_smoke_y2(4)] = '1' or [currently_smoke_y2(5)] = '1' or [currently_smoke_y2(6)] = '1' or [currently_smoke_y2(7)] = '1'	Notes	notes Custom alignment: LH																					
91	time_quit_y2	When was the last time you smoked any tobacco product?	radio, Required <table border="1"> <tr> <td>1</td> <td>less than 1 week</td> </tr> <tr> <td>2</td> <td>less than 1 month</td> </tr> <tr> <td>3</td> <td>less than 3 months</td> </tr> <tr> <td>4</td> <td>3 months or more</td> </tr> </table>	1	less than 1 week	2	less than 1 month	3	less than 3 months	4	3 months or more													
1	less than 1 week																							
2	less than 1 month																							
3	less than 3 months																							
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92	last_cig_y2	Last tobacco product was used (date and time, approximately)	notes, Required Custom alignment: LV																					
93	cpd_cigs_y2 Show the field ONLY if: [currently_smoke_y2(1)] = '1'	On average, approximately how many cigarettes do you smoke on a typical day?	radio, Required <table border="1"> <tr> <td>1</td> <td>less than 5</td> </tr> <tr> <td>2</td> <td>5 - 10</td> </tr> <tr> <td>3</td> <td>11 - 20</td> </tr> <tr> <td>4</td> <td>21 - 30</td> </tr> <tr> <td>5</td> <td>31 or more</td> </tr> <tr> <td>6</td> <td>I don't smoke every day</td> </tr> </table>	1	less than 5	2	5 - 10	3	11 - 20	4	21 - 30	5	31 or more	6	I don't smoke every day									
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5	31 or more																							
6	I don't smoke every day																							
94	number_cigs_y2 Show the field ONLY if: [currently_smoke_y2(1)] = '1'	Enter number, brand, size, etc for all participants If participant doesn't smoke every day: describe cigarette smoking behavior (how many days/week participant smokes, # cigs per day, reason for non daily smoking)	notes, Required Custom alignment: LV																					
95	cpd_minicigs_y2 Show the field ONLY if: [currently_smoke_y2(2)] = '1'	On average, approximately how many mini cigars do you smoke on a typical day?	radio, Required <table border="1"> <tr> <td>1</td> <td>less than 5</td> </tr> <tr> <td>2</td> <td>5 - 10</td> </tr> <tr> <td>3</td> <td>11 - 20</td> </tr> <tr> <td>4</td> <td>21 - 30</td> </tr> <tr> <td>5</td> <td>31 or more</td> </tr> <tr> <td>6</td> <td>I don't smoke every day</td> </tr> </table>	1	less than 5	2	5 - 10	3	11 - 20	4	21 - 30	5	31 or more	6	I don't smoke every day									
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6	I don't smoke every day																							
96	number_minicigs_y2 Show the field ONLY if: [currently_smoke_y2(2)] = '1'	Enter number, brand, size, etc for all participants If participant doesn't smoke every day: describe smoking behavior for minicigs (how many days/week participant smokes, # minicigs per day, reason for non daily smoking)	notes, Required Custom alignment: LV																					

97	cpd_loose_y2 Show the field ONLY if: [currently_smoke_y2(3)] = '1'	On average, approximately how many cigarettes do you roll and smoke on a typical day?	radio, Required <table border="1"> <tr><td>1</td><td>less than 5</td></tr> <tr><td>2</td><td>5 - 10</td></tr> <tr><td>3</td><td>11 - 20</td></tr> <tr><td>4</td><td>21 - 30</td></tr> <tr><td>5</td><td>31 or more</td></tr> <tr><td>6</td><td>I don't smoke every day</td></tr> </table>	1	less than 5	2	5 - 10	3	11 - 20	4	21 - 30	5	31 or more	6	I don't smoke every day
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98	number_loose_y2 Show the field ONLY if: [currently_smoke_y2(3)] = '1'	Enter number, brand, size, amount of tobacco bought and frequency, etc for all participants If participant doesn't smoke every day: describe smoking behavior for "roll your own" (how many days/week participant smokes, # cigs per day, reason for non daily smoking)	notes, Required Custom alignment: LV												
99	cpd_ecig_y2 Show the field ONLY if: [currently_smoke_y2(4)] = '1'	On average, approximately how many times do you use your e-cigarette on a typical day?	radio, Required <table border="1"> <tr><td>1</td><td>less than 5</td></tr> <tr><td>2</td><td>5 - 10</td></tr> <tr><td>3</td><td>11 - 20</td></tr> <tr><td>4</td><td>21 - 30</td></tr> <tr><td>5</td><td>31 or more</td></tr> <tr><td>6</td><td>I don't smoke every day</td></tr> </table>	1	less than 5	2	5 - 10	3	11 - 20	4	21 - 30	5	31 or more	6	I don't smoke every day
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100	number_ecig_y2 Show the field ONLY if: [currently_smoke_y2(4)] = '1'	Enter number of puffs, times per day or per week (in case of non daily use) participant uses, number of cartridges per day or per week, size of cartridges, etc. Be as specific as you can!	notes, Required Custom alignment: LV												
101	cpd_other_tobacco_y2 Show the field ONLY if: [currently_smoke_y2(5)] = '1'	On average, approximately how many other tobacco products do you smoke on a typical day?	radio, Required <table border="1"> <tr><td>1</td><td>less than 5</td></tr> <tr><td>2</td><td>5 - 10</td></tr> <tr><td>3</td><td>11 - 20</td></tr> <tr><td>4</td><td>21 - 30</td></tr> <tr><td>5</td><td>31 or more</td></tr> <tr><td>6</td><td>I don't smoke every day</td></tr> </table>	1	less than 5	2	5 - 10	3	11 - 20	4	21 - 30	5	31 or more	6	I don't smoke every day
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5	31 or more														
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102	number_other_tobacco_y2 Show the field ONLY if: [currently_smoke_y2(5)] = '1'	Enter description, name, number, frequency, etc	notes, Required												
103	notes_tob_use_y2 Show the field ONLY if: [time_quit_y2] = '1' or [time_quit_y2] = '2' or [time_quit_y2] = '3' or [time_quit_y2] = '4'	Notes for tobacco products	notes Custom alignment: LV												
104	smoke_waking_up_y2 Show the field ONLY if: [currently_smoke_y2(1)] = '1' or [currently_smoke_y2(2)] = '1' or [currently_smoke_y2(3)] = '1' or [currently_smoke_y2(4)] = '1' or [currently_smoke_y2(5)] = '1' or [currently_smoke_y2(7)] = '1'	How soon after waking up do you smoke your first tobacco product?	radio, Required <table border="1"> <tr><td>1</td><td>Within 5 minutes</td></tr> <tr><td>2</td><td>6-30 minutes</td></tr> <tr><td>3</td><td>31-60 minutes</td></tr> <tr><td>4</td><td>Greater than 60 minutes</td></tr> <tr><td>5</td><td>Prefer not to answer</td></tr> </table>	1	Within 5 minutes	2	6-30 minutes	3	31-60 minutes	4	Greater than 60 minutes	5	Prefer not to answer		
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105	able_smoke_awakening_y2 Show the field ONLY if: [smoke_waking_up_y2] = '2' or [smoke_waking_up_y2] = '3' or [smoke_waking_up_y2] = '4' or [smoke_waking_up_y2] = '5'	If you were able to, would you smoke right after waking up?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer						
1	Yes														
0	No														
2	Prefer not to answer														

106	prevent_smoking_awake_y2 Show the field ONLY if: [smoke_waking_up_y2] = '2' or [smoke_waking_up_y2] = '3' or [smoke_waking_up_y2] = '4' or [smoke_waking_up_y2] = '5'	What prevents you from smoking upon awakening? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td> <td>prevent_smoking_awake_y2__1</td> <td>I am not allowed to smoke in my house</td> </tr> <tr> <td>2</td> <td>prevent_smoking_awake_y2__2</td> <td>I don't have cigarettes when I get up</td> </tr> <tr> <td>3</td> <td>prevent_smoking_awake_y2__3</td> <td>I don't have time</td> </tr> <tr> <td>4</td> <td>prevent_smoking_awake_y2__4</td> <td>Other</td> </tr> <tr> <td>5</td> <td>prevent_smoking_awake_y2__5</td> <td>Prefer not to answer</td> </tr> <tr> <td>6</td> <td>prevent_smoking_awake_y2__6</td> <td>Have morning routine</td> </tr> <tr> <td>7</td> <td>prevent_smoking_awake_y2__7</td> <td>Trying to quit</td> </tr> </table>	1	prevent_smoking_awake_y2__1	I am not allowed to smoke in my house	2	prevent_smoking_awake_y2__2	I don't have cigarettes when I get up	3	prevent_smoking_awake_y2__3	I don't have time	4	prevent_smoking_awake_y2__4	Other	5	prevent_smoking_awake_y2__5	Prefer not to answer	6	prevent_smoking_awake_y2__6	Have morning routine	7	prevent_smoking_awake_y2__7	Trying to quit
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6	prevent_smoking_awake_y2__6	Have morning routine																						
7	prevent_smoking_awake_y2__7	Trying to quit																						
107	other_awake_y2 Show the field ONLY if: [prevent_smoking_awake_y2(4)] = '1'	Other	notes, Required																					
108	smoke_change_y2	has your smoking changed (decreased) since last year? if unsure, please ask follow up questions and add notes	radio, Required <table border="1"> <tr> <td>1</td> <td>No</td> </tr> <tr> <td>2</td> <td>Yes</td> </tr> <tr> <td>3</td> <td>I don't know/unsure</td> </tr> </table>	1	No	2	Yes	3	I don't know/unsure															
1	No																							
2	Yes																							
3	I don't know/unsure																							
109	smoking_changed_y2 Show the field ONLY if: [smoke_change_y2] = '2' or [smoke_change_y2] = '3'	How so?	notes, Required																					
110	try_stop_y2	In the past year, did you quit smoking for at least one day? (intentionally quit)	radio, Required <table border="1"> <tr> <td>0</td> <td>No</td> </tr> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>2</td> <td>Prefer not to answer</td> </tr> </table>	0	No	1	Yes	2	Prefer not to answer															
0	No																							
1	Yes																							
2	Prefer not to answer																							
111	oneday_quit_y2 Show the field ONLY if: [try_stop_y2] = '1' or [try_stop_y2] = '2'	In the past year, how many times did you quit smoking for at least one day? (intentionally quit)	radio, Required <table border="1"> <tr> <td>1</td> <td>1-5</td> </tr> <tr> <td>2</td> <td>6-10</td> </tr> <tr> <td>3</td> <td>11-20</td> </tr> <tr> <td>4</td> <td>More than 20</td> </tr> <tr> <td>5</td> <td>Prefer not to answer</td> </tr> </table>	1	1-5	2	6-10	3	11-20	4	More than 20	5	Prefer not to answer											
1	1-5																							
2	6-10																							
3	11-20																							
4	More than 20																							
5	Prefer not to answer																							
112	times_oneday_quit_y2 Show the field ONLY if: [try_stop_y2] = '1' or [try_stop_y2] = '2'	Number of times	text, Required																					
113	longest_quit_y2 Show the field ONLY if: [try_stop_y2] = '1' or [try_stop_y2] = '2'	what was the longest time (in days) that you didn't smoke because you were trying to quit smoking in the past year?	notes, Required																					
114	did_to_quit_y2 Show the field ONLY if: [try_stop_y2] = '1' or [try_stop_y2] = '2'	What did you do to quit smoking during that period of time? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td> <td>did_to_quit_y2__1</td> <td>I saw my primary care doctor and received a prescription for medication (varenicline, bupropion, patch)</td> </tr> <tr> <td>2</td> <td>did_to_quit_y2__2</td> <td>I bought the patch, gum or lozenges from the pharmacy</td> </tr> <tr> <td>3</td> <td>did_to_quit_y2__3</td> <td>I got the patch, gum or lozenges from ____</td> </tr> <tr> <td>4</td> <td>did_to_quit_y2__4</td> <td>I decided to quit Cold turkey</td> </tr> <tr> <td>5</td> <td>did_to_quit_y2__5</td> <td>I was hospitalized</td> </tr> <tr> <td>6</td> <td>did_to_quit_y2__6</td> <td>I was incarcerated</td> </tr> <tr> <td>7</td> <td>did_to_quit_y2__7</td> <td>Other</td> </tr> </table>	1	did_to_quit_y2__1	I saw my primary care doctor and received a prescription for medication (varenicline, bupropion, patch)	2	did_to_quit_y2__2	I bought the patch, gum or lozenges from the pharmacy	3	did_to_quit_y2__3	I got the patch, gum or lozenges from ____	4	did_to_quit_y2__4	I decided to quit Cold turkey	5	did_to_quit_y2__5	I was hospitalized	6	did_to_quit_y2__6	I was incarcerated	7	did_to_quit_y2__7	Other
1	did_to_quit_y2__1	I saw my primary care doctor and received a prescription for medication (varenicline, bupropion, patch)																						
2	did_to_quit_y2__2	I bought the patch, gum or lozenges from the pharmacy																						
3	did_to_quit_y2__3	I got the patch, gum or lozenges from ____																						
4	did_to_quit_y2__4	I decided to quit Cold turkey																						
5	did_to_quit_y2__5	I was hospitalized																						
6	did_to_quit_y2__6	I was incarcerated																						
7	did_to_quit_y2__7	Other																						
115	other_did_to_quit_y2 Show the field ONLY if: [did_to_quit_y2(7)] = '1'	Other	notes, Required																					

116	notes_abst_y2 Show the field ONLY if: [try_stop_y2] = '0' or [try_stop_y2] = '1' or [try_stop_y2] = '2'	Notes	notes															
117	notes_6f9796	The following questions are about your primary care doctor or prescribing nurse. This is the doctor or nurse you see every year for general medical concerns to do with your physical health. This is not your psychiatrist or therapist.	descriptive															
118	pcp_clinic_y2	What is the name of the clinic where you see your primary care doctor?	notes, Required Custom alignment: LV															
119	clinic_location_y2	Where is the clinic located?	notes, Required Custom alignment: LV															
120	name_of_pcp_y2	What is your medical doctor's name?	notes, Required Custom alignment: LV															
121	seen_doc_y2	Have you seen your medical doctor in the past year?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer									
1	Yes																	
0	No																	
2	Prefer not to answer																	
122	doc_know_smoke_y2	Does your medical doctor know you smoked tobacco products in the past year?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>I don't know/Prefer not to answer</td></tr></table>	1	Yes	0	No	2	I don't know/Prefer not to answer									
1	Yes																	
0	No																	
2	I don't know/Prefer not to answer																	
123	doc_recommended_quit_y2 Select all that apply	Did any medical treater recommend you to quit smoking in the past year?	checkbox, Required <table><tr><td>1</td><td>doc_recommended_quit_y2__1</td><td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td></tr><tr><td>2</td><td>doc_recommended_quit_y2__2</td><td>CHW or Health Coach</td></tr><tr><td>3</td><td>doc_recommended_quit_y2__3</td><td>Psychiatrist/psych nurse</td></tr><tr><td>4</td><td>doc_recommended_quit_y2__4</td><td>Other</td></tr><tr><td>5</td><td>doc_recommended_quit_y2__5</td><td>None</td></tr></table>	1	doc_recommended_quit_y2__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	doc_recommended_quit_y2__2	CHW or Health Coach	3	doc_recommended_quit_y2__3	Psychiatrist/psych nurse	4	doc_recommended_quit_y2__4	Other	5	doc_recommended_quit_y2__5	None
1	doc_recommended_quit_y2__1	Medical doctor/primary care provider (PCP, NP, PA, RN)																
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3	doc_recommended_quit_y2__3	Psychiatrist/psych nurse																
4	doc_recommended_quit_y2__4	Other																
5	doc_recommended_quit_y2__5	None																
124	other_doc_rec_quit_y2 Show the field ONLY if: [doc_recommended_quit_y2(4)] = '1'	Other	notes, Required															
125	often_recommended_quit_y2 Show the field ONLY if: [doc_recommended_quit_y2(1)] = '1' or [doc_recommended_quit_y2(2)] = '1' or [doc_recommended_quit_y2(3)] = '1' or [doc_recommended_quit_y2(4)] = '1'	How often did your medical treater recommend you stop smoking in the past year?	radio, Required <table><tr><td>1</td><td>At every visit</td></tr><tr><td>2</td><td>At most visits</td></tr><tr><td>3</td><td>At some visits</td></tr><tr><td>4</td><td>Prefer not to answer</td></tr></table>	1	At every visit	2	At most visits	3	At some visits	4	Prefer not to answer							
1	At every visit																	
2	At most visits																	
3	At some visits																	
4	Prefer not to answer																	
126	treatment_recommended_y2	Did any medical treater recommend you take any medication to help you quit smoking, such as pills (chantix, wellbutrin), nicotine patch, gum, lozenges or e-cigarettes in the past year? Select all that apply	checkbox, Required <table><tr><td>1</td><td>treatment_recommended_y2__1</td><td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td></tr><tr><td>2</td><td>treatment_recommended_y2__2</td><td>CHW or Health Coach</td></tr><tr><td>3</td><td>treatment_recommended_y2__3</td><td>Psychiatrist/psych nurse</td></tr><tr><td>4</td><td>treatment_recommended_y2__4</td><td>Other</td></tr><tr><td>5</td><td>treatment_recommended_y2__5</td><td>None</td></tr></table>	1	treatment_recommended_y2__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	treatment_recommended_y2__2	CHW or Health Coach	3	treatment_recommended_y2__3	Psychiatrist/psych nurse	4	treatment_recommended_y2__4	Other	5	treatment_recommended_y2__5	None
1	treatment_recommended_y2__1	Medical doctor/primary care provider (PCP, NP, PA, RN)																
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3	treatment_recommended_y2__3	Psychiatrist/psych nurse																
4	treatment_recommended_y2__4	Other																
5	treatment_recommended_y2__5	None																

127	other_treat_rec_y2 Show the field ONLY if: [treatment_recommended_y2(4)] = '1'	Other	notes, Required															
128	quit_line_y2 Did any medical treater recommend you to call the quit-line in the past year? Select all that apply		checkbox, Required <table border="1"> <tr> <td>1</td> <td>quit_line_y2__1</td> <td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td> </tr> <tr> <td>2</td> <td>quit_line_y2__2</td> <td>CHW or Health Coach</td> </tr> <tr> <td>3</td> <td>quit_line_y2__3</td> <td>Psychiatrist/psych nurse</td> </tr> <tr> <td>4</td> <td>quit_line_y2__4</td> <td>Other</td> </tr> <tr> <td>5</td> <td>quit_line_y2__5</td> <td>None</td> </tr> </table>	1	quit_line_y2__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	quit_line_y2__2	CHW or Health Coach	3	quit_line_y2__3	Psychiatrist/psych nurse	4	quit_line_y2__4	Other	5	quit_line_y2__5	None
1	quit_line_y2__1	Medical doctor/primary care provider (PCP, NP, PA, RN)																
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4	quit_line_y2__4	Other																
5	quit_line_y2__5	None																
129	quit_line_other_y2 Show the field ONLY if: [quit_line_y2(4)] = '1'	Other	notes, Required															
130	doc_group_therapy_y2 Did any medical treater arrange for you to attend any smoking group to help you stop smoking in the past year? Select all that apply		checkbox, Required <table border="1"> <tr> <td>1</td> <td>doc_group_therapy_y2__1</td> <td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td> </tr> <tr> <td>2</td> <td>doc_group_therapy_y2__2</td> <td>CHW or Health Coach</td> </tr> <tr> <td>3</td> <td>doc_group_therapy_y2__3</td> <td>Psychiatrist/psych nurse</td> </tr> <tr> <td>4</td> <td>doc_group_therapy_y2__4</td> <td>Other</td> </tr> <tr> <td>5</td> <td>doc_group_therapy_y2__5</td> <td>None</td> </tr> </table>	1	doc_group_therapy_y2__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	doc_group_therapy_y2__2	CHW or Health Coach	3	doc_group_therapy_y2__3	Psychiatrist/psych nurse	4	doc_group_therapy_y2__4	Other	5	doc_group_therapy_y2__5	None
1	doc_group_therapy_y2__1	Medical doctor/primary care provider (PCP, NP, PA, RN)																
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4	doc_group_therapy_y2__4	Other																
5	doc_group_therapy_y2__5	None																
131	doc_group_other_y2 Show the field ONLY if: [doc_group_therapy_y2(4)] = '1'	Other	notes, Required															
132	attend_group_therapy_y2 Did you attend any smoking cessation group, even one?		radio, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> <tr> <td>2</td> <td>Prefer not to answer</td> </tr> </table>	1	Yes	0	No	2	Prefer not to answer									
1	Yes																	
0	No																	
2	Prefer not to answer																	
133	number_therapy_y2 Show the field ONLY if: [attend_group_therapy_y2] = '1' or [attend_group_therapy_y2] = '2'	How many sessions did you attend?	radio, Required <table border="1"> <tr> <td>1</td> <td>1-5</td> </tr> <tr> <td>2</td> <td>6-10</td> </tr> <tr> <td>3</td> <td>11-20</td> </tr> <tr> <td>4</td> <td>more than 20</td> </tr> <tr> <td>5</td> <td>Prefer not to answer</td> </tr> </table>	1	1-5	2	6-10	3	11-20	4	more than 20	5	Prefer not to answer					
1	1-5																	
2	6-10																	
3	11-20																	
4	more than 20																	
5	Prefer not to answer																	
134	treatment_prescribed_y2 Did any medical treater write you a prescription for medication to help you quit smoking, such as pills (chantix, wellbutrin), nicotine patch, gum, lozenges or e-cigarettes in the past year? Select all that apply		checkbox, Required <table border="1"> <tr> <td>1</td> <td>treatment_prescribed_y2__1</td> <td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td> </tr> <tr> <td>2</td> <td>treatment_prescribed_y2__2</td> <td>Another specialty</td> </tr> <tr> <td>3</td> <td>treatment_prescribed_y2__3</td> <td>Psychiatrist/psych nurse</td> </tr> <tr> <td>4</td> <td>treatment_prescribed_y2__4</td> <td>Other</td> </tr> <tr> <td>5</td> <td>treatment_prescribed_y2__5</td> <td>No</td> </tr> </table>	1	treatment_prescribed_y2__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	treatment_prescribed_y2__2	Another specialty	3	treatment_prescribed_y2__3	Psychiatrist/psych nurse	4	treatment_prescribed_y2__4	Other	5	treatment_prescribed_y2__5	No
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135	other_treatm_prescribed_y2 Show the field ONLY if: [treatment_prescribed_y2(4)] = '1'	Other	notes, Required															
136	notes_treat_y2 Show the field ONLY if: [treatment_prescribed_y2(1)] = '1' or [treatment_prescribed_y2(2)] = '1' or [treatment_prescribed_y2(3)] = '1' or [treatment_prescribed_y2(4)] = '1'	Notes about treatment	notes Custom alignment: LV															

137	<p>treatment_y2</p> <p>Show the field ONLY if: [treatment_prescribed_y2(1)] = '1'</p> <p>or [treatment_prescribed_y2(2)] = '1' or [treatment_prescribed_y2(3)] = '1'</p>	<p>If yes, which? Select all that apply</p>	<p>checkbox, Required</p> <table border="1"> <tr><td>1</td><td>treatment_y2__1</td><td>Varenicline (i.e. Chantix)</td></tr> <tr><td>2</td><td>treatment_y2__2</td><td>Bupropion (i.e. Zyban, Wellbutrin)</td></tr> <tr><td>3</td><td>treatment_y2__3</td><td>Nicotine Patch</td></tr> <tr><td>4</td><td>treatment_y2__4</td><td>Nicotine Gum/Lozenge</td></tr> <tr><td>5</td><td>treatment_y2__5</td><td>E-cigarettes/Vape</td></tr> <tr><td>6</td><td>treatment_y2__6</td><td>Pills to quit smoking</td></tr> <tr><td>7</td><td>treatment_y2__7</td><td>Other</td></tr> <tr><td>8</td><td>treatment_y2__8</td><td>Prefer not to answer</td></tr> <tr><td>9</td><td>treatment_y2__9</td><td>Could not remember</td></tr> </table>	1	treatment_y2__1	Varenicline (i.e. Chantix)	2	treatment_y2__2	Bupropion (i.e. Zyban, Wellbutrin)	3	treatment_y2__3	Nicotine Patch	4	treatment_y2__4	Nicotine Gum/Lozenge	5	treatment_y2__5	E-cigarettes/Vape	6	treatment_y2__6	Pills to quit smoking	7	treatment_y2__7	Other	8	treatment_y2__8	Prefer not to answer	9	treatment_y2__9	Could not remember
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138	<p>other_treatment_y2</p> <p>Show the field ONLY if: [treatment_y2(7)] = '1'</p>	Other	notes, Required																											
139	<p>pills_quit_pic_y2</p> <p>Show the field ONLY if: [treatment_y2(6)] = '1'</p>	<p>Section Header: <i>Do any of these pills look like the ones you took to quit smoking?</i></p> <p>Picture 1</p>	descriptive																											
140	<p>times_prescribed_var_y2</p> <p>Show the field ONLY if: [treatment_y2(1)] = '1'</p>	How many times have you been prescribed varenicline (Chantix) in the past year?	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td></tr> <tr><td>3</td><td>3 or more</td></tr> </table>	1	1	2	2	3	3 or more																					
1	1																													
2	2																													
3	3 or more																													
141	<p>who_prescribed_var_1_y2</p> <p>Show the field ONLY if: [treatment_y2(1)] = '1'</p>	<p>Who prescribed Varenicline (Chantix) in the past year? Select all that apply</p>	<p>checkbox, Required</p> <table border="1"> <tr><td>1</td><td>who_prescribed_var_1_y2__1</td><td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td></tr> <tr><td>2</td><td>who_prescribed_var_1_y2__2</td><td>Another specialty</td></tr> <tr><td>3</td><td>who_prescribed_var_1_y2__3</td><td>Psychiatrist/psych nurse</td></tr> <tr><td>4</td><td>who_prescribed_var_1_y2__4</td><td>Other</td></tr> <tr><td>5</td><td>who_prescribed_var_1_y2__5</td><td>I don't know</td></tr> </table>	1	who_prescribed_var_1_y2__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	who_prescribed_var_1_y2__2	Another specialty	3	who_prescribed_var_1_y2__3	Psychiatrist/psych nurse	4	who_prescribed_var_1_y2__4	Other	5	who_prescribed_var_1_y2__5	I don't know												
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4	who_prescribed_var_1_y2__4	Other																												
5	who_prescribed_var_1_y2__5	I don't know																												
142	<p>presc_var_other_1_y2</p> <p>Show the field ONLY if: [who_prescribed_var_1_y2(2)] = '1' or [who_prescribed_var_1_y2(4)] = '1'</p>	Another specialty/other	notes, Required																											
143	<p>filled_var_1_y2</p> <p>Show the field ONLY if: [times_prescribed_var_y2] = '1' or [times_prescribed_var_y2] = '2' or [times_prescribed_var_y2] = '3'</p>	Did you fill or get the prescription for varenicline (Chantix)?	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																					
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146	took_var_1_y2 Show the field ONLY if: [times_prescribed_var_y2] = '1' or [times_prescribed_var_y2] = '2' or [times_prescribed_var_y2] = '3'	Did you take any of the varenicline (Chantix)?	radio, Required <table border="1"> <tr> <td>0</td><td>No</td></tr> <tr> <td>1</td><td>Yes, on and off</td></tr> <tr> <td>2</td><td>Yes, still taking it everyday as prescribed</td></tr> <tr> <td>3</td><td>Prefer not to answer</td></tr> <tr> <td>4</td><td>Yes, not taking it anymore (i.e. adverse effects)</td></tr> <tr> <td>5</td><td>Yes, finished course of treatment</td></tr> </table>	0	No	1	Yes, on and off	2	Yes, still taking it everyday as prescribed	3	Prefer not to answer	4	Yes, not taking it anymore (i.e. adverse effects)	5	Yes, finished course of treatment																											
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149	why_stopped_var_1_y2 Show the field ONLY if: [took_var_1_y2] = '4'	Why did you stop? Select all that apply	checkbox, Required	
			1	why_stopped_var_1_y2__1 I didn't want to take more medications
			2	why_stopped_var_1_y2__2 Adverse side effects
			3	why_stopped_var_1_y2__3 Family/friends/media recommended stopping it
			4	why_stopped_var_1_y2__4 I didn't understand what the treatment was about
			5	why_stopped_var_1_y2__5 My provider recommended to stop the treatment
			6	why_stopped_var_1_y2__6 My insurance didn't cover it and I couldn't afford it anymore
			7	why_stopped_var_1_y2__7 I'd rather go to smoking groups
			8	why_stopped_var_1_y2__8 I forgot
			9	why_stopped_var_1_y2__9 Other
			10	why_stopped_var_1_y2__10 Prefer not to answer
			11	why_stopped_var_1_y2__11 I didn't want to quit smoking
			12	why_stopped_var_1_y2__12 It wasn't helping me to quit smoking
150	other_stop_var_1_y2 Show the field ONLY if: [why_stopped_var_1_y2(9)] = '1'	Other	notes, Required Custom alignment: LV	
151	start_var_1_y2 Show the field ONLY if: [took_var_1_y2] = '1' or [took_var_1_y2] = '2' or [took_var_1_y2] = '3' or [took_var_1_y2] = '4' or [took_var_1_y2] = '5'	How many weeks in total did you take Varenicline in the past year?	notes, Required	
152	often_use_var_1_y2 Show the field ONLY if: [took_var_1_y2] = '1' or [took_var_1_y2] = '2' or [took_var_1_y2] = '3' or [took_var_1_y2] = '4' or [took_var_1_y2] = '5'	How often did you take/have you been taking varenicline (chantix) in the past year?	radio, Required	
			1	twice a day every day
			2	once a day every day
			3	most days (more days than not)
			4	Less than half of the time
			5	Once or twice only
			6	I don't know
153	notes_var_1_y2 Show the field ONLY if: [times_prescribed_var_y2] = '1' or [times_prescribed_var_y2] = '2' or [times_prescribed_var_y2] = '3'	Notes for Varenicline	notes Custom alignment: LV	
154	times_prescribed_bup_y2 Show the field ONLY if: [treatment_y2(2)] = '1'	How many times have you been prescribed bupropion (wellbutrin or zyban) in the past year?	radio	
			1	1
			2	2
			3	3 or more

155	who_prescribed_bup_1_y2 Show the field ONLY if: [treatment_y2(2)] = '1'	Who prescribed bupropion (wellbutrin or zyban) in the past year? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td> <td>who_prescribed_bup_1_y2__1</td> <td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td> </tr> <tr> <td>2</td> <td>who_prescribed_bup_1_y2__2</td> <td>Another specialty</td> </tr> <tr> <td>3</td> <td>who_prescribed_bup_1_y2__3</td> <td>Psychiatrist/psych nurse</td> </tr> <tr> <td>4</td> <td>who_prescribed_bup_1_y2__4</td> <td>Other</td> </tr> <tr> <td>5</td> <td>who_prescribed_bup_1_y2__5</td> <td>I don't know</td> </tr> </table>	1	who_prescribed_bup_1_y2__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	who_prescribed_bup_1_y2__2	Another specialty	3	who_prescribed_bup_1_y2__3	Psychiatrist/psych nurse	4	who_prescribed_bup_1_y2__4	Other	5	who_prescribed_bup_1_y2__5	I don't know																								
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163	why_stopped_bup_1_y2 Show the field ONLY if: [took_bup_1_y2] = '4'	Why did you stop? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td><td>why_stopped_bup_1_y2__1</td><td>I didn't want to take more medications</td></tr> <tr> <td>2</td><td>why_stopped_bup_1_y2__2</td><td>Adverse side effects</td></tr> <tr> <td>3</td><td>why_stopped_bup_1_y2__3</td><td>Family/friends/media recommended stopping it</td></tr> <tr> <td>4</td><td>why_stopped_bup_1_y2__4</td><td>I didn't understand what the treatment was about</td></tr> <tr> <td>5</td><td>why_stopped_bup_1_y2__5</td><td>My provider recommended to stop the treatment</td></tr> <tr> <td>6</td><td>why_stopped_bup_1_y2__6</td><td>My insurance didn't cover it and I couldn't afford it anymore</td></tr> <tr> <td>7</td><td>why_stopped_bup_1_y2__7</td><td>I'd rather go to smoking groups</td></tr> <tr> <td>8</td><td>why_stopped_bup_1_y2__8</td><td>I forgot</td></tr> <tr> <td>9</td><td>why_stopped_bup_1_y2__9</td><td>Other</td></tr> <tr> <td>10</td><td>why_stopped_bup_1_y2__10</td><td>Prefer not to answer</td></tr> <tr> <td>11</td><td>why_stopped_bup_1_y2__11</td><td>I didn't want to quit smoking</td></tr> <tr> <td>12</td><td>why_stopped_bup_1_y2__12</td><td>It wasn't helping me to quit smoking</td></tr> </table>	1	why_stopped_bup_1_y2__1	I didn't want to take more medications	2	why_stopped_bup_1_y2__2	Adverse side effects	3	why_stopped_bup_1_y2__3	Family/friends/media recommended stopping it	4	why_stopped_bup_1_y2__4	I didn't understand what the treatment was about	5	why_stopped_bup_1_y2__5	My provider recommended to stop the treatment	6	why_stopped_bup_1_y2__6	My insurance didn't cover it and I couldn't afford it anymore	7	why_stopped_bup_1_y2__7	I'd rather go to smoking groups	8	why_stopped_bup_1_y2__8	I forgot	9	why_stopped_bup_1_y2__9	Other	10	why_stopped_bup_1_y2__10	Prefer not to answer	11	why_stopped_bup_1_y2__11	I didn't want to quit smoking	12	why_stopped_bup_1_y2__12	It wasn't helping me to quit smoking
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165	start_bup_1_y2 Show the field ONLY if: [took_bup_1_y2] = '1' or [took_bup_1_y2] = '2' or [took_bup_1_y2] = '3' or [took_bup_1_y2] = '4' or [took_bup_1_y2] = '5'	How many weeks in total did you take bupropion in the past year?	notes, Required																																				

166	<p>often_use_bup_1_y2</p> <p>Show the field ONLY if:</p> <p>[took_bup_1_y2] = '1' or [took_bup_1_y2] = '2' or [took_bup_1_y2] = '3' or [took_bup_1_y2] = '4' or [took_bup_1_y2] = '5'</p>	How often did you take/have you been taking bupropion in the past year?	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>twice a day every day</td></tr> <tr><td>2</td><td>once a day every day</td></tr> <tr><td>3</td><td>most days (more days than not)</td></tr> <tr><td>4</td><td>Less than half of the time</td></tr> <tr><td>5</td><td>Once or twice only</td></tr> <tr><td>6</td><td>I don't know</td></tr> </table>	1	twice a day every day	2	once a day every day	3	most days (more days than not)	4	Less than half of the time	5	Once or twice only	6	I don't know			
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167	<p>notes_bup_1_y2</p> <p>Show the field ONLY if:</p> <p>[times_prescribed_bup_y2] = '1' or [times_prescribed_bup_y2] = '2' or [times_prescribed_bup_y2] = '3'</p>	Notes for bupropion	<p>notes</p> <p>Custom alignment: LV</p>															
168	<p>times_prescribed_patch_y2</p> <p>Show the field ONLY if:</p> <p>[treatment_y2(3)] = '1'</p>	How many times have you been prescribed nicotine patches in the past year?	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td></tr> <tr><td>3</td><td>3 or more</td></tr> </table>	1	1	2	2	3	3 or more									
1	1																	
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3	3 or more																	
169	<p>who_prescribed_patch_1_y2</p> <p>Show the field ONLY if:</p> <p>[treatment_y2(3)] = '1'</p>	<p>Who prescribed nicotine patches in the past year?</p> <p>Select all that apply</p>	<p>checkbox, Required</p> <table border="1"> <tr> <td>1</td> <td>who_prescribed_patch_1_y2__1</td> <td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td> </tr> <tr> <td>2</td> <td>who_prescribed_patch_1_y2__2</td> <td>Another specialty</td> </tr> <tr> <td>3</td> <td>who_prescribed_patch_1_y2__3</td> <td>Psychiatrist/psych nurse</td> </tr> <tr> <td>4</td> <td>who_prescribed_patch_1_y2__4</td> <td>Other</td> </tr> <tr> <td>5</td> <td>who_prescribed_patch_1_y2__5</td> <td>I don't know</td> </tr> </table>	1	who_prescribed_patch_1_y2__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	who_prescribed_patch_1_y2__2	Another specialty	3	who_prescribed_patch_1_y2__3	Psychiatrist/psych nurse	4	who_prescribed_patch_1_y2__4	Other	5	who_prescribed_patch_1_y2__5	I don't know
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170	<p>presc_patch_other_1_y2</p> <p>Show the field ONLY if:</p> <p>[who_prescribed_patch_1_y2(2)] = '1' or [who_prescribed_patch_1_y2(4)] = '1'</p>	Another specialty/other	<p>notes, Required</p>															
171	<p>filled_patch_1_y2</p> <p>Show the field ONLY if:</p> <p>[times_prescribed_patch_y2] = '1' or [times_prescribed_patch_y2] = '2' or [times_prescribed_patch_y2] = '3'</p>	Did you fill or get the prescription for nicotine patches?	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer									
1	Yes																	
0	No																	
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172	reason_no_patch_fill_1_y2 Show the field ONLY if: [filled_patch_1_y2] = '0'	why not? Select all that apply	<table><tr><td colspan="3">checkbox, Required</td></tr><tr><td>1</td><td>reason_no_patch_fill_1_y2__1</td><td>I didn't want to use the patch</td></tr><tr><td>2</td><td>reason_no_patch_fill_1_y2__2</td><td>Fear of adverse effects</td></tr><tr><td>3</td><td>reason_no_patch_fill_1_y2__3</td><td>Family/friends /media recommended not using it</td></tr><tr><td>4</td><td>reason_no_patch_fill_1_y2__4</td><td>I used it before and didn't like the effect (their past experiences)</td></tr><tr><td>5</td><td>reason_no_patch_fill_1_y2__5</td><td>I didn't understand what the treatment was about</td></tr><tr><td>6</td><td>reason_no_patch_fill_1_y2__6</td><td>I couldn't afford it</td></tr><tr><td>7</td><td>reason_no_patch_fill_1_y2__7</td><td>I'd rather go to smoking groups</td></tr><tr><td>8</td><td>reason_no_patch_fill_1_y2__8</td><td>I forgot</td></tr><tr><td>9</td><td>reason_no_patch_fill_1_y2__9</td><td>Other</td></tr><tr><td>10</td><td>reason_no_patch_fill_1_y2__10</td><td>Prefer not to answer</td></tr><tr><td>11</td><td>reason_no_patch_fill_1_y2__11</td><td>I didn't want to quit smoking</td></tr><tr><td>12</td><td>reason_no_patch_fill_1_y2__12</td><td>I didn't think it would help</td></tr><tr><td>13</td><td>reason_no_patch_fill_1_y2__13</td><td>I didn't know how to get it</td></tr></table>	checkbox, Required			1	reason_no_patch_fill_1_y2__1	I didn't want to use the patch	2	reason_no_patch_fill_1_y2__2	Fear of adverse effects	3	reason_no_patch_fill_1_y2__3	Family/friends /media recommended not using it	4	reason_no_patch_fill_1_y2__4	I used it before and didn't like the effect (their past experiences)	5	reason_no_patch_fill_1_y2__5	I didn't understand what the treatment was about	6	reason_no_patch_fill_1_y2__6	I couldn't afford it	7	reason_no_patch_fill_1_y2__7	I'd rather go to smoking groups	8	reason_no_patch_fill_1_y2__8	I forgot	9	reason_no_patch_fill_1_y2__9	Other	10	reason_no_patch_fill_1_y2__10	Prefer not to answer	11	reason_no_patch_fill_1_y2__11	I didn't want to quit smoking	12	reason_no_patch_fill_1_y2__12	I didn't think it would help	13	reason_no_patch_fill_1_y2__13	I didn't know how to get it
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174	used_patch_1_y2 Show the field ONLY if: [times_prescribed_patch_y2] = '1' or [times_prescribed_patch_y2] = '2' or [times_prescribed_patch_y2] = '3'	Did you use any of the patches?	<table><tr><td colspan="2">radio, Required</td></tr><tr><td>0</td><td>No</td></tr><tr><td>1</td><td>Yes, on and off</td></tr><tr><td>2</td><td>Yes, still using it everyday as prescribed</td></tr><tr><td>3</td><td>Prefer not to answer</td></tr><tr><td>4</td><td>Yes, not using it anymore (i.e. adverse effects)</td></tr><tr><td>5</td><td>Yes, finished course of treatment</td></tr></table>	radio, Required		0	No	1	Yes, on and off	2	Yes, still using it everyday as prescribed	3	Prefer not to answer	4	Yes, not using it anymore (i.e. adverse effects)	5	Yes, finished course of treatment																												
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175	reason_no_patch_1_y2 Show the field ONLY if: [used_patch_1_y2] = '0'	why not? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td><td>reason_no_patch_1_y2__1</td><td>I didn't want to use the patch</td></tr> <tr> <td>2</td><td>reason_no_patch_1_y2__2</td><td>Fear of adverse effects</td></tr> <tr> <td>3</td><td>reason_no_patch_1_y2__3</td><td>Family/friends/media recommended not using it</td></tr> <tr> <td>4</td><td>reason_no_patch_1_y2__4</td><td>I used it before and didn't like the effect (their past experiences)</td></tr> <tr> <td>5</td><td>reason_no_patch_1_y2__5</td><td>I didn't understand what the treatment was about</td></tr> <tr> <td>6</td><td>reason_no_patch_1_y2__6</td><td>I couldn't afford it</td></tr> <tr> <td>7</td><td>reason_no_patch_1_y2__7</td><td>I'd rather go to smoking groups</td></tr> <tr> <td>8</td><td>reason_no_patch_1_y2__8</td><td>I forgot</td></tr> <tr> <td>9</td><td>reason_no_patch_1_y2__9</td><td>Other</td></tr> <tr> <td>10</td><td>reason_no_patch_1_y2__10</td><td>Prefer not to answer</td></tr> <tr> <td>11</td><td>reason_no_patch_1_y2__11</td><td>I didn't want to quit smoking</td></tr> <tr> <td>12</td><td>reason_no_patch_1_y2__12</td><td>I didn't think it would help</td></tr> </table>	1	reason_no_patch_1_y2__1	I didn't want to use the patch	2	reason_no_patch_1_y2__2	Fear of adverse effects	3	reason_no_patch_1_y2__3	Family/friends/media recommended not using it	4	reason_no_patch_1_y2__4	I used it before and didn't like the effect (their past experiences)	5	reason_no_patch_1_y2__5	I didn't understand what the treatment was about	6	reason_no_patch_1_y2__6	I couldn't afford it	7	reason_no_patch_1_y2__7	I'd rather go to smoking groups	8	reason_no_patch_1_y2__8	I forgot	9	reason_no_patch_1_y2__9	Other	10	reason_no_patch_1_y2__10	Prefer not to answer	11	reason_no_patch_1_y2__11	I didn't want to quit smoking	12	reason_no_patch_1_y2__12	I didn't think it would help
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180	often_use_patch_1_y2 Show the field ONLY if: [used_patch_1_y2] = '1' or [used_patch_1_y2] = '2' or [used_patch_1_y2] = '3' or [used_patch_1_y2] = '4' or [used_patch_1_y2] = '5'	During this time, how often did you use the patch?	radio, Required <table border="1"> <tr><td>1</td><td>Everyday</td></tr> <tr><td>2</td><td>most days (more days than not)</td></tr> <tr><td>3</td><td>Less than half of the time</td></tr> <tr><td>4</td><td>Once or twice only</td></tr> <tr><td>5</td><td>I don't know</td></tr> </table>	1	Everyday	2	most days (more days than not)	3	Less than half of the time	4	Once or twice only	5	I don't know					
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182	times_prescribed_gum_loz_y2 Show the field ONLY if: [treatment_y2(4)] = '1'	How many times have you been prescribed nicotine gum and/or lozenges in the past year?	radio, Required <table border="1"> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td></tr> <tr><td>3</td><td>3 or more</td></tr> </table>	1	1	2	2	3	3 or more									
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2	2																	
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183	who_prescribed_gum_1_y2 Show the field ONLY if: [treatment_y2(4)] = '1'	Who prescribed nicotine gum or lozenges in the past year? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td> <td>who_prescribed_gum_1_y2__1</td> <td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td> </tr> <tr> <td>2</td> <td>who_prescribed_gum_1_y2__2</td> <td>Another specialty</td> </tr> <tr> <td>3</td> <td>who_prescribed_gum_1_y2__3</td> <td>Psychiatrist/psych nurse</td> </tr> <tr> <td>4</td> <td>who_prescribed_gum_1_y2__4</td> <td>Other</td> </tr> <tr> <td>5</td> <td>who_prescribed_gum_1_y2__5</td> <td>I don't know</td> </tr> </table>	1	who_prescribed_gum_1_y2__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	who_prescribed_gum_1_y2__2	Another specialty	3	who_prescribed_gum_1_y2__3	Psychiatrist/psych nurse	4	who_prescribed_gum_1_y2__4	Other	5	who_prescribed_gum_1_y2__5	I don't know
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184	other_presc_gum_1_y2 Show the field ONLY if: [who_prescribed_gum_1_y2(2)] = '1' or [who_prescribed_gum_1_y2(4)] = '1'	Another specialty/other	notes, Required															
185	filled_gum_1_y2 Show the field ONLY if: [times_prescribed_gum_loz_y2] = '1' or [times_prescribed_gum_loz_y2] = '2' or [times_prescribed_gum_loz_y2] = '3'	Did you fill or get the prescription for nicotine gum or lozenges?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer									
1	Yes																	
0	No																	
2	Prefer not to answer																	

186	reasons_no_gum_fill_1_y2 Show the field ONLY if: [filled_gum_1_y2] = '0'	why not? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td> <td>reasons_no_gum_fill_1_y2__1</td> <td>I didn't want to take more medications</td> </tr> <tr> <td>2</td> <td>reasons_no_gum_fill_1_y2__2</td> <td>Fear of adverse effects</td> </tr> <tr> <td>3</td> <td>reasons_no_gum_fill_1_y2__3</td> <td>Family/friends /media recommended not using it</td> </tr> <tr> <td>4</td> <td>reasons_no_gum_fill_1_y2__4</td> <td>I took it before and didn't like the effect (their past experiences)</td> </tr> <tr> <td>5</td> <td>reasons_no_gum_fill_1_y2__5</td> <td>I didn't understand what the treatment was about</td> </tr> <tr> <td>6</td> <td>reasons_no_gum_fill_1_y2__6</td> <td>I couldn't afford it</td> </tr> <tr> <td>7</td> <td>reasons_no_gum_fill_1_y2__7</td> <td>I'd rather go to smoking groups</td> </tr> <tr> <td>8</td> <td>reasons_no_gum_fill_1_y2__8</td> <td>I forgot</td> </tr> <tr> <td>9</td> <td>reasons_no_gum_fill_1_y2__9</td> <td>Other</td> </tr> <tr> <td>10</td> <td>reasons_no_gum_fill_1_y2__10</td> <td>Prefer not to answer</td> </tr> <tr> <td>11</td> <td>reasons_no_gum_fill_1_y2__11</td> <td>I didn't want to quit smoking</td> </tr> <tr> <td>12</td> <td>reasons_no_gum_fill_1_y2__12</td> <td>I didn't think this medication would help me quit</td> </tr> <tr> <td>13</td> <td>reasons_no_gum_fill_1_y2__13</td> <td>I didn't know how to get it</td> </tr> </table>	1	reasons_no_gum_fill_1_y2__1	I didn't want to take more medications	2	reasons_no_gum_fill_1_y2__2	Fear of adverse effects	3	reasons_no_gum_fill_1_y2__3	Family/friends /media recommended not using it	4	reasons_no_gum_fill_1_y2__4	I took it before and didn't like the effect (their past experiences)	5	reasons_no_gum_fill_1_y2__5	I didn't understand what the treatment was about	6	reasons_no_gum_fill_1_y2__6	I couldn't afford it	7	reasons_no_gum_fill_1_y2__7	I'd rather go to smoking groups	8	reasons_no_gum_fill_1_y2__8	I forgot	9	reasons_no_gum_fill_1_y2__9	Other	10	reasons_no_gum_fill_1_y2__10	Prefer not to answer	11	reasons_no_gum_fill_1_y2__11	I didn't want to quit smoking	12	reasons_no_gum_fill_1_y2__12	I didn't think this medication would help me quit	13	reasons_no_gum_fill_1_y2__13	I didn't know how to get it
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188	took_gum_1_y2 Show the field ONLY if: [times_prescribed_gum_loz_y2] = '1' or [times_prescribed_gum_loz_y2] = '2' or [times_prescribed_gum_loz_y2] = '3'	Did you use Nicotine gum or lozenges?	radio, Required <table border="1"> <tr> <td>0</td> <td>No</td> </tr> <tr> <td>1</td> <td>Yes, on and off</td> </tr> <tr> <td>2</td> <td>Yes, still using it everyday as prescribed</td> </tr> <tr> <td>3</td> <td>Prefer not to answer</td> </tr> <tr> <td>4</td> <td>Yes, not using it anymore (i.e. adverse effects)</td> </tr> <tr> <td>5</td> <td>Yes, finished course of treatment</td> </tr> </table>	0	No	1	Yes, on and off	2	Yes, still using it everyday as prescribed	3	Prefer not to answer	4	Yes, not using it anymore (i.e. adverse effects)	5	Yes, finished course of treatment																											
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189	reasons_no_gum_1_y2 Show the field ONLY if: [took_gum_1_y2] = '0'	why not? Select all that apply	<table><tr><td colspan="3">checkbox, Required</td></tr><tr><td>1</td><td>reasons_no_gum_1_y2__1</td><td>I tried and didn't like it</td></tr><tr><td>2</td><td>reasons_no_gum_1_y2__2</td><td>Fear of adverse effects</td></tr><tr><td>3</td><td>reasons_no_gum_1_y2__3</td><td>Family/friends/media recommended not using it</td></tr><tr><td>4</td><td>reasons_no_gum_1_y2__4</td><td>I used it before and didn't like the effect (their past experiences)</td></tr><tr><td>5</td><td>reasons_no_gum_1_y2__5</td><td>I didn't understand what the treatment was about</td></tr><tr><td>6</td><td>reasons_no_gum_1_y2__6</td><td>I couldn't afford it</td></tr><tr><td>7</td><td>reasons_no_gum_1_y2__7</td><td>I'd rather go to smoking groups</td></tr><tr><td>8</td><td>reasons_no_gum_1_y2__8</td><td>I forgot</td></tr><tr><td>9</td><td>reasons_no_gum_1_y2__9</td><td>Other</td></tr><tr><td>10</td><td>reasons_no_gum_1_y2__10</td><td>Prefer not to answer</td></tr><tr><td>11</td><td>reasons_no_gum_1_y2__11</td><td>I didn't want to quit smoking</td></tr><tr><td>12</td><td>reasons_no_gum_1_y2__12</td><td>I didn't think this medication would help me quit</td></tr></table>	checkbox, Required			1	reasons_no_gum_1_y2__1	I tried and didn't like it	2	reasons_no_gum_1_y2__2	Fear of adverse effects	3	reasons_no_gum_1_y2__3	Family/friends/media recommended not using it	4	reasons_no_gum_1_y2__4	I used it before and didn't like the effect (their past experiences)	5	reasons_no_gum_1_y2__5	I didn't understand what the treatment was about	6	reasons_no_gum_1_y2__6	I couldn't afford it	7	reasons_no_gum_1_y2__7	I'd rather go to smoking groups	8	reasons_no_gum_1_y2__8	I forgot	9	reasons_no_gum_1_y2__9	Other	10	reasons_no_gum_1_y2__10	Prefer not to answer	11	reasons_no_gum_1_y2__11	I didn't want to quit smoking	12	reasons_no_gum_1_y2__12	I didn't think this medication would help me quit
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191	why_stopped_gum_1_y2 Show the field ONLY if: [took_gum_1_y2] = '4'	Why did you stop? Select all that apply	<table><tr><td colspan="3">checkbox, Required</td></tr><tr><td>1</td><td>why_stopped_gum_1_y2__1</td><td>I didn't like it</td></tr><tr><td>2</td><td>why_stopped_gum_1_y2__2</td><td>Adverse side effects</td></tr><tr><td>3</td><td>why_stopped_gum_1_y2__3</td><td>Family/friends/media recommended stopping it</td></tr><tr><td>4</td><td>why_stopped_gum_1_y2__4</td><td>I didn't understand what the treatment was about</td></tr><tr><td>5</td><td>why_stopped_gum_1_y2__5</td><td>My provider recommended to stop the treatment</td></tr><tr><td>6</td><td>why_stopped_gum_1_y2__6</td><td>My insurance didn't cover it and I couldn't afford it anymore</td></tr><tr><td>7</td><td>why_stopped_gum_1_y2__7</td><td>I'd rather go to smoking groups</td></tr><tr><td>8</td><td>why_stopped_gum_1_y2__8</td><td>I forgot</td></tr><tr><td>9</td><td>why_stopped_gum_1_y2__9</td><td>Other</td></tr><tr><td>10</td><td>why_stopped_gum_1_y2__10</td><td>Prefer not to answer</td></tr><tr><td>11</td><td>why_stopped_gum_1_y2__11</td><td>I didn't want to quit smoking</td></tr><tr><td>12</td><td>why_stopped_gum_1_y2__12</td><td>It wasn't helping me to quit smoking</td></tr></table>	checkbox, Required			1	why_stopped_gum_1_y2__1	I didn't like it	2	why_stopped_gum_1_y2__2	Adverse side effects	3	why_stopped_gum_1_y2__3	Family/friends/media recommended stopping it	4	why_stopped_gum_1_y2__4	I didn't understand what the treatment was about	5	why_stopped_gum_1_y2__5	My provider recommended to stop the treatment	6	why_stopped_gum_1_y2__6	My insurance didn't cover it and I couldn't afford it anymore	7	why_stopped_gum_1_y2__7	I'd rather go to smoking groups	8	why_stopped_gum_1_y2__8	I forgot	9	why_stopped_gum_1_y2__9	Other	10	why_stopped_gum_1_y2__10	Prefer not to answer	11	why_stopped_gum_1_y2__11	I didn't want to quit smoking	12	why_stopped_gum_1_y2__12	It wasn't helping me to quit smoking
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193	start_gum_1_y2 Show the field ONLY if: [took_gum_1_y2] = '1' or [took_gum_1_y2] = '2' or [took_gum_1_y2] = '3' or [took_gum_1_y2] = '4' or [took_gum_1_y2] = '5'	How many weeks in total did you use nicotine gum or lozenges in the past year?	notes, Required																																							

194	<p>often_use_gum_1_y2</p> <p>Show the field ONLY if: [took_gum_1_y2] = '1' or [took_gum_1_y2] = '2' or [took_gum_1_y2] = '3' or [took_gum_1_y2] = '4' or [took_gum_1_y2] = '5'</p>	How often did you use the gum or lozenges in the past year?	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>Everyday</td></tr> <tr><td>2</td><td>most days (more days than not)</td></tr> <tr><td>3</td><td>Less than half of the time</td></tr> <tr><td>4</td><td>Once or twice only</td></tr> <tr><td>5</td><td>I don't know</td></tr> </table>	1	Everyday	2	most days (more days than not)	3	Less than half of the time	4	Once or twice only	5	I don't know					
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195	<p>often_gum_1_y2</p> <p>Show the field ONLY if: [took_gum_1_y2] = '1' or [took_gum_1_y2] = '2' or [took_gum_1_y2] = '3' or [took_gum_1_y2] = '4' or [took_gum_1_y2] = '5'</p>	How many lozenges or pieces of gum did you use per day in the past year?	<p>text, Required</p> <p>Custom alignment: LV</p>															
196	<p>notes_gum_1_y2</p> <p>Show the field ONLY if: [times_prescribed_gum_loz_y2] = '1' or [times_prescribed_gum_loz_y2] = '2' or [times_prescribed_gum_loz_y2] = '3'</p>	Notes for nicotine gum or lozenges	<p>notes</p> <p>Custom alignment: LV</p>															
197	<p>times_rec_ecig_y2</p> <p>Show the field ONLY if: [treatment_y2(5)] = '1'</p>	How many times have you been recommended using e-cigs to help you quit smoking in the past year?	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td></tr> <tr><td>3</td><td>3 or more</td></tr> </table>	1	1	2	2	3	3 or more									
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198	<p>rec_ecigs_y2</p> <p>Show the field ONLY if: [treatment_y2(5)] = '1'</p>	<p>Who recommended using e-cigarettes/vape in the past year?</p> <p>Select all that apply</p>	<p>checkbox, Required</p> <table border="1"> <tr><td>1</td><td>rec_ecigs_y2__1</td><td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td></tr> <tr><td>2</td><td>rec_ecigs_y2__2</td><td>Another specialty</td></tr> <tr><td>3</td><td>rec_ecigs_y2__3</td><td>Psychiatrist/psych nurse</td></tr> <tr><td>4</td><td>rec_ecigs_y2__4</td><td>Other</td></tr> <tr><td>5</td><td>rec_ecigs_y2__5</td><td>I don't know</td></tr> </table>	1	rec_ecigs_y2__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	rec_ecigs_y2__2	Another specialty	3	rec_ecigs_y2__3	Psychiatrist/psych nurse	4	rec_ecigs_y2__4	Other	5	rec_ecigs_y2__5	I don't know
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199	<p>other_rec_ecig_y2</p> <p>Show the field ONLY if: [rec_ecigs_y2(2)] = '1' or [rec_ecigs_y2(4)] = '1'</p>	Another specialty/other	<p>notes, Required</p>															
200	<p>use_ecig_y2</p> <p>Show the field ONLY if: [treatment_y2(5)] = '1'</p>	Did you use ecigs/vape?	<p>radio, Required</p> <table border="1"> <tr><td>0</td><td>No</td></tr> <tr><td>1</td><td>Yes, on and off</td></tr> <tr><td>2</td><td>Yes, still using it everyday as recommended</td></tr> <tr><td>3</td><td>Prefer not to answer</td></tr> <tr><td>4</td><td>Yes, not using it anymore (i.e. adverse effects)</td></tr> </table>	0	No	1	Yes, on and off	2	Yes, still using it everyday as recommended	3	Prefer not to answer	4	Yes, not using it anymore (i.e. adverse effects)					
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201	reason_no_ecig_y2 Show the field ONLY if: [use_ecig_y2] = '0'	why not? Select all that apply	checkbox, Required	
			1	reason_no_ecig_y2__1 I tried and didn't like it
			2	reason_no_ecig_y2__2 Fear of adverse effects
			3	reason_no_ecig_y2__3 Family/friends/media recommended not using it
			4	reason_no_ecig_y2__4 I used it before and didn't like the effect (their past experiences)
			5	reason_no_ecig_y2__5 I didn't understand what the treatment was about
			6	reason_no_ecig_y2__6 I couldn't afford it
			7	reason_no_ecig_y2__7 I'd rather go to smoking groups
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202	other_no_ecigs_y2 Show the field ONLY if: [reason_no_ecig_y2(9)] = '1'	Other	notes, Required Custom alignment: LV	
203	why_stop_ecig_y2 Show the field ONLY if: [use_ecig_y2] = '4'	Why did you stop? Select all that apply	checkbox, Required	
			1	why_stop_ecig_y2__1 I tried and didn't like it
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204	other_stop_ecig_y2 Show the field ONLY if: [why_stop_ecig_y2(9)] = '1'	Other	notes, Required Custom alignment: LV	
205	start_ecigs_y2 Show the field ONLY if: [use_ecig_y2] = '1' or [use_ecig_y2] = '2' or [use_ecig_y2] = '3' or [use_ecig_y2] = '4'	How many weeks in total did you use e-cigs/vape in the past year?	notes, Required	
206	notes_ecigs_y2 Show the field ONLY if: [treatment_y2(5)] = '1'	Notes for ecig/vaping	notes Custom alignment: LV	
207	notes_pills_y2 Show the field ONLY if: [treatment_y2(6)] = '1'	only to be used if participant can not identify medication used to quit smoking Notes about "pills to quit smoking"	notes Custom alignment: LH	

208	who_prescribed_pills_y2 Show the field ONLY if: [treatment_y2(6)] = '1'	Who prescribed pills to quit smoking in the past year? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td> <td>who_prescribed_pills_y2__1</td> <td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td> </tr> <tr> <td>2</td> <td>who_prescribed_pills_y2__2</td> <td>Another specialty</td> </tr> <tr> <td>3</td> <td>who_prescribed_pills_y2__3</td> <td>Psychiatrist/psych nurse</td> </tr> <tr> <td>4</td> <td>who_prescribed_pills_y2__4</td> <td>Other</td> </tr> <tr> <td>5</td> <td>who_prescribed_pills_y2__5</td> <td>I don't know</td> </tr> </table>	1	who_prescribed_pills_y2__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	who_prescribed_pills_y2__2	Another specialty	3	who_prescribed_pills_y2__3	Psychiatrist/psych nurse	4	who_prescribed_pills_y2__4	Other	5	who_prescribed_pills_y2__5	I don't know																					
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5	who_prescribed_pills_y2__5	I don't know																																					
209	filled_pills_y2 Show the field ONLY if: [treatment_y2(6)] = '1'	Did you fill or get your prescription for pills to quit smoking?	radio, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> <tr> <td>2</td> <td>Prefer not to answer</td> </tr> </table>	1	Yes	0	No	2	Prefer not to answer																														
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2	Prefer not to answer																																						
210	took_pills_y2 Show the field ONLY if: [treatment_y2(6)] = '1'	Did you take any of the pills to quit smoking?	radio, Required <table border="1"> <tr> <td>0</td> <td>No</td> </tr> <tr> <td>1</td> <td>Yes, on and off</td> </tr> <tr> <td>2</td> <td>Yes, still taking it everyday as prescribed</td> </tr> <tr> <td>3</td> <td>Prefer not to answer</td> </tr> <tr> <td>4</td> <td>Yes, not taking it anymore (i.e. adverse effects)</td> </tr> <tr> <td>5</td> <td>Yes, finished course of treatment</td> </tr> </table>	0	No	1	Yes, on and off	2	Yes, still taking it everyday as prescribed	3	Prefer not to answer	4	Yes, not taking it anymore (i.e. adverse effects)	5	Yes, finished course of treatment																								
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211	reason_no_pills_y2 Show the field ONLY if: [took_pills_y2] = '0'	why not? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td> <td>reason_no_pills_y2__1</td> <td>I didn't want to take more medications</td> </tr> <tr> <td>2</td> <td>reason_no_pills_y2__2</td> <td>Fear of adverse effects</td> </tr> <tr> <td>3</td> <td>reason_no_pills_y2__3</td> <td>Family/friends/media recommended not taking it</td> </tr> <tr> <td>4</td> <td>reason_no_pills_y2__4</td> <td>I took it before and didn't like the effect (their past experiences)</td> </tr> <tr> <td>5</td> <td>reason_no_pills_y2__5</td> <td>I didn't understand what the treatment was about</td> </tr> <tr> <td>6</td> <td>reason_no_pills_y2__6</td> <td>I couldn't afford it</td> </tr> <tr> <td>7</td> <td>reason_no_pills_y2__7</td> <td>I'd rather go to smoking groups</td> </tr> <tr> <td>8</td> <td>reason_no_pills_y2__8</td> <td>I forgot</td> </tr> <tr> <td>9</td> <td>reason_no_pills_y2__9</td> <td>Other</td> </tr> <tr> <td>10</td> <td>reason_no_pills_y2__10</td> <td>Prefer not to answer</td> </tr> <tr> <td>11</td> <td>reason_no_pills_y2__11</td> <td>I didn't want to quit smoking</td> </tr> <tr> <td>12</td> <td>reason_no_pills_y2__12</td> <td>I didn't think it would help</td> </tr> </table>	1	reason_no_pills_y2__1	I didn't want to take more medications	2	reason_no_pills_y2__2	Fear of adverse effects	3	reason_no_pills_y2__3	Family/friends/media recommended not taking it	4	reason_no_pills_y2__4	I took it before and didn't like the effect (their past experiences)	5	reason_no_pills_y2__5	I didn't understand what the treatment was about	6	reason_no_pills_y2__6	I couldn't afford it	7	reason_no_pills_y2__7	I'd rather go to smoking groups	8	reason_no_pills_y2__8	I forgot	9	reason_no_pills_y2__9	Other	10	reason_no_pills_y2__10	Prefer not to answer	11	reason_no_pills_y2__11	I didn't want to quit smoking	12	reason_no_pills_y2__12	I didn't think it would help
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212	other_no_pill_y2 Show the field ONLY if: [reason_no_pills_y2(9)] = '1'	Other	notes, Required Custom alignment: LV																																				
213	time_pills_y2 Show the field ONLY if: [took_pills_y2] = '1' and [took_pill_s_y2] = '2' and [took_pills_y2] = '3' and [took_pills_y2] = '4' and [took_pills_y2] = '5'	How many weeks in total did you take pills to quit smoking in the past year?	notes, Required																																				
214	other_use_y2 Show the field ONLY if: [treatment_y2(7)] = '1'	What other method or treatment did you used to quit smoking?	notes, Required Custom alignment: LV																																				
215	other_help_y2 Show the field ONLY if: [treatment_y2(7)] = '1'	Please describe method and length of time participant used/has been using other method	notes, Required Custom alignment: LV																																				

216	illness_smoking_y2	Have you had any of these problems in the past year? Select all that apply	<div>checkbox, Required</div> <table border="1"> <tr><td>1</td><td>illness_smoking_y2__1</td><td>Heart Disease</td></tr> <tr><td>2</td><td>illness_smoking_y2__2</td><td>Heart Attack</td></tr> <tr><td>3</td><td>illness_smoking_y2__3</td><td>Cancer (Any type)</td></tr> <tr><td>4</td><td>illness_smoking_y2__4</td><td>Emphysema/COPD</td></tr> <tr><td>5</td><td>illness_smoking_y2__5</td><td>Chronic bronchitis</td></tr> <tr><td>6</td><td>illness_smoking_y2__6</td><td>Asthma</td></tr> <tr><td>7</td><td>illness_smoking_y2__7</td><td>Respiratory Problems (can't remember)</td></tr> <tr><td>8</td><td>illness_smoking_y2__8</td><td>Rheumatoid Arthritis</td></tr> <tr><td>9</td><td>illness_smoking_y2__9</td><td>Diabetes (high blood sugar)</td></tr> <tr><td>10</td><td>illness_smoking_y2__10</td><td>Blindness/Cataracts /Macular Degeneration</td></tr> <tr><td>11</td><td>illness_smoking_y2__11</td><td>Tuberculosis</td></tr> <tr><td>12</td><td>illness_smoking_y2__12</td><td>Hypertension (high blood pressure)</td></tr> <tr><td>13</td><td>illness_smoking_y2__13</td><td>Hypotension (low blood pressure)</td></tr> <tr><td>14</td><td>illness_smoking_y2__14</td><td>Other</td></tr> <tr><td>15</td><td>illness_smoking_y2__15</td><td>Prefer not to answer</td></tr> <tr><td>16</td><td>illness_smoking_y2__16</td><td>None</td></tr> <tr><td>17</td><td>illness_smoking_y2__17</td><td>Pneumonia</td></tr> <tr><td>18</td><td>illness_smoking_y2__18</td><td>Teeth or gum issues</td></tr> </table> <div>Custom alignment: LV</div>	1	illness_smoking_y2__1	Heart Disease	2	illness_smoking_y2__2	Heart Attack	3	illness_smoking_y2__3	Cancer (Any type)	4	illness_smoking_y2__4	Emphysema/COPD	5	illness_smoking_y2__5	Chronic bronchitis	6	illness_smoking_y2__6	Asthma	7	illness_smoking_y2__7	Respiratory Problems (can't remember)	8	illness_smoking_y2__8	Rheumatoid Arthritis	9	illness_smoking_y2__9	Diabetes (high blood sugar)	10	illness_smoking_y2__10	Blindness/Cataracts /Macular Degeneration	11	illness_smoking_y2__11	Tuberculosis	12	illness_smoking_y2__12	Hypertension (high blood pressure)	13	illness_smoking_y2__13	Hypotension (low blood pressure)	14	illness_smoking_y2__14	Other	15	illness_smoking_y2__15	Prefer not to answer	16	illness_smoking_y2__16	None	17	illness_smoking_y2__17	Pneumonia	18	illness_smoking_y2__18	Teeth or gum issues
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217	other_health_y2 Show the field ONLY if: [illness_smoking_y2(14)] = '1'	Other health conditions	notes, Required																																																						
218	change_health_y2 Show the field ONLY if: [smoke_change_y2] = '2'	Have you noticed any change in your health since you stopped/decreased your smoking?	notes, Required Custom alignment: LV																																																						
219	sf_1_y2	In general, would you say your health is:	<div>radio, Required</div> <table border="1"> <tr><td>1</td><td>Excellent</td></tr> <tr><td>2</td><td>Very Good</td></tr> <tr><td>3</td><td>Good</td></tr> <tr><td>4</td><td>Fair</td></tr> <tr><td>5</td><td>Poor</td></tr> <tr><td>6</td><td>Prefer not to answer</td></tr> </table> <div>Custom alignment: LV</div>	1	Excellent	2	Very Good	3	Good	4	Fair	5	Poor	6	Prefer not to answer																																										
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220	smoking_status_ra_y2	Today, participant is	<div>radio, Required</div> <table border="1"> <tr><td>1</td><td>smoking</td></tr> <tr><td>2</td><td>Quit for at least 24 hours</td></tr> <tr><td>3</td><td>Quit for 7 days (but less than 14 days)</td></tr> <tr><td>4</td><td>Quit for 14 days (but less than 4 weeks)</td></tr> <tr><td>5</td><td>Quit for 4 weeks or more</td></tr> </table> <div>Custom alignment: LV</div>	1	smoking	2	Quit for at least 24 hours	3	Quit for 7 days (but less than 14 days)	4	Quit for 14 days (but less than 4 weeks)	5	Quit for 4 weeks or more																																												
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221	smok_stat_based_ra_y2	This determination was based on: Select all that apply	<div>checkbox, Required</div> <table border="1"> <tr><td>1</td><td>smok_stat_based_ra_y2__1</td><td>Smoking self report (participant)</td></tr> <tr><td>2</td><td>smok_stat_based_ra_y2__2</td><td>Exhaled carbon monoxide</td></tr> <tr><td>3</td><td>smok_stat_based_ra_y2__3</td><td>Collateral information</td></tr> </table> <div>Custom alignment: LV</div>	1	smok_stat_based_ra_y2__1	Smoking self report (participant)	2	smok_stat_based_ra_y2__2	Exhaled carbon monoxide	3	smok_stat_based_ra_y2__3	Collateral information																																													
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222	re_contact_y2	Would you be interested in being contacted for future studies?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																														
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0	No																																				
223	comments_y2	GENERAL NOTES	notes Custom alignment: LV																																		
224	staff_completed_survey_y2	Study Staff who completed the survey	radio, Required <table><tr><td>1</td><td>Eve Manghis</td></tr><tr><td>2</td><td>Hannah Broos</td></tr><tr><td>3</td><td>Mike Vilme</td></tr><tr><td>4</td><td>Chris McGovern</td></tr><tr><td>5</td><td>Kelsey Lowman</td></tr><tr><td>6</td><td>Alyssa Pingitore</td></tr><tr><td>7</td><td>Bianca Deeb</td></tr><tr><td>8</td><td>Erin Gadbois</td></tr><tr><td>9</td><td>Madeleine Fontaine</td></tr><tr><td>10</td><td>Nate Phillips</td></tr><tr><td>11</td><td>Jessica Richman</td></tr><tr><td>12</td><td>Sophia Allen</td></tr><tr><td>13</td><td>Grace Wheeler</td></tr><tr><td>14</td><td>Rachel Plummer</td></tr><tr><td>15</td><td>Gladys Pachas</td></tr><tr><td>16</td><td>Melissa Maravic</td></tr><tr><td>17</td><td>Randi Schuster</td></tr></table> Custom alignment: LV	1	Eve Manghis	2	Hannah Broos	3	Mike Vilme	4	Chris McGovern	5	Kelsey Lowman	6	Alyssa Pingitore	7	Bianca Deeb	8	Erin Gadbois	9	Madeleine Fontaine	10	Nate Phillips	11	Jessica Richman	12	Sophia Allen	13	Grace Wheeler	14	Rachel Plummer	15	Gladys Pachas	16	Melissa Maravic	17	Randi Schuster
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225	complete_survey_year_2_abstinent_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete																												
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Instrument: Complete Survey Year 2 (complete_survey_year_2) <div>^ Collapse</div>																																					
226	visit_2	Visit Date	text (datetime_mdy), Required																																		

227	fact_sheet_year_2_v2	<p>Hi</p> <p>This is a confidential survey.</p> <p>We are asking you to participate because you receive psychiatric rehabilitation services from Bay Cove Human Services or Vinfen and last year you completed this brief survey about your smoking</p> <p>We want to learn if teaching primary care doctors about safe and effective use of smoking cessation treatments improves the care they provide to smokers with serious mental illness that they treat.</p> <p>Just like last year's survey, you will answer short questions about your smoking, smoking cessation treatment, age and race. This should take less than 5 minutes to complete. We will ask you to complete this survey and answer these questions one more time next year. Remember, like last year, we are not going to ask you to change your smoking.</p> <p>We will add 5 minutes to your meeting with your psychiatric rehabilitation team to ask you about your smoking. If you find this to be stressful, you can skip any questions that you don't want to answer.</p> <p>You may not receive any direct benefit.</p> <p>It is hoped that the findings from this study will help doctors, insurance companies and agencies such as the Department of Mental Health to provide and pay for the most effective smoking treatments for individuals with serious mental illness.</p> <p>Your participation is completely voluntary and you can stop the brief survey at any time.</p> <p>Your decision to participate or not will not affect in any way the medical care, psychiatric rehabilitation services or DMH services that you receive now or in the future. You do not have to take part in this study. Taking part in this study is up to you. There will be no penalty if you do not participate or if you stop the survey at any time; you will not lose any benefits you receive now or have a right to receive.</p> <p>During this survey, personal information about your health will be collected by your psychiatric rehabilitation team and shared with the MGH researchers who will see the responses identified only by a study number.</p> <p>You will receive \$5 cash for your time once you complete this survey.</p> <p>If you have questions or concerns please contact Madeleine Fontaine at 617- 643-4692.</p> <p>If you would like to speak to someone not involved in this research about your rights as a research subject, or any concerns or complaints you may have about the research, contact the Partners Human Research Committee at 617-424-4100.</p>	descriptive						
228	consent_year_2_v2	Do you want to participate by answering these questions?	<div>yesno, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> <div>Custom alignment: LV</div>	1	Yes	0	No		
1	Yes								
0	No								
229	blank_year_2		descriptive						
230	age_year_2 Show the field ONLY if: [consent_year_2_v2] = '1'	Age	text (integer, Min: 19, Max: 90), Required						
231	currently_smoke_v2 Show the field ONLY if: [consent_year_2_v2]='1'	Do you currently smoke any tobacco products? (I.e. Cigarettes, Cigars, Cigarillos, Rollies, Mini Cigars, Pipe)	<div>radio, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer
1	Yes								
0	No								
2	Prefer not to answer								

232	smoking_habits_year_2 Show the field ONLY if: [consent_year_2_v2] = '1' and [currently_smoke_v2] = '1'	Tell me about your smoking. How much do you normally smoke each day?	notes, Required Custom alignment: LV															
233	cpd_2 Show the field ONLY if: [consent_year_2_v2]='1' and [currently_smoke_v2]='1'	On average, approximately how many tobacco products do you smoke on a typical day? (I.e. Cigarettes, Cigars, Cigarillos, Rollies, Mini Cigars, Pipe)	radio, Required <table><tr><td>1</td><td>less than 5</td></tr><tr><td>2</td><td>5 - 10</td></tr><tr><td>3</td><td>11 - 20</td></tr><tr><td>4</td><td>21 - 30</td></tr><tr><td>5</td><td>31 or more</td></tr><tr><td>6</td><td>Calculation required</td></tr></table> Custom alignment: LV	1	less than 5	2	5 - 10	3	11 - 20	4	21 - 30	5	31 or more	6	Calculation required			
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234	notes_type_of_tobacco_y2 Show the field ONLY if: [consent_year_2_v2]='1' and [currently_smoke_v2]='1'	Notes for Type of tobacco product	notes Custom alignment: LH															
235	smoke_waking_up_2 Show the field ONLY if: [consent_year_2_v2]='1' and [currently_smoke_v2]='1'	How soon after waking up do you smoke your first tobacco product?	radio, Required <table><tr><td>1</td><td>Within 5 minutes</td></tr><tr><td>2</td><td>6-30 minutes</td></tr><tr><td>3</td><td>31-60 minutes</td></tr><tr><td>4</td><td>Greater than 60 minutes</td></tr><tr><td>5</td><td>Prefer not to answer</td></tr></table> Custom alignment: LV	1	Within 5 minutes	2	6-30 minutes	3	31-60 minutes	4	Greater than 60 minutes	5	Prefer not to answer					
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236	able_smoke_awakening_2 Show the field ONLY if: [consent_year_2_v2]='1' and [currently_smoke_v2]='1'	If you were able to, would you smoke right after waking up?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer									
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0	No																	
2	Prefer not to answer																	
237	prevent_smoking_y2 Show the field ONLY if: [consent_year_2_v2]='1' and [currently_smoke_v2]='1' and [able_smoke_awakening_2]='1'	What prevents you from smoking upon awakening?	checkbox, Required <table><tr><td>1</td><td>prevent_smoking_y2__1</td><td>I am not allowed to smoke in my house</td></tr><tr><td>2</td><td>prevent_smoking_y2__2</td><td>I dont have cigarettes when I get up</td></tr><tr><td>3</td><td>prevent_smoking_y2__3</td><td>I dont have time</td></tr><tr><td>4</td><td>prevent_smoking_y2__4</td><td>Other</td></tr><tr><td>5</td><td>prevent_smoking_y2__5</td><td>Prefer not to answer</td></tr></table> Custom alignment: LV	1	prevent_smoking_y2__1	I am not allowed to smoke in my house	2	prevent_smoking_y2__2	I dont have cigarettes when I get up	3	prevent_smoking_y2__3	I dont have time	4	prevent_smoking_y2__4	Other	5	prevent_smoking_y2__5	Prefer not to answer
1	prevent_smoking_y2__1	I am not allowed to smoke in my house																
2	prevent_smoking_y2__2	I dont have cigarettes when I get up																
3	prevent_smoking_y2__3	I dont have time																
4	prevent_smoking_y2__4	Other																
5	prevent_smoking_y2__5	Prefer not to answer																
238	other_2 Show the field ONLY if: [prevent_smoking_y2(4)] = '1'	Other	notes, Required Custom alignment: LH															
239	past_smoke_v2 Show the field ONLY if: [consent_year_2_v2]='1' and [currently_smoke_v2]='0'	In the past have you regularly used tobacco products?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer									
1	Yes																	
0	No																	
2	Prefer not to answer																	
240	time_quit Show the field ONLY if: [consent_year_2_v2]='1' and [currently_smoke_v2]='0' and [past_smoke_v2]='1'	please indicate how long you have been quit for (i.e not used tobacco products)	radio, Required <table><tr><td>1</td><td>less than 1 week</td></tr><tr><td>2</td><td>less than 1 month</td></tr><tr><td>3</td><td>less than 3 months</td></tr><tr><td>4</td><td>3 months or more</td></tr></table> Custom alignment: LV	1	less than 1 week	2	less than 1 month	3	less than 3 months	4	3 months or more							
1	less than 1 week																	
2	less than 1 month																	
3	less than 3 months																	
4	3 months or more																	

241	notes Show the field ONLY if: [consent_year_2_v2]='1' and [currently_smoke_v2]='1'	The following questions are about your primary care doctor or prescribing nurse. This is the doctor or nurse you see every year for general medical concerns to do with your physical health. This is not your psychiatrist or therapist.	descriptive								
242	pcp_clinic_2 Show the field ONLY if: [consent_year_2_v2]='1' and [currently_smoke_v2]='1'	What is the name of the clinic where you see your primary care doctor?	text								
243	clinic_location_2 Show the field ONLY if: [consent_year_2_v2]='1' and [currently_smoke_v2]='1'	Where is the clinic located?	text								
244	name_of_pcp_2 Show the field ONLY if: [consent_year_2_v2]='1' and [currently_smoke_v2]='1'	What is your doctor's name?	text								
245	psych_name_2 Show the field ONLY if: [consent_year_2_v2]='1' and [currently_smoke_v2]='1'	What is your psychiatrist's name?	text								
246	seen_doc_v2 Show the field ONLY if: [consent_year_2_v2]='1' and [doc_know_smoke_v2]='1' or [used_to_smoke_2]='1'	Have you seen your medical doctor in the past year?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer		
1	Yes										
0	No										
2	Prefer not to answer										
247	doc_know_smoke_v2 Show the field ONLY if: [consent_year_2_v2]='1' and [currently_smoke_v2]='1'	Does your medical doctor know you smoke tobacco products?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>I don't know/Prefer not to answer</td></tr></table>	1	Yes	0	No	2	I don't know/Prefer not to answer		
1	Yes										
0	No										
2	I don't know/Prefer not to answer										
248	used_to_smoke_2 Show the field ONLY if: [consent_year_2_v2]='1' and [currently_smoke_v2]='0' and [past_smoke_v2]='1'	Does your medical doctor know you used to smoke?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>I don't know/ Prefer not to answer</td></tr></table>	1	Yes	0	No	2	I don't know/ Prefer not to answer		
1	Yes										
0	No										
2	I don't know/ Prefer not to answer										
249	any_treatment_year_2 Show the field ONLY if: [consent_year_2_v2]='1' and ([currently_smoke_v2]='1' or [currentl_y_smoke_v2]='2')	In the past year, have you used anything to quit smoking?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer		
1	Yes										
0	No										
2	Prefer not to answer										
250	what_treatment_year_2 Show the field ONLY if: [any_treatment_year_2] = '1'	What did you use?	notes, Required Custom alignment: LH								
251	doc_recommended_quit_v2 Show the field ONLY if: [consent_year_2_v2]='1' and ([currently_smoke_v2]='1' or [currentl_y_smoke_v2]='2' or [past_smoke_v2]='1') and ([seen_doc_v2]='1' or [seen_doc_v2]='2')	Has your medical doctor recommended that you quit smoking in the past year?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer		
1	Yes										
0	No										
2	Prefer not to answer										
252	often_recommended_quit_v2 Show the field ONLY if: [consent_year_2_v2]='1' and [doc_know_smoke_v2]='1' and [doc_recommended_quit_v2]='1'	How often did your medical doctor recommend you quit smoking?	radio, Required <table><tr><td>1</td><td>At every visit</td></tr><tr><td>2</td><td>At most visits</td></tr><tr><td>3</td><td>At some visits</td></tr><tr><td>4</td><td>Prefer not to answer</td></tr></table> Custom alignment: LV	1	At every visit	2	At most visits	3	At some visits	4	Prefer not to answer
1	At every visit										
2	At most visits										
3	At some visits										
4	Prefer not to answer										

253	quit_line_v2 Show the field ONLY if: [consent_year_2_v2]='1' and [doc_recommended_quit_v2]='1' and [seen_doc_v2]='1'	Has your medical doctor recommended that you call the quit-line in the past year?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																					
1	Yes																													
0	No																													
2	Prefer not to answer																													
254	doc_group_therapy_v2 Show the field ONLY if: [consent_year_2_v2]='1' and [doc_recommended_quit_v2]='1'	Did your medical doctor arrange for you to attend any smoking group to help you quit smoking in the past year?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																					
1	Yes																													
0	No																													
2	Prefer not to answer																													
255	attend_group_therapy_v2 Show the field ONLY if: [consent_year_2_v2]='1' and [doc_group_therapy_v2]='1'	Did you attend the smoking group?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																					
1	Yes																													
0	No																													
2	Prefer not to answer																													
256	number_therapy_v2 Show the field ONLY if: [consent_year_2_v2]='1' and [doc_group_therapy_v2]='1' and [attend_group_therapy_v2]='1'	How many sessions did you attend?	radio, Required <table border="1"> <tr><td>1</td><td>1-5</td></tr> <tr><td>2</td><td>5-10</td></tr> <tr><td>3</td><td>10-20</td></tr> <tr><td>4</td><td>Prefer not to answer</td></tr> </table> Custom alignment: LV	1	1-5	2	5-10	3	10-20	4	Prefer not to answer																			
1	1-5																													
2	5-10																													
3	10-20																													
4	Prefer not to answer																													
257	blank_year_2a		descriptive																											
258	doc_prescribed_v2 Show the field ONLY if: [consent_year_2_v2]='1' and [doc_recommended_quit_v2]='1'	In the past year, did your medical doctor prescribe medication, or suggest that you use nicotine patch, gum, lozenges or e-cigarettes to help you to quit smoking?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																					
1	Yes																													
0	No																													
2	Prefer not to answer																													
259	treatment_v2 Show the field ONLY if: [consent_year_2_v2]='1' and [doc_recommended_quit_v2]='1' and [doc_prescribed_v2]='1'	If yes, which? (Check all that apply)	checkbox, Required <table border="1"> <tr><td>1</td><td>treatment_v2__1</td><td>Varenicline (i.e. Chantix)</td></tr> <tr><td>2</td><td>treatment_v2__2</td><td>Bupropion (i.e. Zyban, Wellbutrin)</td></tr> <tr><td>3</td><td>treatment_v2__3</td><td>Nicotine Patch</td></tr> <tr><td>4</td><td>treatment_v2__4</td><td>Nicotine Gum/Lozenge</td></tr> <tr><td>5</td><td>treatment_v2__5</td><td>E-cigarettes/Vape</td></tr> <tr><td>6</td><td>treatment_v2__6</td><td>Pills to quit smoking</td></tr> <tr><td>7</td><td>treatment_v2__7</td><td>Other</td></tr> <tr><td>8</td><td>treatment_v2__8</td><td>Prefer not to answer</td></tr> <tr><td>9</td><td>treatment_v2__9</td><td>Could not remember</td></tr> </table> Custom alignment: LV	1	treatment_v2__1	Varenicline (i.e. Chantix)	2	treatment_v2__2	Bupropion (i.e. Zyban, Wellbutrin)	3	treatment_v2__3	Nicotine Patch	4	treatment_v2__4	Nicotine Gum/Lozenge	5	treatment_v2__5	E-cigarettes/Vape	6	treatment_v2__6	Pills to quit smoking	7	treatment_v2__7	Other	8	treatment_v2__8	Prefer not to answer	9	treatment_v2__9	Could not remember
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260	filled_var_v2 Show the field ONLY if: [consent_year_2_v2]='1' and [doc_recommended_quit_v2]='1' and [doc_prescribed_v2]='1' and [treatment_v2(1)]='1'	Did you fill or get the prescription for varenicline (Chantix)?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																					
1	Yes																													
0	No																													
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261	took_var_v2 Show the field ONLY if: [consent_year_2_v2]='1' and [doc_recommended_quit_v2]='1' and [doc_prescribed_v2]='1' and [treatment_v2(1)]='1' and [filled_var_v2]='1'	Did you take any of the varenicline (Chantix)?	radio <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																					
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2	Prefer not to answer																													

262	<div>reason_no_var_y2</div> <div>Show the field ONLY if: [consent_year_2_v2]='1' and [doc_recommended_quit_v2]='1' and [doc_prescribed_v2]='1' and [treatment_v2(1)]='1' and ([filled_var_v2]='0' or [took_var_v2]='0')</div>	<div>why not?</div>	<div>checkbox, Required</div> <table><tr><td>1</td><td>reason_no_var_y2__1</td><td>I don't need to take more medications</td></tr><tr><td>2</td><td>reason_no_var_y2__2</td><td>Fear of adverse effects</td></tr><tr><td>3</td><td>reason_no_var_y2__3</td><td>Family/friends/media recommended not taking it</td></tr><tr><td>4</td><td>reason_no_var_y2__4</td><td>I took it before and didn't like the effect (their past experiences)</td></tr><tr><td>5</td><td>reason_no_var_y2__5</td><td>I didn't understand what the treatment was about</td></tr><tr><td>6</td><td>reason_no_var_y2__6</td><td>I couldn't afford it</td></tr><tr><td>7</td><td>reason_no_var_y2__7</td><td>I'd rather go to smoking groups</td></tr><tr><td>8</td><td>reason_no_var_y2__8</td><td>I forgot</td></tr><tr><td>9</td><td>reason_no_var_y2__9</td><td>Other</td></tr><tr><td>10</td><td>reason_no_var_y2__10</td><td>Prefer not to answer</td></tr><tr><td>11</td><td>reason_no_var_y2__11</td><td>I didn't want to quit smoking</td></tr></table> <div>Custom alignment: LV</div>	1	reason_no_var_y2__1	I don't need to take more medications	2	reason_no_var_y2__2	Fear of adverse effects	3	reason_no_var_y2__3	Family/friends/media recommended not taking it	4	reason_no_var_y2__4	I took it before and didn't like the effect (their past experiences)	5	reason_no_var_y2__5	I didn't understand what the treatment was about	6	reason_no_var_y2__6	I couldn't afford it	7	reason_no_var_y2__7	I'd rather go to smoking groups	8	reason_no_var_y2__8	I forgot	9	reason_no_var_y2__9	Other	10	reason_no_var_y2__10	Prefer not to answer	11	reason_no_var_y2__11	I didn't want to quit smoking
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263	<div>other_no_var_2</div> <div>Show the field ONLY if: [reason_no_var_y2(9)] = '1'</div>	<div>Other</div>	<div>notes, Required</div> <div>Custom alignment: LV</div>																																	
264	<div>time_var_v2</div> <div>Show the field ONLY if: [consent_year_2_v2]='1' and [doc_recommended_quit_v2]='1' and [doc_prescribed_v2]='1' and [treatment_v2(1)]='1' and [filled_var_v2]='1' and [took_var_v2]='1'</div>	<div>How long did you take varenicline (Chantix)?</div>	<div>radio, Required</div> <table><tr><td>1</td><td>less than 1 week</td></tr><tr><td>2</td><td>less than 1 month</td></tr><tr><td>3</td><td>less than 3 months</td></tr><tr><td>4</td><td>3 months or more</td></tr></table> <div>Custom alignment: LV</div>	1	less than 1 week	2	less than 1 month	3	less than 3 months	4	3 months or more																									
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265	<div>refill_var_v2</div> <div>Show the field ONLY if: [consent_year_2_v2]='1' and [doc_recommended_quit_v2]='1' and [doc_prescribed_v2]='1' and [treatment_v2(1)]='1' and [filled_var_v2]='1'</div>	<div>Did you refill or get more of your prescription for varenicline (Chantix)?</div>	<div>radio, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer																											
1	Yes																																			
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266	<div>blank_year_2b</div>		<div>descriptive</div>																																	
267	<div>filled_bup_v2</div> <div>Show the field ONLY if: [consent_year_2_v2]='1' and [doc_recommended_quit_v2]='1' and [doc_prescribed_v2]='1' and [treatment_v2(2)]='1'</div>	<div>Did you fill or get the prescription for Bupropion (Zyban)?</div>	<div>radio, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer																											
1	Yes																																			
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268	<div>took_bup_v2</div> <div>Show the field ONLY if: [consent_year_2_v2]='1' and [doc_recommended_quit_v2]='1' and [doc_prescribed_v2]='1' and [treatment_v2(2)]='1' and [filled_bup_v2]='1'</div>	<div>Did you take any of the Bupropion (Zyban)?</div>	<div>radio, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer																											
1	Yes																																			
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269	<div>reason_no_bup_y2</div> <div>Show the field ONLY if: [consent_year_2_v2]='1' and [doc_recommended_quit_v2]='1' and [doc_prescribed_v2]='1' and [treatment_v2(2)]='1' and ([filled_bup_v2]='0' or [took_bup_v2]='0')</div>	<div>why not?</div>	<div>checkbox, Required</div> <table><tr><td>1</td><td>reason_no_bup_y2__1</td><td>I don't need to take more medications</td></tr><tr><td>2</td><td>reason_no_bup_y2__2</td><td>Fear of adverse effects</td></tr><tr><td>3</td><td>reason_no_bup_y2__3</td><td>Family/friends/media recommended not taking it</td></tr><tr><td>4</td><td>reason_no_bup_y2__4</td><td>I took it before and didn't like the effect (their past experiences)</td></tr><tr><td>5</td><td>reason_no_bup_y2__5</td><td>I didn't understand what the treatment was about</td></tr><tr><td>6</td><td>reason_no_bup_y2__6</td><td>I couldn't afford it</td></tr><tr><td>7</td><td>reason_no_bup_y2__7</td><td>I'd rather go to smoking groups</td></tr><tr><td>8</td><td>reason_no_bup_y2__8</td><td>I forgot</td></tr><tr><td>9</td><td>reason_no_bup_y2__9</td><td>Other</td></tr><tr><td>10</td><td>reason_no_bup_y2__10</td><td>Prefer not to answer</td></tr><tr><td>11</td><td>reason_no_bup_y2__11</td><td>I didn't want to quit smoking</td></tr></table> <div>Custom alignment: LV</div>	1	reason_no_bup_y2__1	I don't need to take more medications	2	reason_no_bup_y2__2	Fear of adverse effects	3	reason_no_bup_y2__3	Family/friends/media recommended not taking it	4	reason_no_bup_y2__4	I took it before and didn't like the effect (their past experiences)	5	reason_no_bup_y2__5	I didn't understand what the treatment was about	6	reason_no_bup_y2__6	I couldn't afford it	7	reason_no_bup_y2__7	I'd rather go to smoking groups	8	reason_no_bup_y2__8	I forgot	9	reason_no_bup_y2__9	Other	10	reason_no_bup_y2__10	Prefer not to answer	11	reason_no_bup_y2__11	I didn't want to quit smoking
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270	<div>other_no_bup_2</div> <div>Show the field ONLY if: [reason_no_bup_y2(9)] = '1'</div>	<div>Other</div>	<div>notes, Required</div> <div>Custom alignment: LV</div>																																	
271	<div>time_bup_v2</div> <div>Show the field ONLY if: [consent_year_2_v2]='1' and [doc_recommended_quit_v2]='1' and [doc_prescribed_v2]='1' and [treatment_v2(2)]='1' and [filled_bup_v2]='1' and [took_bup_v2]='1'</div>	<div>How long did you take Bupropion (Zyban)?</div>	<div>radio, Required</div> <table><tr><td>1</td><td>less than 1 week</td></tr><tr><td>2</td><td>less than 1 month</td></tr><tr><td>3</td><td>less than 3 months</td></tr><tr><td>4</td><td>3 months or more</td></tr></table> <div>Custom alignment: LV</div>	1	less than 1 week	2	less than 1 month	3	less than 3 months	4	3 months or more																									
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272	<div>refill_bup_v2</div> <div>Show the field ONLY if: [consent_year_2_v2]='1' and [doc_recommended_quit_v2]='1' and [doc_prescribed_v2]='1' and [treatment_v2(2)]='1' and [filled_bup_v2]='1'</div>	<div>Did you refill or get more of your prescription for Bupropion (Zyban)?</div>	<div>radio, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer																											
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274	<div>took_patch_v2</div> <div>Show the field ONLY if: [consent_year_2_v2]='1' and [doc_recommended_quit_v2]='1' and [doc_prescribed_v2]='1' and [treatment_v2(3)]='1'</div>	<div>Did you use nicotine patches?</div>	<div>radio, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer																											
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275	reason_no_patch_y2 Show the field ONLY if: [consent_year_2_v2]='1' and [doc_recommended_quit_v2]='1' and [doc_prescribed_v2]='1' and [treatment_v2(3)]='1' and [took_patch_v2]='0'	why not?	checkbox, Required <table border="1"> <tr><td>1</td><td>reason_no_patch_y2__1</td><td>I don't need to take more medications</td></tr> <tr><td>2</td><td>reason_no_patch_y2__2</td><td>Fear of adverse effects</td></tr> <tr><td>3</td><td>reason_no_patch_y2__3</td><td>Family/friends/media recommended not using it</td></tr> <tr><td>4</td><td>reason_no_patch_y2__4</td><td>I took it before and didn't like the effect (their past experiences)</td></tr> <tr><td>5</td><td>reason_no_patch_y2__5</td><td>I didn't understand what the treatment was about</td></tr> <tr><td>6</td><td>reason_no_patch_y2__6</td><td>I couldn't afford it</td></tr> <tr><td>7</td><td>reason_no_patch_y2__7</td><td>I'd rather go to smoking groups</td></tr> <tr><td>8</td><td>reason_no_patch_y2__8</td><td>I forgot</td></tr> <tr><td>9</td><td>reason_no_patch_y2__9</td><td>Other</td></tr> <tr><td>10</td><td>reason_no_patch_y2__10</td><td>Prefer not to answer</td></tr> <tr><td>11</td><td>reason_no_patch_y2__11</td><td>I didn't want to quit smoking</td></tr> </table> Custom alignment: LV	1	reason_no_patch_y2__1	I don't need to take more medications	2	reason_no_patch_y2__2	Fear of adverse effects	3	reason_no_patch_y2__3	Family/friends/media recommended not using it	4	reason_no_patch_y2__4	I took it before and didn't like the effect (their past experiences)	5	reason_no_patch_y2__5	I didn't understand what the treatment was about	6	reason_no_patch_y2__6	I couldn't afford it	7	reason_no_patch_y2__7	I'd rather go to smoking groups	8	reason_no_patch_y2__8	I forgot	9	reason_no_patch_y2__9	Other	10	reason_no_patch_y2__10	Prefer not to answer	11	reason_no_patch_y2__11	I didn't want to quit smoking
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295	blank_year_2f		descriptive																																	

296	other_use_v2 Show the field ONLY if: [consent_year_2_v2]='1' and [doc_recommended_quit_v2]='1' and [doc_prescribed_v2]='1' and [treatment_v2(7)]='1' and [other_v2]='1'	What other method or treatment did you used to quit smoking?	notes, Required Custom alignment: LV																																																			
297	other_help_v2 Show the field ONLY if: [consent_year_2_v2]='1' and [doc_recommended_quit_v2]='1' and [doc_prescribed_v2]='1' and [treatment_v2(7)]='1'	How long did you use this other method for?	radio, Required <table border="1"> <tr><td>1</td><td>less than 1 week</td></tr> <tr><td>2</td><td>less than 1 month</td></tr> <tr><td>3</td><td>less than 3 months</td></tr> <tr><td>4</td><td>3 months or more</td></tr> </table> Custom alignment: LV	1	less than 1 week	2	less than 1 month	3	less than 3 months	4	3 months or more																																											
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2	less than 1 month																																																					
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4	3 months or more																																																					
298	health_issues_year_2 Show the field ONLY if: [consent_year_2_v2]='1' and [currently_smoke_v2]='1'	Do you have any health issues? if yes, which ones?	notes, Required Custom alignment: LV																																																			
299	illness_smoking_v2 Show the field ONLY if: [consent_year_2_v2]='1' and ([currently_smoke_v2]='1' or [past_smoke_v2]='1')	Have you had any of these health conditions, either in the past or currently?	checkbox, Required <table border="1"> <tr><td>1</td><td>illness_smoking_v2__1</td><td>Heart Disease</td></tr> <tr><td>2</td><td>illness_smoking_v2__2</td><td>Heart Attack</td></tr> <tr><td>3</td><td>illness_smoking_v2__3</td><td>Cancer (Any type)</td></tr> <tr><td>4</td><td>illness_smoking_v2__4</td><td>Emphysema/COPD</td></tr> <tr><td>5</td><td>illness_smoking_v2__5</td><td>Chronis bronchitis</td></tr> <tr><td>6</td><td>illness_smoking_v2__6</td><td>Asthma</td></tr> <tr><td>7</td><td>illness_smoking_v2__7</td><td>Respiratory Problems (can't remember)</td></tr> <tr><td>8</td><td>illness_smoking_v2__8</td><td>Rheumatoid Arthritis</td></tr> <tr><td>9</td><td>illness_smoking_v2__9</td><td>Diabetes (high blood sugar)</td></tr> <tr><td>10</td><td>illness_smoking_v2__10</td><td>Blindness/Cataracts /Macular Degeneration</td></tr> <tr><td>11</td><td>illness_smoking_v2__11</td><td>Tuberculosis</td></tr> <tr><td>12</td><td>illness_smoking_v2__12</td><td>Hypertension (high blood pressure)</td></tr> <tr><td>13</td><td>illness_smoking_v2__13</td><td>Hypotension (low blood pressure)</td></tr> <tr><td>14</td><td>illness_smoking_v2__14</td><td>Other</td></tr> <tr><td>15</td><td>illness_smoking_v2__15</td><td>Prefer not to answer</td></tr> <tr><td>16</td><td>illness_smoking_v2__16</td><td>None</td></tr> <tr><td>17</td><td>illness_smoking_v2__17</td><td>Pneumonia</td></tr> </table> Custom alignment: LV	1	illness_smoking_v2__1	Heart Disease	2	illness_smoking_v2__2	Heart Attack	3	illness_smoking_v2__3	Cancer (Any type)	4	illness_smoking_v2__4	Emphysema/COPD	5	illness_smoking_v2__5	Chronis bronchitis	6	illness_smoking_v2__6	Asthma	7	illness_smoking_v2__7	Respiratory Problems (can't remember)	8	illness_smoking_v2__8	Rheumatoid Arthritis	9	illness_smoking_v2__9	Diabetes (high blood sugar)	10	illness_smoking_v2__10	Blindness/Cataracts /Macular Degeneration	11	illness_smoking_v2__11	Tuberculosis	12	illness_smoking_v2__12	Hypertension (high blood pressure)	13	illness_smoking_v2__13	Hypotension (low blood pressure)	14	illness_smoking_v2__14	Other	15	illness_smoking_v2__15	Prefer not to answer	16	illness_smoking_v2__16	None	17	illness_smoking_v2__17	Pneumonia
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300	other_health_year_2 Show the field ONLY if: [illness_smoking_v2(14)] = '1'	Other health conditions	notes, Required																																																			
301	blank_year_2g		descriptive																																																			
302	sf_1_v2 Show the field ONLY if: [consent_year_2_v2]='1'	In general, would you say your health is:	radio, Required <table border="1"> <tr><td>1</td><td>Excellent</td></tr> <tr><td>2</td><td>Very Good</td></tr> <tr><td>3</td><td>Good</td></tr> <tr><td>4</td><td>Fair</td></tr> <tr><td>5</td><td>Poor</td></tr> <tr><td>6</td><td>Prefer not to answer</td></tr> </table> Custom alignment: LV	1	Excellent	2	Very Good	3	Good	4	Fair	5	Poor	6	Prefer not to answer																																							
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303	notes_year_2 Show the field ONLY if: [consent_year_2_v2] = '1'	NOTES	notes Custom alignment: LV																		
304	staff_completed_survey_2	Study Staff who completed the survey	radio, Required <table><tr><td>1</td><td>Eve Manghis</td></tr><tr><td>2</td><td>Madeleine Fontaine</td></tr><tr><td>3</td><td>Mike Vilme</td></tr><tr><td>4</td><td>Chris McGovern</td></tr><tr><td>5</td><td>Lara Sullivan</td></tr><tr><td>6</td><td>Bianca Deeb</td></tr><tr><td>7</td><td>Shannon Brick</td></tr><tr><td>8</td><td>Kelsey Lowman</td></tr><tr><td>9</td><td>Hannah Broos</td></tr></table> Custom alignment: LV	1	Eve Manghis	2	Madeleine Fontaine	3	Mike Vilme	4	Chris McGovern	5	Lara Sullivan	6	Bianca Deeb	7	Shannon Brick	8	Kelsey Lowman	9	Hannah Broos
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305	complete_survey_year_2_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete												
0	Incomplete																				
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Instrument: Complete Survey Year 3 UPDATED (complete_survey_year_3_updated) <div>^ Collapse</div>																					
306	name_y3	First Name [year_1_arm_1][name_1]	text																		
307	visit1_y3	Year 1 Visit Date: [year_1_arm_1][visit_1]	descriptive																		
308	visit2_y3	Year 2 Visit Date: [year_2_arm_1][visit_y2]	descriptive																		
309	visit_y3	Year 3 Visit Date	text (datetime_mdy), Required																		
310	fact_sheet_y3	Hi, Just like last year's survey, you will answer short questions about your smoking and how your doctor talks to you about smoking. This should take 5-10 minutes to complete. Remember, like last year, I am not asking you to change your smoking. This is the last year we will be conducting this survey. Your participation is completely voluntary, and you can stop the brief survey at any time. Your decision to participate or not won't affect the medical or psychiatric care you have a right to receive now or in the future. This is a confidential survey - your information will be shared only with MGH researchers. Additionally, your name will not be tied to any of your survey responses. At the end of the survey, we'll ask you to complete a short breathing exercise using a CO monitor, which measures the carbon monoxide in your lungs. You will receive \$5 in cash for your time once you complete this survey. If you would like to speak to someone not involved in this research about your rights as a research subject, or any concerns or complaints you may have about the research, contact the Partners Human Research Committee at 617-424-4100.	descriptive																		
311	consent_y3	Do you want to participate by answering these questions?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LV	1	Yes	0	No														
1	Yes																				
0	No																				

312	currently_smoke_y3	Do you currently smoke any tobacco products? (I.e. Cigarettes, Cigars, Cigarillos, Rollies, Mini Cigars, Pipe) Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td> <td>currently_smoke_y3__1</td> <td>Cigarettes</td> </tr> <tr> <td>2</td> <td>currently_smoke_y3__2</td> <td>Mini cigars (i.e. double diamonds)</td> </tr> <tr> <td>3</td> <td>currently_smoke_y3__3</td> <td>loose tobacco (roll your own)</td> </tr> <tr> <td>4</td> <td>currently_smoke_y3__4</td> <td>e-cigarettes/vaping</td> </tr> <tr> <td>5</td> <td>currently_smoke_y3__5</td> <td>Other</td> </tr> <tr> <td>6</td> <td>currently_smoke_y3__6</td> <td>Quit smoking</td> </tr> <tr> <td>7</td> <td>currently_smoke_y3__7</td> <td>Prefer not to answer</td> </tr> </table>	1	currently_smoke_y3__1	Cigarettes	2	currently_smoke_y3__2	Mini cigars (i.e. double diamonds)	3	currently_smoke_y3__3	loose tobacco (roll your own)	4	currently_smoke_y3__4	e-cigarettes/vaping	5	currently_smoke_y3__5	Other	6	currently_smoke_y3__6	Quit smoking	7	currently_smoke_y3__7	Prefer not to answer
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7	currently_smoke_y3__7	Prefer not to answer																						
313	notes_y3 Show the field ONLY if: [currently_smoke_y3(1)] = '1' or [currently_smoke_y3(2)] = '1' or [currently_smoke_y3(3)] = '1' or [currently_smoke_y3(4)] = '1' or [currently_smoke_y3(5)] = '1' or [currently_smoke_y3(6)] = '1' or [currently_smoke_y3(7)] = '1'	Notes	notes Custom alignment: LH																					
314	time_quit_y3	When was the last time you smoked any tobacco product?	radio, Required <table border="1"> <tr> <td>1</td> <td>less than 1 week</td> </tr> <tr> <td>2</td> <td>less than 1 month</td> </tr> <tr> <td>3</td> <td>less than 3 months</td> </tr> <tr> <td>4</td> <td>3 months or more</td> </tr> </table>	1	less than 1 week	2	less than 1 month	3	less than 3 months	4	3 months or more													
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2	less than 1 month																							
3	less than 3 months																							
4	3 months or more																							
315	last_cig_y3	Last tobacco product was used (date and time, approximately)	notes, Required Custom alignment: LV																					
316	cpd_cigs_y3 Show the field ONLY if: [currently_smoke_y3(1)] = '1'	On average, approximately how many cigarettes do you smoke on a typical day?	radio, Required <table border="1"> <tr> <td>1</td> <td>less than 5</td> </tr> <tr> <td>2</td> <td>5 - 10</td> </tr> <tr> <td>3</td> <td>11 - 20</td> </tr> <tr> <td>4</td> <td>21 - 30</td> </tr> <tr> <td>5</td> <td>31 or more</td> </tr> <tr> <td>6</td> <td>I don't smoke every day</td> </tr> </table>	1	less than 5	2	5 - 10	3	11 - 20	4	21 - 30	5	31 or more	6	I don't smoke every day									
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5	31 or more																							
6	I don't smoke every day																							
317	number_cigs_y3 Show the field ONLY if: [currently_smoke_y3(1)] = '1'	Enter number, brand, size, etc. for all participants If participant doesn't smoke every day: describe cigarette smoking behavior (how many days/week participant smokes, # cigs per day, reason for non daily smoking)	notes, Required Custom alignment: LV																					
318	cpd_minicigs_y3 Show the field ONLY if: [currently_smoke_y3(2)] = '1'	On average, approximately how many mini cigars do you smoke on a typical day?	radio, Required <table border="1"> <tr> <td>1</td> <td>less than 5</td> </tr> <tr> <td>2</td> <td>5 - 10</td> </tr> <tr> <td>3</td> <td>11 - 20</td> </tr> <tr> <td>4</td> <td>21 - 30</td> </tr> <tr> <td>5</td> <td>31 or more</td> </tr> <tr> <td>6</td> <td>I don't smoke every day</td> </tr> </table>	1	less than 5	2	5 - 10	3	11 - 20	4	21 - 30	5	31 or more	6	I don't smoke every day									
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319	number_minicigs_y3 Show the field ONLY if: [currently_smoke_y3(2)] = '1'	Enter number, brand, size, etc for all participants If participant doesn't smoke every day: describe smoking behavior for minicigars (how many days/week participant smokes, # minicigs per day, reason for non daily smoking)	notes, Required Custom alignment: LV																					
320	cpd_loose_y3 Show the field ONLY if: [currently_smoke_y3(3)] = '1'	On average, approximately how many cigarettes do you roll and smoke on a typical day?	radio, Required <table border="1"> <tr> <td>1</td> <td>less than 5</td> </tr> <tr> <td>2</td> <td>5 - 10</td> </tr> <tr> <td>3</td> <td>11 - 20</td> </tr> <tr> <td>4</td> <td>21 - 30</td> </tr> <tr> <td>5</td> <td>31 or more</td> </tr> <tr> <td>6</td> <td>I don't smoke every day</td> </tr> </table>	1	less than 5	2	5 - 10	3	11 - 20	4	21 - 30	5	31 or more	6	I don't smoke every day									
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5	31 or more																							
6	I don't smoke every day																							

321	number_loose_y3 Show the field ONLY if: [currently_smoke_y3(3)] = '1'	Enter number, brand, size, amount of tobacco bought and frequency, etc for all participants If participant doesn't smoke every day: describe smoking behavior for "roll your own" (how many days/week participant smokes, # cigs per day, reason for non daily smoking)	notes, Required Custom alignment: LV																					
322	cpd_ecig_y3 Show the field ONLY if: [currently_smoke_y3(4)] = '1'	On average, approximately how many times do you use your e-cigarette on a typical day?	radio, Required <table><tr><td>1</td><td>less than 5</td></tr><tr><td>2</td><td>5 - 10</td></tr><tr><td>3</td><td>11 - 20</td></tr><tr><td>4</td><td>21 - 30</td></tr><tr><td>5</td><td>31 or more</td></tr><tr><td>6</td><td>I don't smoke every day</td></tr></table>	1	less than 5	2	5 - 10	3	11 - 20	4	21 - 30	5	31 or more	6	I don't smoke every day									
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5	31 or more																							
6	I don't smoke every day																							
323	number_ecig_y3 Show the field ONLY if: [currently_smoke_y3(4)] = '1'	Enter number of puffs, times per day or per week (in case of non daily use) participant uses, number of cartridges per day or per week, size of cartridges, etc. Be as specific as you can!	notes, Required Custom alignment: LV																					
324	cpd_other_tobacco_y3 Show the field ONLY if: [currently_smoke_y3(5)] = '1'	On average, approximately how many other tobacco products do you smoke on a typical day?	radio, Required <table><tr><td>1</td><td>less than 5</td></tr><tr><td>2</td><td>5 - 10</td></tr><tr><td>3</td><td>11 - 20</td></tr><tr><td>4</td><td>21 - 30</td></tr><tr><td>5</td><td>31 or more</td></tr><tr><td>6</td><td>I don't smoke every day</td></tr></table>	1	less than 5	2	5 - 10	3	11 - 20	4	21 - 30	5	31 or more	6	I don't smoke every day									
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5	31 or more																							
6	I don't smoke every day																							
325	number_other_tobacco_y3 Show the field ONLY if: [currently_smoke_y3(5)] = '1'	Enter description, name, number, frequency, etc	notes, Required																					
326	notes_tob_use_y3 Show the field ONLY if: [time_quit_y3] = '1' or [time_quit_y3] = '2' or [time_quit_y3] = '3' or [time_quit_y3] = '4'	Notes for tobacco products	notes Custom alignment: LV																					
327	smoke_waking_up_y3 Show the field ONLY if: [currently_smoke_y3(1)] = '1' or [currently_smoke_y3(2)] = '1' or [currently_smoke_y3(3)] = '1' or [currently_smoke_y3(4)] = '1' or [currently_smoke_y3(5)] = '1' or [currently_smoke_y3(7)] = '1'	How soon after waking up do you smoke your first tobacco product?	radio, Required <table><tr><td>1</td><td>Within 5 minutes</td></tr><tr><td>2</td><td>6-30 minutes</td></tr><tr><td>3</td><td>31-60 minutes</td></tr><tr><td>4</td><td>Greater than 60 minutes</td></tr><tr><td>5</td><td>Prefer not to answer</td></tr></table>	1	Within 5 minutes	2	6-30 minutes	3	31-60 minutes	4	Greater than 60 minutes	5	Prefer not to answer											
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328	able_smoke_awakening_y3 Show the field ONLY if: [smoke_waking_up_y3] = '2' or [smoke_waking_up_y3] = '3' or [smoke_waking_up_y3] = '4' or [smoke_waking_up_y3] = '5'	If you were able to, would you smoke right after waking up?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer															
1	Yes																							
0	No																							
2	Prefer not to answer																							
329	prevent_smoking_awake_y3 Show the field ONLY if: [smoke_waking_up_y3] = '2' or [smoke_waking_up_y3] = '3' or [smoke_waking_up_y3] = '4' or [smoke_waking_up_y3] = '5'	What prevents you from smoking upon awakening? Select all that apply	checkbox, Required <table><tr><td>1</td><td>prevent_smoking_awake_y3__1</td><td>I am not allowed to smoke in my house</td></tr><tr><td>2</td><td>prevent_smoking_awake_y3__2</td><td>I don't have cigarettes when I get up</td></tr><tr><td>3</td><td>prevent_smoking_awake_y3__3</td><td>I don't have time</td></tr><tr><td>6</td><td>prevent_smoking_awake_y3__6</td><td>Have morning routine</td></tr><tr><td>7</td><td>prevent_smoking_awake_y3__7</td><td>Trying to quit</td></tr><tr><td>4</td><td>prevent_smoking_awake_y3__4</td><td>Other</td></tr><tr><td>5</td><td>prevent_smoking_awake_y3__5</td><td>Prefer not to answer</td></tr></table>	1	prevent_smoking_awake_y3__1	I am not allowed to smoke in my house	2	prevent_smoking_awake_y3__2	I don't have cigarettes when I get up	3	prevent_smoking_awake_y3__3	I don't have time	6	prevent_smoking_awake_y3__6	Have morning routine	7	prevent_smoking_awake_y3__7	Trying to quit	4	prevent_smoking_awake_y3__4	Other	5	prevent_smoking_awake_y3__5	Prefer not to answer
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4	prevent_smoking_awake_y3__4	Other																						
5	prevent_smoking_awake_y3__5	Prefer not to answer																						
330	other_awake_y3 Show the field ONLY if: [prevent_smoking_awake_y3(4)] = '1'	Other	notes, Required																					

331	smoke_change_y3	Has your smoking changed (decreased) since we last surveyed you? If unsure, please ask follow up questions and add notes	radio, Required <table><tr><td>1</td><td>No</td></tr><tr><td>2</td><td>Yes</td></tr><tr><td>3</td><td>I don't know/unsure</td></tr></table>	1	No	2	Yes	3	I don't know/unsure															
1	No																							
2	Yes																							
3	I don't know/unsure																							
332	smoking_changed_y3 Show the field ONLY if: [smoke_change_y3] = '2' or [smoke_change_y3] = '3'	How so?	notes, Required																					
333	try_stop_y3	Since we last surveyed you, did you quit smoking for at least one day? (intentionally quit)	radio, Required <table><tr><td>0</td><td>No</td></tr><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	0	No	1	Yes	2	Prefer not to answer															
0	No																							
1	Yes																							
2	Prefer not to answer																							
334	oneday_quit_y3 Show the field ONLY if: [try_stop_y3] = '1' or [try_stop_y3] = '2'	Since we last surveyed you, how many times did you quit smoking for at least one day? (intentionally quit)	radio, Required <table><tr><td>1</td><td>1-5</td></tr><tr><td>2</td><td>6-10</td></tr><tr><td>3</td><td>11-20</td></tr><tr><td>4</td><td>More than 20</td></tr><tr><td>5</td><td>Prefer not to answer</td></tr></table>	1	1-5	2	6-10	3	11-20	4	More than 20	5	Prefer not to answer											
1	1-5																							
2	6-10																							
3	11-20																							
4	More than 20																							
5	Prefer not to answer																							
335	times_oneday_quit_y3 Show the field ONLY if: [try_stop_y3] = '1' or [try_stop_y3] = '2'	Number of times	text, Required																					
336	longest_quit_y3 Show the field ONLY if: [try_stop_y3] = '1' or [try_stop_y3] = '2'	Since we last surveyed you, what was the longest time (in days) that you didn't smoke because you were trying to quit?	notes, Required																					
337	did_to_quit_y3 Show the field ONLY if: [try_stop_y3] = '1' or [try_stop_y3] = '2'	What did you do to quit smoking during that period of time? Select all that apply	checkbox, Required <table><tr><td>1</td><td>did_to_quit_y3__1</td><td>I saw my primary care doctor and received a prescription for medication (varenicline, bupropion, patch)</td></tr><tr><td>2</td><td>did_to_quit_y3__2</td><td>I bought the patch, gum or lozenges from the pharmacy</td></tr><tr><td>3</td><td>did_to_quit_y3__3</td><td>I got the patch, gum or lozenges from ____</td></tr><tr><td>4</td><td>did_to_quit_y3__4</td><td>I decided to quit Cold turkey</td></tr><tr><td>5</td><td>did_to_quit_y3__5</td><td>I was hospitalized</td></tr><tr><td>6</td><td>did_to_quit_y3__6</td><td>I was incarcerated</td></tr><tr><td>7</td><td>did_to_quit_y3__7</td><td>Other</td></tr></table>	1	did_to_quit_y3__1	I saw my primary care doctor and received a prescription for medication (varenicline, bupropion, patch)	2	did_to_quit_y3__2	I bought the patch, gum or lozenges from the pharmacy	3	did_to_quit_y3__3	I got the patch, gum or lozenges from ____	4	did_to_quit_y3__4	I decided to quit Cold turkey	5	did_to_quit_y3__5	I was hospitalized	6	did_to_quit_y3__6	I was incarcerated	7	did_to_quit_y3__7	Other
1	did_to_quit_y3__1	I saw my primary care doctor and received a prescription for medication (varenicline, bupropion, patch)																						
2	did_to_quit_y3__2	I bought the patch, gum or lozenges from the pharmacy																						
3	did_to_quit_y3__3	I got the patch, gum or lozenges from ____																						
4	did_to_quit_y3__4	I decided to quit Cold turkey																						
5	did_to_quit_y3__5	I was hospitalized																						
6	did_to_quit_y3__6	I was incarcerated																						
7	did_to_quit_y3__7	Other																						
338	other_did_to_quit_y3 Show the field ONLY if: [did_to_quit_y3(7)] = '1'	Other	notes, Required																					
339	notes_abst_y3 Show the field ONLY if: [try_stop_y3] = '0' or [try_stop_y3] = '1' or [try_stop_y3] = '2'	Notes	notes																					
340	notes_6f9796_3	 <																						

343	name_of_pcp_y3	What is your medical doctor's name?	notes, Required Custom alignment: LV																
344	seen_doc_y3	Have you seen your medical doctor since we last surveyed you?	radio, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> <tr> <td>2</td> <td>Prefer not to answer</td> </tr> </table>		1	Yes	0	No	2	Prefer not to answer									
1	Yes																		
0	No																		
2	Prefer not to answer																		
345	doc_know_smoke_y3	Does your medical doctor know you smoked tobacco products since we last surveyed you?	radio, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> <tr> <td>2</td> <td>I don't know/Prefer not to answer</td> </tr> </table>		1	Yes	0	No	2	I don't know/Prefer not to answer									
1	Yes																		
0	No																		
2	I don't know/Prefer not to answer																		
346	doc_recommended_quit_y3	Did any medical treater recommend you to quit smoking since we last surveyed you? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td> <td>doc_recommended_quit_y3__1</td> <td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td> </tr> <tr> <td>2</td> <td>doc_recommended_quit_y3__2</td> <td>CHW or Health Coach</td> </tr> <tr> <td>3</td> <td>doc_recommended_quit_y3__3</td> <td>Psychiatrist/psych nurse</td> </tr> <tr> <td>4</td> <td>doc_recommended_quit_y3__4</td> <td>Other</td> </tr> <tr> <td>5</td> <td>doc_recommended_quit_y3__5</td> <td>None</td> </tr> </table>		1	doc_recommended_quit_y3__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	doc_recommended_quit_y3__2	CHW or Health Coach	3	doc_recommended_quit_y3__3	Psychiatrist/psych nurse	4	doc_recommended_quit_y3__4	Other	5	doc_recommended_quit_y3__5	None
1	doc_recommended_quit_y3__1	Medical doctor/primary care provider (PCP, NP, PA, RN)																	
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4	doc_recommended_quit_y3__4	Other																	
5	doc_recommended_quit_y3__5	None																	
347	other_doc_rec_quit_y3 Show the field ONLY if: [doc_recommended_quit_y3(4)] = '1'	Other	notes, Required																
348	often_recommended_quit_y3 Show the field ONLY if: [doc_recommended_quit_y3(1)] = '1' or [doc_recommended_quit_y3(2)] = '1' or [doc_recommended_quit_y3(3)] = '1' or [doc_recommended_quit_y3(4)] = '1'	How often did your medical treater recommend you stop smoking since we last surveyed you?	radio, Required <table border="1"> <tr> <td>1</td> <td>At every visit</td> </tr> <tr> <td>2</td> <td>At most visits</td> </tr> <tr> <td>3</td> <td>At some visits</td> </tr> <tr> <td>4</td> <td>Prefer not to answer</td> </tr> </table>		1	At every visit	2	At most visits	3	At some visits	4	Prefer not to answer							
1	At every visit																		
2	At most visits																		
3	At some visits																		
4	Prefer not to answer																		
349	treatment_recommended_y3	Did any medical treater recommend you take any medication to help you quit smoking, such as pills (chantix, wellbutrin), nicotine patch, gum, lozenges or e-cigarettes since we last surveyed you? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td> <td>treatment_recommended_y3__1</td> <td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td> </tr> <tr> <td>2</td> <td>treatment_recommended_y3__2</td> <td>CHW or Health Coach</td> </tr> <tr> <td>3</td> <td>treatment_recommended_y3__3</td> <td>Psychiatrist/psych nurse</td> </tr> <tr> <td>4</td> <td>treatment_recommended_y3__4</td> <td>Other</td> </tr> <tr> <td>5</td> <td>treatment_recommended_y3__5</td> <td>None</td> </tr> </table>		1	treatment_recommended_y3__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	treatment_recommended_y3__2	CHW or Health Coach	3	treatment_recommended_y3__3	Psychiatrist/psych nurse	4	treatment_recommended_y3__4	Other	5	treatment_recommended_y3__5	None
1	treatment_recommended_y3__1	Medical doctor/primary care provider (PCP, NP, PA, RN)																	
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5	treatment_recommended_y3__5	None																	
350	other_treat_rec_y3 Show the field ONLY if: [treatment_recommended_y3(4)] = '1'	Other	notes, Required																
351	quit_line_y3	Did any medical treater recommend you to call the quit-line since we last surveyed you? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td> <td>quit_line_y3__1</td> <td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td> </tr> <tr> <td>2</td> <td>quit_line_y3__2</td> <td>CHW or Health Coach</td> </tr> <tr> <td>3</td> <td>quit_line_y3__3</td> <td>Psychiatrist/psych nurse</td> </tr> <tr> <td>4</td> <td>quit_line_y3__4</td> <td>Other</td> </tr> <tr> <td>5</td> <td>quit_line_y3__5</td> <td>None</td> </tr> </table>		1	quit_line_y3__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	quit_line_y3__2	CHW or Health Coach	3	quit_line_y3__3	Psychiatrist/psych nurse	4	quit_line_y3__4	Other	5	quit_line_y3__5	None
1	quit_line_y3__1	Medical doctor/primary care provider (PCP, NP, PA, RN)																	
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3	quit_line_y3__3	Psychiatrist/psych nurse																	
4	quit_line_y3__4	Other																	
5	quit_line_y3__5	None																	
352	quit_line_other_y3 Show the field ONLY if: [quit_line_y3(4)] = '1'	Other	notes, Required																

353	doc_group_therapy_y3	Did any medical treater arrange for you to attend any smoking group to help you stop smoking since we last surveyed you? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td><td>doc_group_therapy_y3__1</td><td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td></tr> <tr> <td>2</td><td>doc_group_therapy_y3__2</td><td>CHW or Health Coach</td></tr> <tr> <td>3</td><td>doc_group_therapy_y3__3</td><td>Psychiatrist/psych nurse</td></tr> <tr> <td>4</td><td>doc_group_therapy_y3__4</td><td>Other</td></tr> <tr> <td>5</td><td>doc_group_therapy_y3__5</td><td>None</td></tr> </table>	1	doc_group_therapy_y3__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	doc_group_therapy_y3__2	CHW or Health Coach	3	doc_group_therapy_y3__3	Psychiatrist/psych nurse	4	doc_group_therapy_y3__4	Other	5	doc_group_therapy_y3__5	None												
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354	doc_group_other_y3 Show the field ONLY if: [doc_group_therapy_y3(4)] = '1'	Other	notes, Required																											
355	attend_group_therapy_y3	Did you attend any smoking cessation group, even one?	radio, Required <table border="1"> <tr> <td>1</td><td>Yes</td></tr> <tr> <td>0</td><td>No</td></tr> <tr> <td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																					
1	Yes																													
0	No																													
2	Prefer not to answer																													
356	number_therapy_y3 Show the field ONLY if: [attend_group_therapy_y3] = '1' or [attend_group_therapy_y3] = '2'	How many sessions did you attend?	radio, Required <table border="1"> <tr> <td>1</td><td>1-5</td></tr> <tr> <td>2</td><td>6-10</td></tr> <tr> <td>3</td><td>11-20</td></tr> <tr> <td>4</td><td>more than 20</td></tr> <tr> <td>5</td><td>Prefer not to answer</td></tr> </table>	1	1-5	2	6-10	3	11-20	4	more than 20	5	Prefer not to answer																	
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2	6-10																													
3	11-20																													
4	more than 20																													
5	Prefer not to answer																													
357	treatment_prescribed_y3	Did any medical treater write you a prescription for medication to help you quit smoking, such as pills (chantix, wellbutrin), nicotine patch, gum, lozenges or e-cigarettes since we last surveyed you? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td><td>treatment_prescribed_y3__1</td><td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td></tr> <tr> <td>2</td><td>treatment_prescribed_y3__2</td><td>Another specialty</td></tr> <tr> <td>3</td><td>treatment_prescribed_y3__3</td><td>Psychiatrist/psych nurse</td></tr> <tr> <td>4</td><td>treatment_prescribed_y3__4</td><td>Other</td></tr> <tr> <td>5</td><td>treatment_prescribed_y3__5</td><td>No</td></tr> </table>	1	treatment_prescribed_y3__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	treatment_prescribed_y3__2	Another specialty	3	treatment_prescribed_y3__3	Psychiatrist/psych nurse	4	treatment_prescribed_y3__4	Other	5	treatment_prescribed_y3__5	No												
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358	other_treatm_prescribed_y3 Show the field ONLY if: [treatment_prescribed_y3(4)] = '1'	Other	notes, Required																											
359	notes_treat_y3 Show the field ONLY if: [treatment_prescribed_y3(1)] = '1' or [treatment_prescribed_y3(2)] = '1' or [treatment_prescribed_y3(3)] = '1' or [treatment_prescribed_y3(4)] = '1'	Notes about treatment	notes Custom alignment: LV																											
360	treatment_y3 Show the field ONLY if: [treatment_prescribed_y3(1)] = '1' or [treatment_prescribed_y3(2)] = '1' or [treatment_prescribed_y3(3)] = '1' or [treatment_prescribed_y3(4)] = '1'	If yes, which? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td><td>treatment_y3__1</td><td>Varenicline (i.e. Chantix)</td></tr> <tr> <td>2</td><td>treatment_y3__2</td><td>Bupropion (i.e. Zyban, Wellbutrin)</td></tr> <tr> <td>3</td><td>treatment_y3__3</td><td>Nicotine Patch</td></tr> <tr> <td>4</td><td>treatment_y3__4</td><td>Nicotine Gum/Lozenge</td></tr> <tr> <td>5</td><td>treatment_y3__5</td><td>E-cigarettes/Vape</td></tr> <tr> <td>6</td><td>treatment_y3__6</td><td>Pills to quit smoking</td></tr> <tr> <td>7</td><td>treatment_y3__7</td><td>Other</td></tr> <tr> <td>8</td><td>treatment_y3__8</td><td>Prefer not to answer</td></tr> <tr> <td>9</td><td>treatment_y3__9</td><td>Could not remember</td></tr> </table>	1	treatment_y3__1	Varenicline (i.e. Chantix)	2	treatment_y3__2	Bupropion (i.e. Zyban, Wellbutrin)	3	treatment_y3__3	Nicotine Patch	4	treatment_y3__4	Nicotine Gum/Lozenge	5	treatment_y3__5	E-cigarettes/Vape	6	treatment_y3__6	Pills to quit smoking	7	treatment_y3__7	Other	8	treatment_y3__8	Prefer not to answer	9	treatment_y3__9	Could not remember
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8	treatment_y3__8	Prefer not to answer																												
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361	other_treatment_y3 Show the field ONLY if: [treatment_y3(7)] = '1'	Other	notes, Required																											
362	pills_quit_pic_y3 Show the field ONLY if: [treatment_y3(6)] = '1'	Section Header: <i>Do any of these pills look like the ones you took to quit smoking?</i> Picture 1	descriptive																											

363	times_prescribed_var_y3 Show the field ONLY if: [treatment_y3(1)] = '1'	How many times have you been prescribed varenicline (Chantix) since we last surveyed you?	radio, Required <table border="1"> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td></tr> <tr><td>3</td><td>3 or more</td></tr> </table>	1	1	2	2	3	3 or more																																	
1	1																																									
2	2																																									
3	3 or more																																									
364	who_prescribed_var_1_y3 Show the field ONLY if: [treatment_y3(1)] = '1'	Who prescribed Varenicline (Chantix) since we last surveyed you? Select all that apply	checkbox, Required <table border="1"> <tr><td>1</td><td>who_prescribed_var_1_y3__1</td><td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td></tr> <tr><td>2</td><td>who_prescribed_var_1_y3__2</td><td>Another specialty</td></tr> <tr><td>3</td><td>who_prescribed_var_1_y3__3</td><td>Psychiatrist/psych nurse</td></tr> <tr><td>4</td><td>who_prescribed_var_1_y3__4</td><td>Other</td></tr> <tr><td>5</td><td>who_prescribed_var_1_y3__5</td><td>I don't know</td></tr> </table>	1	who_prescribed_var_1_y3__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	who_prescribed_var_1_y3__2	Another specialty	3	who_prescribed_var_1_y3__3	Psychiatrist/psych nurse	4	who_prescribed_var_1_y3__4	Other	5	who_prescribed_var_1_y3__5	I don't know																								
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5	who_prescribed_var_1_y3__5	I don't know																																								
365	presc_var_other_1_y3 Show the field ONLY if: [who_prescribed_var_1_y3(2)] = '1' or [who_prescribed_var_1_y3(4)] = '1'	Another specialty/other	notes, Required																																							
366	filled_var_1_y3 Show the field ONLY if: [times_prescribed_var_y3] = '1' or [times_prescribed_var_y3] = '2' or [times_prescribed_var_y3] = '3'	Did you fill or get the prescription for varenicline (Chantix)?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																																	
1	Yes																																									
0	No																																									
2	Prefer not to answer																																									
367	reason_no_var_fill_1_y3 Show the field ONLY if: [filled_var_1_y3] = '0'	why not? Select all that apply	checkbox, Required <table border="1"> <tr><td>1</td><td>reason_no_var_fill_1_y3__1</td><td>I didn't want to take more medications</td></tr> <tr><td>2</td><td>reason_no_var_fill_1_y3__2</td><td>Fear of adverse effects</td></tr> <tr><td>3</td><td>reason_no_var_fill_1_y3__3</td><td>Family/friends/media recommended not taking it</td></tr> <tr><td>4</td><td>reason_no_var_fill_1_y3__4</td><td>I took it before and didn't like the effect (their past experiences)</td></tr> <tr><td>5</td><td>reason_no_var_fill_1_y3__5</td><td>I didn't understand what the treatment was about</td></tr> <tr><td>6</td><td>reason_no_var_fill_1_y3__6</td><td>I couldn't afford it</td></tr> <tr><td>7</td><td>reason_no_var_fill_1_y3__7</td><td>I'd rather go to smoking groups</td></tr> <tr><td>11</td><td>reason_no_var_fill_1_y3__11</td><td>I didn't want to quit smoking</td></tr> <tr><td>12</td><td>reason_no_var_fill_1_y3__12</td><td>I didn't think it would help</td></tr> <tr><td>13</td><td>reason_no_var_fill_1_y3__13</td><td>I didn't know how to do it</td></tr> <tr><td>8</td><td>reason_no_var_fill_1_y3__8</td><td>I forgot</td></tr> <tr><td>9</td><td>reason_no_var_fill_1_y3__9</td><td>Other</td></tr> <tr><td>10</td><td>reason_no_var_fill_1_y3__10</td><td>Prefer not to answer</td></tr> </table>	1	reason_no_var_fill_1_y3__1	I didn't want to take more medications	2	reason_no_var_fill_1_y3__2	Fear of adverse effects	3	reason_no_var_fill_1_y3__3	Family/friends/media recommended not taking it	4	reason_no_var_fill_1_y3__4	I took it before and didn't like the effect (their past experiences)	5	reason_no_var_fill_1_y3__5	I didn't understand what the treatment was about	6	reason_no_var_fill_1_y3__6	I couldn't afford it	7	reason_no_var_fill_1_y3__7	I'd rather go to smoking groups	11	reason_no_var_fill_1_y3__11	I didn't want to quit smoking	12	reason_no_var_fill_1_y3__12	I didn't think it would help	13	reason_no_var_fill_1_y3__13	I didn't know how to do it	8	reason_no_var_fill_1_y3__8	I forgot	9	reason_no_var_fill_1_y3__9	Other	10	reason_no_var_fill_1_y3__10	Prefer not to answer
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10	reason_no_var_fill_1_y3__10	Prefer not to answer																																								
368	other_no_var_fill_1_y3 Show the field ONLY if: [reason_no_var_fill_1_y3(9)] = '1'	Other	notes, Required Custom alignment: LV																																							
369	took_var_1_y3 Show the field ONLY if: [times_prescribed_var_y3] = '1' or [times_prescribed_var_y3] = '2' or [times_prescribed_var_y3] = '3'	Did you take any of the varenicline (Chantix)?	radio, Required <table border="1"> <tr><td>0</td><td>No</td></tr> <tr><td>1</td><td>Yes, on and off</td></tr> <tr><td>2</td><td>Yes, still taking it everyday as prescribed</td></tr> <tr><td>4</td><td>Yes, not taking it anymore (i.e. adverse effects)</td></tr> <tr><td>5</td><td>Yes, finished course of treatment</td></tr> <tr><td>3</td><td>Prefer not to answer</td></tr> </table>	0	No	1	Yes, on and off	2	Yes, still taking it everyday as prescribed	4	Yes, not taking it anymore (i.e. adverse effects)	5	Yes, finished course of treatment	3	Prefer not to answer																											
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370	reason_no_var_1_y3 Show the field ONLY if: [took_var_1_y3] = '0'	why not? Select all that apply	checkbox, Required <table><tr><td>1</td><td>reason_no_var_1_y3__1</td><td>I didn't want to take more medications</td></tr><tr><td>2</td><td>reason_no_var_1_y3__2</td><td>Fear of adverse effects</td></tr><tr><td>3</td><td>reason_no_var_1_y3__3</td><td>Family/friends/media recommended not taking it</td></tr><tr><td>4</td><td>reason_no_var_1_y3__4</td><td>I took it before and didn't like the effect (their past experiences)</td></tr><tr><td>5</td><td>reason_no_var_1_y3__5</td><td>I didn't understand what the treatment was about</td></tr><tr><td>6</td><td>reason_no_var_1_y3__6</td><td>I couldn't afford it</td></tr><tr><td>7</td><td>reason_no_var_1_y3__7</td><td>I'd rather go to smoking groups</td></tr><tr><td>11</td><td>reason_no_var_1_y3__11</td><td>I didn't want to quit smoking</td></tr><tr><td>12</td><td>reason_no_var_1_y3__12</td><td>I didn't think it would help</td></tr><tr><td>8</td><td>reason_no_var_1_y3__8</td><td>I forgot</td></tr><tr><td>9</td><td>reason_no_var_1_y3__9</td><td>Other</td></tr><tr><td>10</td><td>reason_no_var_1_y3__10</td><td>Prefer not to answer</td></tr></table>	1	reason_no_var_1_y3__1	I didn't want to take more medications	2	reason_no_var_1_y3__2	Fear of adverse effects	3	reason_no_var_1_y3__3	Family/friends/media recommended not taking it	4	reason_no_var_1_y3__4	I took it before and didn't like the effect (their past experiences)	5	reason_no_var_1_y3__5	I didn't understand what the treatment was about	6	reason_no_var_1_y3__6	I couldn't afford it	7	reason_no_var_1_y3__7	I'd rather go to smoking groups	11	reason_no_var_1_y3__11	I didn't want to quit smoking	12	reason_no_var_1_y3__12	I didn't think it would help	8	reason_no_var_1_y3__8	I forgot	9	reason_no_var_1_y3__9	Other	10	reason_no_var_1_y3__10	Prefer not to answer
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371	other_no_var_1_y3 Show the field ONLY if: [reason_no_var_1_y3(9)] = '1'	Other	notes, Required Custom alignment: LV																																				
372	why_stopped_var_1_y3 Show the field ONLY if: [took_var_1_y3] = '4'	Why did you stop? Select all that apply	checkbox, Required <table><tr><td>1</td><td>why_stopped_var_1_y3__1</td><td>I didn't want to take more medications</td></tr><tr><td>2</td><td>why_stopped_var_1_y3__2</td><td>Adverse side effects</td></tr><tr><td>3</td><td>why_stopped_var_1_y3__3</td><td>Family/friends/media recommended stopping it</td></tr><tr><td>4</td><td>why_stopped_var_1_y3__4</td><td>I didn't understand what the treatment was about</td></tr><tr><td>5</td><td>why_stopped_var_1_y3__5</td><td>My provider recommended to stop the treatment</td></tr><tr><td>6</td><td>why_stopped_var_1_y3__6</td><td>My insurance didn't cover it and I couldn't afford it anymore</td></tr><tr><td>7</td><td>why_stopped_var_1_y3__7</td><td>I'd rather go to smoking groups</td></tr><tr><td>11</td><td>why_stopped_var_1_y3__11</td><td>I didn't want to quit smoking</td></tr><tr><td>12</td><td>why_stopped_var_1_y3__12</td><td>It wasn't helping me to quit smoking</td></tr><tr><td>8</td><td>why_stopped_var_1_y3__8</td><td>I forgot</td></tr><tr><td>9</td><td>why_stopped_var_1_y3__9</td><td>Other</td></tr><tr><td>10</td><td>why_stopped_var_1_y3__10</td><td>Prefer not to answer</td></tr></table>	1	why_stopped_var_1_y3__1	I didn't want to take more medications	2	why_stopped_var_1_y3__2	Adverse side effects	3	why_stopped_var_1_y3__3	Family/friends/media recommended stopping it	4	why_stopped_var_1_y3__4	I didn't understand what the treatment was about	5	why_stopped_var_1_y3__5	My provider recommended to stop the treatment	6	why_stopped_var_1_y3__6	My insurance didn't cover it and I couldn't afford it anymore	7	why_stopped_var_1_y3__7	I'd rather go to smoking groups	11	why_stopped_var_1_y3__11	I didn't want to quit smoking	12	why_stopped_var_1_y3__12	It wasn't helping me to quit smoking	8	why_stopped_var_1_y3__8	I forgot	9	why_stopped_var_1_y3__9	Other	10	why_stopped_var_1_y3__10	Prefer not to answer
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374	start_var_1_y3 Show the field ONLY if: [took_var_1_y3] = '1' or [took_var_1_y3] = '2' or [took_var_1_y3] = '3' or [took_var_1_y3] = '4' or [took_var_1_y3] = '5'	How many weeks in total did you take Varenicline since we last surveyed you?	notes, Required																																				

375	often_use_var_1_y3 Show the field ONLY if: [took_var_1_y3] = '1' or [took_var_1_y3] = '2' or [took_var_1_y3] = '3' or [took_var_1_y3] = '4' or [took_var_1_y3] = '5'	How often did you take/have you been taking varenicline (chantix) since we last surveyed you?	radio, Required <table border="1"> <tr><td>1</td><td>twice a day every day</td></tr> <tr><td>2</td><td>once a day every day</td></tr> <tr><td>3</td><td>most days (more days than not)</td></tr> <tr><td>4</td><td>Less than half of the time</td></tr> <tr><td>5</td><td>Once or twice only</td></tr> <tr><td>6</td><td>I don't know</td></tr> </table>	1	twice a day every day	2	once a day every day	3	most days (more days than not)	4	Less than half of the time	5	Once or twice only	6	I don't know			
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376	notes_var_1_y3 Show the field ONLY if: [times_prescribed_var_y3] = '1' or [times_prescribed_var_y3] = '2' or [times_prescribed_var_y3] = '3'	Notes for Varenicline	notes Custom alignment: LV															
377	times_prescribed_bup_y3 Show the field ONLY if: [treatment_y3(2)] = '1'	How many times have you been prescribed bupropion (wellbutrin or zyban) since we last surveyed you?	radio <table border="1"> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td></tr> <tr><td>3</td><td>3 or more</td></tr> </table>	1	1	2	2	3	3 or more									
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2	2																	
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378	who_prescribed_bup_1_y3 Show the field ONLY if: [treatment_y3(2)] = '1'	Who prescribed bupropion (wellbutrin or zyban) since we last surveyed you? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td> <td>who_prescribed_bup_1_y3__1</td> <td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td> </tr> <tr> <td>2</td> <td>who_prescribed_bup_1_y3__2</td> <td>Another specialty</td> </tr> <tr> <td>3</td> <td>who_prescribed_bup_1_y3__3</td> <td>Psychiatrist/psych nurse</td> </tr> <tr> <td>4</td> <td>who_prescribed_bup_1_y3__4</td> <td>Other</td> </tr> <tr> <td>5</td> <td>who_prescribed_bup_1_y3__5</td> <td>I don't know</td> </tr> </table>	1	who_prescribed_bup_1_y3__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	who_prescribed_bup_1_y3__2	Another specialty	3	who_prescribed_bup_1_y3__3	Psychiatrist/psych nurse	4	who_prescribed_bup_1_y3__4	Other	5	who_prescribed_bup_1_y3__5	I don't know
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379	presc_bup_other_1_y3 Show the field ONLY if: [who_prescribed_bup_1_y3(2)] = '1' or [who_prescribed_bup_1_y3(4)] = '1'	Another specialty/other	notes, Required															
380	filled_bup_1_y3 Show the field ONLY if: [times_prescribed_bup_y3] = '1' or [times_prescribed_bup_y3] = '2' or [times_prescribed_bup_y3] = '3'	Did you fill or get the prescription for Bupropion (wellbutrin or Zyban)?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer									
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381	reason_no_bup_fill_1_y3 Show the field ONLY if: [filled_bup_1_y3] = '0'	why not? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td><td>reason_no_bup_fill_1_y3__1</td><td>I didn't want to take more medications</td></tr> <tr> <td>2</td><td>reason_no_bup_fill_1_y3__2</td><td>Fear of adverse effects</td></tr> <tr> <td>3</td><td>reason_no_bup_fill_1_y3__3</td><td>Family/friends/media recommended not taking it</td></tr> <tr> <td>4</td><td>reason_no_bup_fill_1_y3__4</td><td>I took it before and didn't like the effect (their past experiences)</td></tr> <tr> <td>5</td><td>reason_no_bup_fill_1_y3__5</td><td>I didn't understand what the treatment was about</td></tr> <tr> <td>6</td><td>reason_no_bup_fill_1_y3__6</td><td>I couldn't afford it</td></tr> <tr> <td>7</td><td>reason_no_bup_fill_1_y3__7</td><td>I'd rather go to smoking groups</td></tr> <tr> <td>11</td><td>reason_no_bup_fill_1_y3__11</td><td>I didn't want to quit smoking</td></tr> <tr> <td>12</td><td>reason_no_bup_fill_1_y3__12</td><td>I didn't think it would help</td></tr> <tr> <td>13</td><td>reason_no_bup_fill_1_y3__13</td><td>I didn't know how to get it</td></tr> <tr> <td>8</td><td>reason_no_bup_fill_1_y3__8</td><td>I forgot</td></tr> <tr> <td>9</td><td>reason_no_bup_fill_1_y3__9</td><td>Other</td></tr> <tr> <td>10</td><td>reason_no_bup_fill_1_y3__10</td><td>Prefer not to answer</td></tr> </table>	1	reason_no_bup_fill_1_y3__1	I didn't want to take more medications	2	reason_no_bup_fill_1_y3__2	Fear of adverse effects	3	reason_no_bup_fill_1_y3__3	Family/friends/media recommended not taking it	4	reason_no_bup_fill_1_y3__4	I took it before and didn't like the effect (their past experiences)	5	reason_no_bup_fill_1_y3__5	I didn't understand what the treatment was about	6	reason_no_bup_fill_1_y3__6	I couldn't afford it	7	reason_no_bup_fill_1_y3__7	I'd rather go to smoking groups	11	reason_no_bup_fill_1_y3__11	I didn't want to quit smoking	12	reason_no_bup_fill_1_y3__12	I didn't think it would help	13	reason_no_bup_fill_1_y3__13	I didn't know how to get it	8	reason_no_bup_fill_1_y3__8	I forgot	9	reason_no_bup_fill_1_y3__9	Other	10	reason_no_bup_fill_1_y3__10	Prefer not to answer
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383	took_bup_1_y3 Show the field ONLY if: [times_prescribed_bup_y3] = '1' or [times_prescribed_bup_y3] = '2' or [times_prescribed_bup_y3] = '3'	Did you take any of the Bupropion (wellbutrin or Zyban)?	radio, Required <table border="1"> <tr> <td>0</td><td>No</td></tr> <tr> <td>1</td><td>Yes, on and off</td></tr> <tr> <td>2</td><td>Yes, still taking it everyday as prescribed</td></tr> <tr> <td>4</td><td>Yes, not taking it anymore (i.e. adverse effects)</td></tr> <tr> <td>5</td><td>Yes, finished course of treatment</td></tr> <tr> <td>3</td><td>Prefer not to answer</td></tr> </table>	0	No	1	Yes, on and off	2	Yes, still taking it everyday as prescribed	4	Yes, not taking it anymore (i.e. adverse effects)	5	Yes, finished course of treatment	3	Prefer not to answer																											
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387	other_stop_bup_1_y3 Show the field ONLY if: [why_stopped_bup_1_y3(9)] = '1'	Other	notes, Required Custom alignment: LV		
388	start_bup_1_y3 Show the field ONLY if: [took_bup_1_y3] = '1' or [took_bup_1_y3] = '2' or [took_bup_1_y3] = '3' or [took_bup_1_y3] = '4' or [took_bup_1_y3] = '5'	How many weeks in total did you take bupropion since we last surveyed you?	notes, Required		
389	often_use_bup_1_y3 Show the field ONLY if: [took_bup_1_y3] = '1' or [took_bup_1_y3] = '2' or [took_bup_1_y3] = '3' or [took_bup_1_y3] = '4' or [took_bup_1_y3] = '5'	How often did you take/have you been taking bupropion since we last surveyed you?	radio, Required		
			1	twice a day every day	
			2	once a day every day	
			3	most days (more days than not)	
			4	Less than half of the time	
			5	Once or twice only	
			6	I don't know	
390	notes_bup_1_y3 Show the field ONLY if: [times_prescribed_bup_y3] = '1' or [times_prescribed_bup_y3] = '2' or [times_prescribed_bup_y3] = '3'	Notes for bupropion	notes Custom alignment: LV		
391	times_prescribed_patch_y3 Show the field ONLY if: [treatment_y3(3)] = '1'	How many times have you been prescribed nicotine patches since we last surveyed you?	radio, Required		
			1	1	
			2	2	
			3	3 or more	

392	who_prescribed_patch_1_y3 Show the field ONLY if: [treatment_y3(3)] = '1'	Who prescribed nicotine patches since we last surveyed you? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td> <td>who_prescribed_patch_1_y3__1</td> <td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td> </tr> <tr> <td>2</td> <td>who_prescribed_patch_1_y3__2</td> <td>Another specialty</td> </tr> <tr> <td>3</td> <td>who_prescribed_patch_1_y3__3</td> <td>Psychiatrist/psych nurse</td> </tr> <tr> <td>4</td> <td>who_prescribed_patch_1_y3__4</td> <td>Other</td> </tr> <tr> <td>5</td> <td>who_prescribed_patch_1_y3__5</td> <td>I don't know</td> </tr> </table>	1	who_prescribed_patch_1_y3__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	who_prescribed_patch_1_y3__2	Another specialty	3	who_prescribed_patch_1_y3__3	Psychiatrist/psych nurse	4	who_prescribed_patch_1_y3__4	Other	5	who_prescribed_patch_1_y3__5	I don't know																								
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393	presc_patch_other_1_y3 Show the field ONLY if: [who_prescribed_patch_1_y3(2)] = '1' or [who_prescribed_patch_1_y3(4)] = '1'	Another specialty/other	notes, Required																																							
394	filled_patch_1_y3 Show the field ONLY if: [times_prescribed_patch_y3] = '1' or [times_prescribed_patch_y3] = '2' or [times_prescribed_patch_y3] = '3'	Did you fill or get the prescription for nicotine patches?	radio, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> <tr> <td>2</td> <td>Prefer not to answer</td> </tr> </table>	1	Yes	0	No	2	Prefer not to answer																																	
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0	No																																									
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395	reason_no_patch_fill_1_y3 Show the field ONLY if: [filled_patch_1_y3] = '0'	why not? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td> <td>reason_no_patch_fill_1_y3__1</td> <td>I didn't want to use the patch</td> </tr> <tr> <td>2</td> <td>reason_no_patch_fill_1_y3__2</td> <td>Fear of adverse effects</td> </tr> <tr> <td>3</td> <td>reason_no_patch_fill_1_y3__3</td> <td>Family/friends /media recommended not using it</td> </tr> <tr> <td>4</td> <td>reason_no_patch_fill_1_y3__4</td> <td>I used it before and didn't like the effect (their past experiences)</td> </tr> <tr> <td>5</td> <td>reason_no_patch_fill_1_y3__5</td> <td>I didn't understand what the treatment was about</td> </tr> <tr> <td>6</td> <td>reason_no_patch_fill_1_y3__6</td> <td>I couldn't afford it</td> </tr> <tr> <td>7</td> <td>reason_no_patch_fill_1_y3__7</td> <td>I'd rather go to smoking groups</td> </tr> <tr> <td>11</td> <td>reason_no_patch_fill_1_y3__11</td> <td>I didn't want to quit smoking</td> </tr> <tr> <td>12</td> <td>reason_no_patch_fill_1_y3__12</td> <td>I didn't think it would help</td> </tr> <tr> <td>13</td> <td>reason_no_patch_fill_1_y3__13</td> <td>I didn't know how to get it</td> </tr> <tr> <td>8</td> <td>reason_no_patch_fill_1_y3__8</td> <td>I forgot</td> </tr> <tr> <td>9</td> <td>reason_no_patch_fill_1_y3__9</td> <td>Other</td> </tr> <tr> <td>10</td> <td>reason_no_patch_fill_1_y3__10</td> <td>Prefer not to answer</td> </tr> </table>	1	reason_no_patch_fill_1_y3__1	I didn't want to use the patch	2	reason_no_patch_fill_1_y3__2	Fear of adverse effects	3	reason_no_patch_fill_1_y3__3	Family/friends /media recommended not using it	4	reason_no_patch_fill_1_y3__4	I used it before and didn't like the effect (their past experiences)	5	reason_no_patch_fill_1_y3__5	I didn't understand what the treatment was about	6	reason_no_patch_fill_1_y3__6	I couldn't afford it	7	reason_no_patch_fill_1_y3__7	I'd rather go to smoking groups	11	reason_no_patch_fill_1_y3__11	I didn't want to quit smoking	12	reason_no_patch_fill_1_y3__12	I didn't think it would help	13	reason_no_patch_fill_1_y3__13	I didn't know how to get it	8	reason_no_patch_fill_1_y3__8	I forgot	9	reason_no_patch_fill_1_y3__9	Other	10	reason_no_patch_fill_1_y3__10	Prefer not to answer
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396	other_no_patch_fill_1_y3 Show the field ONLY if: [reason_no_patch_fill_1_y3(9)] = '1'	Other	notes, Required Custom alignment: LV																																							
397	used_patch_1_y3 Show the field ONLY if: [times_prescribed_patch_y3] = '1' or [times_prescribed_patch_y3] = '2' or [times_prescribed_patch_y3] = '3'	Did you use any of the patches?	radio, Required <table border="1"> <tr> <td>0</td> <td>No</td> </tr> <tr> <td>1</td> <td>Yes, on and off</td> </tr> <tr> <td>2</td> <td>Yes, still using it everyday as prescribed</td> </tr> <tr> <td>4</td> <td>Yes, not using it anymore (i.e. adverse effects)</td> </tr> <tr> <td>5</td> <td>Yes, finished course of treatment</td> </tr> <tr> <td>3</td> <td>Prefer not to answer</td> </tr> </table>	0	No	1	Yes, on and off	2	Yes, still using it everyday as prescribed	4	Yes, not using it anymore (i.e. adverse effects)	5	Yes, finished course of treatment	3	Prefer not to answer																											
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398	reason_no_patch_1_y3 Show the field ONLY if: [used_patch_1_y3] = '0'	why not? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td><td>reason_no_patch_1_y3__1</td><td>I didn't want to use the patch</td></tr> <tr> <td>2</td><td>reason_no_patch_1_y3__2</td><td>Fear of adverse effects</td></tr> <tr> <td>3</td><td>reason_no_patch_1_y3__3</td><td>Family/friends/media recommended not using it</td></tr> <tr> <td>4</td><td>reason_no_patch_1_y3__4</td><td>I used it before and didn't like the effect (their past experiences)</td></tr> <tr> <td>5</td><td>reason_no_patch_1_y3__5</td><td>I didn't understand what the treatment was about</td></tr> <tr> <td>6</td><td>reason_no_patch_1_y3__6</td><td>I couldn't afford it</td></tr> <tr> <td>7</td><td>reason_no_patch_1_y3__7</td><td>I'd rather go to smoking groups</td></tr> <tr> <td>11</td><td>reason_no_patch_1_y3__11</td><td>I didn't want to quit smoking</td></tr> <tr> <td>12</td><td>reason_no_patch_1_y3__12</td><td>I didn't think it would help</td></tr> <tr> <td>8</td><td>reason_no_patch_1_y3__8</td><td>I forgot</td></tr> <tr> <td>9</td><td>reason_no_patch_1_y3__9</td><td>Other</td></tr> <tr> <td>10</td><td>reason_no_patch_1_y3__10</td><td>Prefer not to answer</td></tr> </table>	1	reason_no_patch_1_y3__1	I didn't want to use the patch	2	reason_no_patch_1_y3__2	Fear of adverse effects	3	reason_no_patch_1_y3__3	Family/friends/media recommended not using it	4	reason_no_patch_1_y3__4	I used it before and didn't like the effect (their past experiences)	5	reason_no_patch_1_y3__5	I didn't understand what the treatment was about	6	reason_no_patch_1_y3__6	I couldn't afford it	7	reason_no_patch_1_y3__7	I'd rather go to smoking groups	11	reason_no_patch_1_y3__11	I didn't want to quit smoking	12	reason_no_patch_1_y3__12	I didn't think it would help	8	reason_no_patch_1_y3__8	I forgot	9	reason_no_patch_1_y3__9	Other	10	reason_no_patch_1_y3__10	Prefer not to answer
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400	why_stopped_patch_1_y3 Show the field ONLY if: [used_patch_1_y3] = '4'	Why did you stop? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td><td>why_stopped_patch_1_y3__1</td><td>I didn't want to take more medications</td></tr> <tr> <td>2</td><td>why_stopped_patch_1_y3__2</td><td>Adverse side effects</td></tr> <tr> <td>3</td><td>why_stopped_patch_1_y3__3</td><td>Family/friends /media recommended stopping it</td></tr> <tr> <td>4</td><td>why_stopped_patch_1_y3__4</td><td>I didn't understand what the treatment was about</td></tr> <tr> <td>5</td><td>why_stopped_patch_1_y3__5</td><td>My provider recommended to stop the treatment</td></tr> <tr> <td>6</td><td>why_stopped_patch_1_y3__6</td><td>My insurance didn't cover it and I couldn't afford it anymore</td></tr> <tr> <td>7</td><td>why_stopped_patch_1_y3__7</td><td>I'd rather go to smoking groups</td></tr> <tr> <td>11</td><td>why_stopped_patch_1_y3__11</td><td>I didn't want to quit smoking</td></tr> <tr> <td>12</td><td>why_stopped_patch_1_y3__12</td><td>It wasn't helping me to quit smoking</td></tr> <tr> <td>8</td><td>why_stopped_patch_1_y3__8</td><td>I forgot</td></tr> <tr> <td>9</td><td>why_stopped_patch_1_y3__9</td><td>Other</td></tr> <tr> <td>10</td><td>why_stopped_patch_1_y3__10</td><td>Prefer not to answer</td></tr> </table>	1	why_stopped_patch_1_y3__1	I didn't want to take more medications	2	why_stopped_patch_1_y3__2	Adverse side effects	3	why_stopped_patch_1_y3__3	Family/friends /media recommended stopping it	4	why_stopped_patch_1_y3__4	I didn't understand what the treatment was about	5	why_stopped_patch_1_y3__5	My provider recommended to stop the treatment	6	why_stopped_patch_1_y3__6	My insurance didn't cover it and I couldn't afford it anymore	7	why_stopped_patch_1_y3__7	I'd rather go to smoking groups	11	why_stopped_patch_1_y3__11	I didn't want to quit smoking	12	why_stopped_patch_1_y3__12	It wasn't helping me to quit smoking	8	why_stopped_patch_1_y3__8	I forgot	9	why_stopped_patch_1_y3__9	Other	10	why_stopped_patch_1_y3__10	Prefer not to answer
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401	other_stop_patch_1_y3 Show the field ONLY if: [why_stopped_patch_1_y3(9)] = '1'	Other	notes, Required																																				
402	start_patch_1_y3 Show the field ONLY if: [used_patch_1_y3] = '1' or [used_patch_1_y3] = '2' or [used_patch_1_y3] = '3' or [used_patch_1_y3] = '4' or [used_patch_1_y3] = '5'	How many weeks in total did you use nicotine patches since we last surveyed you?	notes, Required																																				

403	<p>often_use_patch_1_y3</p> <p>Show the field ONLY if: [used_patch_1_y3] = '1' or [used_patch_1_y3] = '2' or [used_patch_1_y3] = '3' or [used_patch_1_y3] = '4' or [used_patch_1_y3] = '5'</p>	During this time, how often did you use the patch?	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>Everyday</td></tr> <tr><td>2</td><td>most days (more days than not)</td></tr> <tr><td>3</td><td>Less than half of the time</td></tr> <tr><td>4</td><td>Once or twice only</td></tr> <tr><td>5</td><td>I don't know</td></tr> </table>	1	Everyday	2	most days (more days than not)	3	Less than half of the time	4	Once or twice only	5	I don't know					
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404	<p>notes_patch_1_y3</p> <p>Show the field ONLY if: [times_prescribed_patch_y3] = '1' or [times_prescribed_patch_y3] = '2' or [times_prescribed_patch_y3] = '3'</p>	Notes for nicotine patches	<p>notes</p> <p>Custom alignment: LV</p>															
405	<p>times_prescribed_gum_loz_y3</p> <p>Show the field ONLY if: [treatment_y3(4)] = '1'</p>	How many times have you been prescribed nicotine gum and/or lozenges since we last surveyed you?	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td></tr> <tr><td>3</td><td>3 or more</td></tr> </table>	1	1	2	2	3	3 or more									
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2	2																	
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406	<p>who_prescribed_gum_1_y3</p> <p>Show the field ONLY if: [treatment_y3(4)] = '1'</p>	<p>Who prescribed nicotine gum or lozenges since we last surveyed you?</p> <p>Select all that apply</p>	<p>checkbox, Required</p> <table border="1"> <tr> <td>1</td> <td>who_prescribed_gum_1_y3__1</td> <td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td> </tr> <tr> <td>2</td> <td>who_prescribed_gum_1_y3__2</td> <td>Another specialty</td> </tr> <tr> <td>3</td> <td>who_prescribed_gum_1_y3__3</td> <td>Psychiatrist/psych nurse</td> </tr> <tr> <td>4</td> <td>who_prescribed_gum_1_y3__4</td> <td>Other</td> </tr> <tr> <td>5</td> <td>who_prescribed_gum_1_y3__5</td> <td>I don't know</td> </tr> </table>	1	who_prescribed_gum_1_y3__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	who_prescribed_gum_1_y3__2	Another specialty	3	who_prescribed_gum_1_y3__3	Psychiatrist/psych nurse	4	who_prescribed_gum_1_y3__4	Other	5	who_prescribed_gum_1_y3__5	I don't know
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407	<p>other_presc_gum_1_y3</p> <p>Show the field ONLY if: [who_prescribed_gum_1_y3(2)] = '1' or [who_prescribed_gum_1_y3(4)] = '1'</p>	Another specialty/other	<p>notes, Required</p>															
408	<p>filled_gum_1_y3</p> <p>Show the field ONLY if: [times_prescribed_gum_loz_y3] = '1' or [times_prescribed_gum_loz_y3] = '2' or [times_prescribed_gum_loz_y3] = '3'</p>	Did you fill or get the prescription for nicotine gum or lozenges?	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer									
1	Yes																	
0	No																	
2	Prefer not to answer																	

409	reasons_no_gum_fill_1_y3 Show the field ONLY if: [filled_gum_1_y3] = '0'	why not? Select all that apply	checkbox, Required		
			1	reasons_no_gum_fill_1_y3__1	I didn't want to take more medications
			2	reasons_no_gum_fill_1_y3__2	Fear of adverse effects
			3	reasons_no_gum_fill_1_y3__3	Family/friends /media recommended not using it
			4	reasons_no_gum_fill_1_y3__4	I took it before and didn't like the effect (their past experiences)
			5	reasons_no_gum_fill_1_y3__5	I didn't understand what the treatment was about
			6	reasons_no_gum_fill_1_y3__6	I couldn't afford it
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			11	reasons_no_gum_fill_1_y3__11	I didn't want to quit smoking
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			13	reasons_no_gum_fill_1_y3__13	I didn't know how to get it
			8	reasons_no_gum_fill_1_y3__8	I forgot
			9	reasons_no_gum_fill_1_y3__9	Other
			10	reasons_no_gum_fill_1_y3__10	Prefer not to answer
410	other_no_gum_fill_1_y3 Show the field ONLY if: [reasons_no_gum_fill_1_y3(9)] = '1'	Other	notes, Required		
411	took_gum_1_y3 Show the field ONLY if: [times_prescribed_gum_loz_y3] = '1' or [times_prescribed_gum_loz_y3] = '2' or [times_prescribed_gum_loz_y3] = '3'	Did you use Nicotine gum or lozenges?	radio, Required		
			0	No	
			1	Yes, on and off	
			2	Yes, still using it everyday as prescribed	
			4	Yes, not using it anymore (i.e. adverse effects)	
			5	Yes, finished course of treatment	
			3	Prefer not to answer	

412	reasons_no_gum_1_y3 Show the field ONLY if: [took_gum_1_y3] = '0'	why not? Select all that apply	<table><tr><td colspan="3">checkbox, Required</td></tr><tr><td>1</td><td>reasons_no_gum_1_y3__1</td><td>I tried and didn't like it</td></tr><tr><td>2</td><td>reasons_no_gum_1_y3__2</td><td>Fear of adverse effects</td></tr><tr><td>3</td><td>reasons_no_gum_1_y3__3</td><td>Family/friends/media recommended not using it</td></tr><tr><td>4</td><td>reasons_no_gum_1_y3__4</td><td>I used it before and didn't like the effect (their past experiences)</td></tr><tr><td>5</td><td>reasons_no_gum_1_y3__5</td><td>I didn't understand what the treatment was about</td></tr><tr><td>6</td><td>reasons_no_gum_1_y3__6</td><td>I couldn't afford it</td></tr><tr><td>7</td><td>reasons_no_gum_1_y3__7</td><td>I'd rather go to smoking groups</td></tr><tr><td>11</td><td>reasons_no_gum_1_y3__11</td><td>I didn't want to quit smoking</td></tr><tr><td>12</td><td>reasons_no_gum_1_y3__12</td><td>I didn't think this medication would help me quit</td></tr><tr><td>8</td><td>reasons_no_gum_1_y3__8</td><td>I forgot</td></tr><tr><td>9</td><td>reasons_no_gum_1_y3__9</td><td>Other</td></tr><tr><td>10</td><td>reasons_no_gum_1_y3__10</td><td>Prefer not to answer</td></tr></table>	checkbox, Required			1	reasons_no_gum_1_y3__1	I tried and didn't like it	2	reasons_no_gum_1_y3__2	Fear of adverse effects	3	reasons_no_gum_1_y3__3	Family/friends/media recommended not using it	4	reasons_no_gum_1_y3__4	I used it before and didn't like the effect (their past experiences)	5	reasons_no_gum_1_y3__5	I didn't understand what the treatment was about	6	reasons_no_gum_1_y3__6	I couldn't afford it	7	reasons_no_gum_1_y3__7	I'd rather go to smoking groups	11	reasons_no_gum_1_y3__11	I didn't want to quit smoking	12	reasons_no_gum_1_y3__12	I didn't think this medication would help me quit	8	reasons_no_gum_1_y3__8	I forgot	9	reasons_no_gum_1_y3__9	Other	10	reasons_no_gum_1_y3__10	Prefer not to answer
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413	other_no_gum_1_y3 Show the field ONLY if: [reasons_no_gum_1_y3(9)] = '1'	Other	<table><tr><td colspan="3">notes, Required</td></tr><tr><td colspan="3">Custom alignment: LV</td></tr></table>	notes, Required			Custom alignment: LV																																			
notes, Required																																										
Custom alignment: LV																																										
414	why_stopped_gum_1_y3 Show the field ONLY if: [took_gum_1_y3] = '4'	Why did you stop? Select all that apply	<table><tr><td colspan="3">checkbox, Required</td></tr><tr><td>1</td><td>why_stopped_gum_1_y3__1</td><td>I didn't like it</td></tr><tr><td>2</td><td>why_stopped_gum_1_y3__2</td><td>Adverse side effects</td></tr><tr><td>3</td><td>why_stopped_gum_1_y3__3</td><td>Family/friends/media recommended stopping it</td></tr><tr><td>4</td><td>why_stopped_gum_1_y3__4</td><td>I didn't understand what the treatment was about</td></tr><tr><td>5</td><td>why_stopped_gum_1_y3__5</td><td>My provider recommended to stop the treatment</td></tr><tr><td>6</td><td>why_stopped_gum_1_y3__6</td><td>My insurance didn't cover it and I couldn't afford it anymore</td></tr><tr><td>7</td><td>why_stopped_gum_1_y3__7</td><td>I'd rather go to smoking groups</td></tr><tr><td>11</td><td>why_stopped_gum_1_y3__11</td><td>I didn't want to quit smoking</td></tr><tr><td>12</td><td>why_stopped_gum_1_y3__12</td><td>It wasn't helping me to quit smoking</td></tr><tr><td>8</td><td>why_stopped_gum_1_y3__8</td><td>I forgot</td></tr><tr><td>9</td><td>why_stopped_gum_1_y3__9</td><td>Other</td></tr><tr><td>10</td><td>why_stopped_gum_1_y3__10</td><td>Prefer not to answer</td></tr></table>	checkbox, Required			1	why_stopped_gum_1_y3__1	I didn't like it	2	why_stopped_gum_1_y3__2	Adverse side effects	3	why_stopped_gum_1_y3__3	Family/friends/media recommended stopping it	4	why_stopped_gum_1_y3__4	I didn't understand what the treatment was about	5	why_stopped_gum_1_y3__5	My provider recommended to stop the treatment	6	why_stopped_gum_1_y3__6	My insurance didn't cover it and I couldn't afford it anymore	7	why_stopped_gum_1_y3__7	I'd rather go to smoking groups	11	why_stopped_gum_1_y3__11	I didn't want to quit smoking	12	why_stopped_gum_1_y3__12	It wasn't helping me to quit smoking	8	why_stopped_gum_1_y3__8	I forgot	9	why_stopped_gum_1_y3__9	Other	10	why_stopped_gum_1_y3__10	Prefer not to answer
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415	other_stop_gum_1_y3 Show the field ONLY if: [why_stopped_gum_1_y3(9)] = '1'	Other	<table><tr><td colspan="3">notes, Required</td></tr></table>	notes, Required																																						
notes, Required																																										
416	start_gum_1_y3 Show the field ONLY if: [took_gum_1_y3] = '1' or [took_gum_1_y3] = '2' or [took_gum_1_y3] = '3' or [took_gum_1_y3] = '4' or [took_gum_1_y3] = '5'	How many weeks in total did you use nicotine gum or lozenges since we last surveyed you?	<table><tr><td colspan="3">notes, Required</td></tr></table>	notes, Required																																						
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417	<p>often_use_gum_1_y3</p> <p>Show the field ONLY if:</p> <p>[took_gum_1_y3] = '1' or [took_gum_1_y3] = '2' or [took_gum_1_y3] = '3' or [took_gum_1_y3] = '4' or [took_gum_1_y3] = '5'</p>	How often did you use the gum or lozenges since we last surveyed you?	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>Everyday</td></tr> <tr><td>2</td><td>most days (more days than not)</td></tr> <tr><td>3</td><td>Less than half of the time</td></tr> <tr><td>4</td><td>Once or twice only</td></tr> <tr><td>5</td><td>I don't know</td></tr> </table>	1	Everyday	2	most days (more days than not)	3	Less than half of the time	4	Once or twice only	5	I don't know					
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418	<p>often_gum_1_y3</p> <p>Show the field ONLY if:</p> <p>[took_gum_1_y3] = '1' or [took_gum_1_y3] = '2' or [took_gum_1_y3] = '3' or [took_gum_1_y3] = '4' or [took_gum_1_y3] = '5'</p>	How many lozenges or pieces of gum did you use per day since we last surveyed you?	<p>text, Required</p> <p>Custom alignment: LV</p>															
419	<p>notes_gum_1_y3</p> <p>Show the field ONLY if:</p> <p>[times_prescribed_gum_loz_y3] = '1' or [times_prescribed_gum_loz_y3] = '2' or [times_prescribed_gum_loz_y3] = '3'</p>	Notes for nicotine gum or lozenges	<p>notes</p> <p>Custom alignment: LV</p>															
420	<p>times_rec_ecig_y3</p> <p>Show the field ONLY if:</p> <p>[treatment_y3(5)] = '1'</p>	How many times have you been recommended using e-cigs to help you quit smoking since we last surveyed you?	<p>radio, Required</p> <table border="1"> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td></tr> <tr><td>3</td><td>3 or more</td></tr> </table>	1	1	2	2	3	3 or more									
1	1																	
2	2																	
3	3 or more																	
421	<p>rec_ecigs_y3</p> <p>Show the field ONLY if:</p> <p>[treatment_y3(5)] = '1'</p>	<p>Who recommended using e-cigarettes/vape since we last surveyed you?</p> <p>Select all that apply</p>	<p>checkbox, Required</p> <table border="1"> <tr><td>1</td><td>rec_ecigs_y3__1</td><td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td></tr> <tr><td>2</td><td>rec_ecigs_y3__2</td><td>Another specialty</td></tr> <tr><td>3</td><td>rec_ecigs_y3__3</td><td>Psychiatrist/psych nurse</td></tr> <tr><td>4</td><td>rec_ecigs_y3__4</td><td>Other</td></tr> <tr><td>5</td><td>rec_ecigs_y3__5</td><td>I don't know</td></tr> </table>	1	rec_ecigs_y3__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	rec_ecigs_y3__2	Another specialty	3	rec_ecigs_y3__3	Psychiatrist/psych nurse	4	rec_ecigs_y3__4	Other	5	rec_ecigs_y3__5	I don't know
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422	<p>other_rec_ecig_y3</p> <p>Show the field ONLY if:</p> <p>[rec_ecigs_y3(2)] = '1' or [rec_ecigs_y3(4)] = '1'</p>	Another specialty/other	<p>notes, Required</p>															
423	<p>use_ecig_y3</p> <p>Show the field ONLY if:</p> <p>[treatment_y3(5)] = '1'</p>	Did you use ecigs/vape?	<p>radio, Required</p> <table border="1"> <tr><td>0</td><td>No</td></tr> <tr><td>1</td><td>Yes, on and off</td></tr> <tr><td>2</td><td>Yes, still using it everyday as recommended</td></tr> <tr><td>4</td><td>Yes, not using it anymore (i.e. adverse effects)</td></tr> <tr><td>3</td><td>Prefer not to answer</td></tr> </table>	0	No	1	Yes, on and off	2	Yes, still using it everyday as recommended	4	Yes, not using it anymore (i.e. adverse effects)	3	Prefer not to answer					
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424	reason_no_ecig_y3 Show the field ONLY if: [use_ecig_y3] = '0'	why not? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td> <td>reason_no_ecig_y3__1</td> <td>I tried and didn't like it</td> </tr> <tr> <td>2</td> <td>reason_no_ecig_y3__2</td> <td>Fear of adverse effects</td> </tr> <tr> <td>3</td> <td>reason_no_ecig_y3__3</td> <td>Family/friends/media recommended not using it</td> </tr> <tr> <td>4</td> <td>reason_no_ecig_y3__4</td> <td>I used it before and didn't like the effect (their past experiences)</td> </tr> <tr> <td>5</td> <td>reason_no_ecig_y3__5</td> <td>I didn't understand what the treatment was about</td> </tr> <tr> <td>6</td> <td>reason_no_ecig_y3__6</td> <td>I couldn't afford it</td> </tr> <tr> <td>7</td> <td>reason_no_ecig_y3__7</td> <td>I'd rather go to smoking groups</td> </tr> <tr> <td>11</td> <td>reason_no_ecig_y3__11</td> <td>I didn't want to quit smoking</td> </tr> <tr> <td>12</td> <td>reason_no_ecig_y3__12</td> <td>I didn't think it would help</td> </tr> <tr> <td>13</td> <td>reason_no_ecig_y3__13</td> <td>I didn't know how to get it</td> </tr> <tr> <td>8</td> <td>reason_no_ecig_y3__8</td> <td>I forgot</td> </tr> <tr> <td>9</td> <td>reason_no_ecig_y3__9</td> <td>Other</td> </tr> <tr> <td>10</td> <td>reason_no_ecig_y3__10</td> <td>Prefer not to answer</td> </tr> </table>	1	reason_no_ecig_y3__1	I tried and didn't like it	2	reason_no_ecig_y3__2	Fear of adverse effects	3	reason_no_ecig_y3__3	Family/friends/media recommended not using it	4	reason_no_ecig_y3__4	I used it before and didn't like the effect (their past experiences)	5	reason_no_ecig_y3__5	I didn't understand what the treatment was about	6	reason_no_ecig_y3__6	I couldn't afford it	7	reason_no_ecig_y3__7	I'd rather go to smoking groups	11	reason_no_ecig_y3__11	I didn't want to quit smoking	12	reason_no_ecig_y3__12	I didn't think it would help	13	reason_no_ecig_y3__13	I didn't know how to get it	8	reason_no_ecig_y3__8	I forgot	9	reason_no_ecig_y3__9	Other	10	reason_no_ecig_y3__10	Prefer not to answer
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425	other_no_ecigs_y3 Show the field ONLY if: [reason_no_ecig_y3(9)] = '1'	Other	notes, Required Custom alignment: LV																																							
426	why_stop_ecig_y3 Show the field ONLY if: [use_ecig_y3] = '4'	Why did you stop? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td> <td>why_stop_ecig_y3__1</td> <td>I tried and didn't like it</td> </tr> <tr> <td>2</td> <td>why_stop_ecig_y3__2</td> <td>Adverse side effects</td> </tr> <tr> <td>3</td> <td>why_stop_ecig_y3__3</td> <td>Family/friends/media recommended not using it</td> </tr> <tr> <td>4</td> <td>why_stop_ecig_y3__4</td> <td>I didn't understand how to use it</td> </tr> <tr> <td>5</td> <td>why_stop_ecig_y3__5</td> <td>My provider recommended to stop using it</td> </tr> <tr> <td>6</td> <td>why_stop_ecig_y3__6</td> <td>My insurance didn't cover it and I couldn't afford it</td> </tr> <tr> <td>7</td> <td>why_stop_ecig_y3__7</td> <td>I'd rather go to smoking groups</td> </tr> <tr> <td>11</td> <td>why_stop_ecig_y3__11</td> <td>I didn't want to quit smoking</td> </tr> <tr> <td>12</td> <td>why_stop_ecig_y3__12</td> <td>It wasn't helping me to quit smoking</td> </tr> <tr> <td>8</td> <td>why_stop_ecig_y3__8</td> <td>I forgot</td> </tr> <tr> <td>9</td> <td>why_stop_ecig_y3__9</td> <td>Other</td> </tr> <tr> <td>10</td> <td>why_stop_ecig_y3__10</td> <td>Prefer not to answer</td> </tr> </table>	1	why_stop_ecig_y3__1	I tried and didn't like it	2	why_stop_ecig_y3__2	Adverse side effects	3	why_stop_ecig_y3__3	Family/friends/media recommended not using it	4	why_stop_ecig_y3__4	I didn't understand how to use it	5	why_stop_ecig_y3__5	My provider recommended to stop using it	6	why_stop_ecig_y3__6	My insurance didn't cover it and I couldn't afford it	7	why_stop_ecig_y3__7	I'd rather go to smoking groups	11	why_stop_ecig_y3__11	I didn't want to quit smoking	12	why_stop_ecig_y3__12	It wasn't helping me to quit smoking	8	why_stop_ecig_y3__8	I forgot	9	why_stop_ecig_y3__9	Other	10	why_stop_ecig_y3__10	Prefer not to answer			
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428	start_ecigs_y3 Show the field ONLY if: [use_ecig_y3] = '1' or [use_ecig_y3] = '2' or [use_ecig_y3] = '3' or [use_ecig_y3] = '4'	How many weeks in total did you use e-cigs/vape since we last surveyed you?	notes, Required																																							
429	notes_ecigs_y3 Show the field ONLY if: [treatment_y3(5)] = '1'	Notes for ecig/vaping	notes Custom alignment: LV																																							
430	notes_pills_y3 Show the field ONLY if: [treatment_y3(6)] = '1'	only to be used if participant can not identify medication used to quit smoking Notes about "pills to quit smoking"	notes Custom alignment: LH																																							

431	who_prescribed_pills_y3 Show the field ONLY if: [treatment_y3(6)] = '1'	Who prescribed pills to quit smoking since we last surveyed you? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td> <td>who_prescribed_pills_y3__1</td> <td>Medical doctor/primary care provider (PCP, NP, PA, RN)</td> </tr> <tr> <td>2</td> <td>who_prescribed_pills_y3__2</td> <td>Another specialty</td> </tr> <tr> <td>3</td> <td>who_prescribed_pills_y3__3</td> <td>Psychiatrist/psych nurse</td> </tr> <tr> <td>4</td> <td>who_prescribed_pills_y3__4</td> <td>Other</td> </tr> <tr> <td>5</td> <td>who_prescribed_pills_y3__5</td> <td>I don't know</td> </tr> </table>	1	who_prescribed_pills_y3__1	Medical doctor/primary care provider (PCP, NP, PA, RN)	2	who_prescribed_pills_y3__2	Another specialty	3	who_prescribed_pills_y3__3	Psychiatrist/psych nurse	4	who_prescribed_pills_y3__4	Other	5	who_prescribed_pills_y3__5	I don't know																					
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432	filled_pills_y3 Show the field ONLY if: [treatment_y3(6)] = '1'	Did you fill or get your prescription for pills to quit smoking?	radio, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> <tr> <td>2</td> <td>Prefer not to answer</td> </tr> </table>	1	Yes	0	No	2	Prefer not to answer																														
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0	No																																						
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433	took_pills_y3 Show the field ONLY if: [treatment_y3(6)] = '1'	Did you take any of the pills to quit smoking?	radio, Required <table border="1"> <tr> <td>0</td> <td>No</td> </tr> <tr> <td>1</td> <td>Yes, on and off</td> </tr> <tr> <td>2</td> <td>Yes, still taking it everyday as prescribed</td> </tr> <tr> <td>4</td> <td>Yes, not taking it anymore (i.e. adverse effects)</td> </tr> <tr> <td>5</td> <td>Yes, finished course of treatment</td> </tr> <tr> <td>3</td> <td>Prefer not to answer</td> </tr> </table>	0	No	1	Yes, on and off	2	Yes, still taking it everyday as prescribed	4	Yes, not taking it anymore (i.e. adverse effects)	5	Yes, finished course of treatment	3	Prefer not to answer																								
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3	Prefer not to answer																																						
434	reason_no_pills_y3 Show the field ONLY if: [took_pills_y3] = '0'	why not? Select all that apply	checkbox, Required <table border="1"> <tr> <td>1</td> <td>reason_no_pills_y3__1</td> <td>I didn't want to take more medications</td> </tr> <tr> <td>2</td> <td>reason_no_pills_y3__2</td> <td>Fear of adverse effects</td> </tr> <tr> <td>3</td> <td>reason_no_pills_y3__3</td> <td>Family/friends/media recommended not taking it</td> </tr> <tr> <td>4</td> <td>reason_no_pills_y3__4</td> <td>I took it before and didn't like the effect (their past experiences)</td> </tr> <tr> <td>5</td> <td>reason_no_pills_y3__5</td> <td>I didn't understand what the treatment was about</td> </tr> <tr> <td>6</td> <td>reason_no_pills_y3__6</td> <td>I couldn't afford it</td> </tr> <tr> <td>7</td> <td>reason_no_pills_y3__7</td> <td>I'd rather go to smoking groups</td> </tr> <tr> <td>11</td> <td>reason_no_pills_y3__11</td> <td>I didn't want to quit smoking</td> </tr> <tr> <td>12</td> <td>reason_no_pills_y3__12</td> <td>I didn't think it would help</td> </tr> <tr> <td>8</td> <td>reason_no_pills_y3__8</td> <td>I forgot</td> </tr> <tr> <td>9</td> <td>reason_no_pills_y3__9</td> <td>Other</td> </tr> <tr> <td>10</td> <td>reason_no_pills_y3__10</td> <td>Prefer not to answer</td> </tr> </table>	1	reason_no_pills_y3__1	I didn't want to take more medications	2	reason_no_pills_y3__2	Fear of adverse effects	3	reason_no_pills_y3__3	Family/friends/media recommended not taking it	4	reason_no_pills_y3__4	I took it before and didn't like the effect (their past experiences)	5	reason_no_pills_y3__5	I didn't understand what the treatment was about	6	reason_no_pills_y3__6	I couldn't afford it	7	reason_no_pills_y3__7	I'd rather go to smoking groups	11	reason_no_pills_y3__11	I didn't want to quit smoking	12	reason_no_pills_y3__12	I didn't think it would help	8	reason_no_pills_y3__8	I forgot	9	reason_no_pills_y3__9	Other	10	reason_no_pills_y3__10	Prefer not to answer
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10	reason_no_pills_y3__10	Prefer not to answer																																					
435	other_no_pill_y3 Show the field ONLY if: [reason_no_pills_y3(9)] = '1'	Other	notes, Required Custom alignment: LV																																				
436	time_pills_y3 Show the field ONLY if: [took_pills_y3] = '1' and [took_pills_y3] = '2' and [took_pills_y3] = '3' and [took_pills_y3] = '4' and [took_pills_y3] = '5'	How many weeks in total did you take pills to quit smoking since we last surveyed you?	notes, Required																																				
437	other_use_y3 Show the field ONLY if: [treatment_y3(7)] = '1'	What other method or treatment did you used to quit smoking?	notes, Required Custom alignment: LV																																				
438	other_help_y3 Show the field ONLY if: [treatment_y3(7)] = '1'	Please describe method and length of time participant used/has been using other method	notes, Required Custom alignment: LV																																				

439	illness_smoking_y3	Have you had any of these problems since we last surveyed you? Select all that apply	<div>checkbox, Required</div> <table border="1"> <tr><td>1</td><td>illness_smoking_y3__1</td><td>Heart Disease</td></tr> <tr><td>2</td><td>illness_smoking_y3__2</td><td>Heart Attack</td></tr> <tr><td>3</td><td>illness_smoking_y3__3</td><td>Cancer (Any type)</td></tr> <tr><td>4</td><td>illness_smoking_y3__4</td><td>Emphysema/COPD</td></tr> <tr><td>5</td><td>illness_smoking_y3__5</td><td>Chronic bronchitis</td></tr> <tr><td>6</td><td>illness_smoking_y3__6</td><td>Asthma</td></tr> <tr><td>7</td><td>illness_smoking_y3__7</td><td>Respiratory Problems (can't remember)</td></tr> <tr><td>8</td><td>illness_smoking_y3__8</td><td>Rheumatoid Arthritis</td></tr> <tr><td>9</td><td>illness_smoking_y3__9</td><td>Diabetes (high blood sugar)</td></tr> <tr><td>10</td><td>illness_smoking_y3__10</td><td>Blindness/Cataracts /Macular Degeneration</td></tr> <tr><td>11</td><td>illness_smoking_y3__11</td><td>Tuberculosis</td></tr> <tr><td>12</td><td>illness_smoking_y3__12</td><td>Hypertension (high blood pressure)</td></tr> <tr><td>13</td><td>illness_smoking_y3__13</td><td>Hypotension (low blood pressure)</td></tr> <tr><td>17</td><td>illness_smoking_y3__17</td><td>Pneumonia</td></tr> <tr><td>18</td><td>illness_smoking_y3__18</td><td>Teeth or gum issues</td></tr> <tr><td>14</td><td>illness_smoking_y3__14</td><td>Other</td></tr> <tr><td>15</td><td>illness_smoking_y3__15</td><td>Prefer not to answer</td></tr> <tr><td>16</td><td>illness_smoking_y3__16</td><td>None</td></tr> </table> <div>Custom alignment: LV</div>	1	illness_smoking_y3__1	Heart Disease	2	illness_smoking_y3__2	Heart Attack	3	illness_smoking_y3__3	Cancer (Any type)	4	illness_smoking_y3__4	Emphysema/COPD	5	illness_smoking_y3__5	Chronic bronchitis	6	illness_smoking_y3__6	Asthma	7	illness_smoking_y3__7	Respiratory Problems (can't remember)	8	illness_smoking_y3__8	Rheumatoid Arthritis	9	illness_smoking_y3__9	Diabetes (high blood sugar)	10	illness_smoking_y3__10	Blindness/Cataracts /Macular Degeneration	11	illness_smoking_y3__11	Tuberculosis	12	illness_smoking_y3__12	Hypertension (high blood pressure)	13	illness_smoking_y3__13	Hypotension (low blood pressure)	17	illness_smoking_y3__17	Pneumonia	18	illness_smoking_y3__18	Teeth or gum issues	14	illness_smoking_y3__14	Other	15	illness_smoking_y3__15	Prefer not to answer	16	illness_smoking_y3__16	None
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440	other_health_y3 Show the field ONLY if: [illness_smoking_y3(14)] = '1'	Other health conditions	notes, Required																																																						
441	change_health_y3 Show the field ONLY if: [smoke_change_y3] = '2'	Have you noticed any change in your health since you stopped/decreased your smoking?	notes, Required Custom alignment: LV																																																						
442	sf_1_y3	In general, would you say your health is:	<div>radio, Required</div> <table border="1"> <tr><td>1</td><td>Excellent</td></tr> <tr><td>2</td><td>Very Good</td></tr> <tr><td>3</td><td>Good</td></tr> <tr><td>4</td><td>Fair</td></tr> <tr><td>5</td><td>Poor</td></tr> <tr><td>6</td><td>Prefer not to answer</td></tr> </table> <div>Custom alignment: LV</div>	1	Excellent	2	Very Good	3	Good	4	Fair	5	Poor	6	Prefer not to answer																																										
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443	re_contact_y3	Would you be interested in being contacted for future studies?	<div>yesno, Required</div> <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																																																		
1	Yes																																																								
0	No																																																								
444	comments_y3	GENERAL NOTES	notes Custom alignment: LV																																																						
445	smoking_status_ra_y3	Today, participant is	<div>radio, Required</div> <table border="1"> <tr><td>1</td><td>Smoking</td></tr> <tr><td>2</td><td>Quit for at least 24 hours</td></tr> <tr><td>3</td><td>Quit for 7 days (but less than 14 days)</td></tr> <tr><td>4</td><td>Quit for 14 days (but less than 4 weeks)</td></tr> <tr><td>5</td><td>Quit for 4 weeks or more</td></tr> </table> <div>Custom alignment: LV</div>	1	Smoking	2	Quit for at least 24 hours	3	Quit for 7 days (but less than 14 days)	4	Quit for 14 days (but less than 4 weeks)	5	Quit for 4 weeks or more																																												
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446	smok_stat_based_ra_y3	This determination was based on: Select all that apply	<div>checkbox, Required</div> <table><tr><td>1</td><td>smok_stat_based_ra_y3__1</td><td>Smoking self report (participant)</td></tr><tr><td>2</td><td>smok_stat_based_ra_y3__2</td><td>Exhaled carbon monoxide</td></tr><tr><td>3</td><td>smok_stat_based_ra_y3__3</td><td>Collateral information</td></tr><tr><td>4</td><td>smok_stat_based_ra_y3__4</td><td>Cotinine test</td></tr></table> <div>Custom alignment: LV</div>	1	smok_stat_based_ra_y3__1	Smoking self report (participant)	2	smok_stat_based_ra_y3__2	Exhaled carbon monoxide	3	smok_stat_based_ra_y3__3	Collateral information	4	smok_stat_based_ra_y3__4	Cotinine test																										
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447	staff_completed_survey_y3	Study Staff who completed the survey	<div>radio, Required</div> <table><tr><td>5</td><td>Kelsey Lowman</td></tr><tr><td>10</td><td>Nate Phillips</td></tr><tr><td>11</td><td>Jessica Richman</td></tr><tr><td>12</td><td>Sophia Allen</td></tr><tr><td>13</td><td>Grace Wheeler</td></tr><tr><td>14</td><td>Rachel Plummer</td></tr><tr><td>15</td><td>Gladys Pachas</td></tr><tr><td>7</td><td>Bianca Deeb</td></tr><tr><td>22</td><td>Katey Williams</td></tr><tr><td>8</td><td>Erin Gadbois</td></tr><tr><td>9</td><td>Madeleine Fontaine</td></tr><tr><td>16</td><td>Melissa Maravic</td></tr><tr><td>17</td><td>Randi Schuster</td></tr><tr><td>3</td><td>Mike Vilme</td></tr><tr><td>4</td><td>Chris McGovern</td></tr><tr><td>18</td><td>Meg Donnelly</td></tr><tr><td>19</td><td>Carlos Taveras</td></tr><tr><td>20</td><td>Karlie Marrs</td></tr><tr><td>21</td><td>Nina Cherilus</td></tr></table> <div>Custom alignment: LV</div>	5	Kelsey Lowman	10	Nate Phillips	11	Jessica Richman	12	Sophia Allen	13	Grace Wheeler	14	Rachel Plummer	15	Gladys Pachas	7	Bianca Deeb	22	Katey Williams	8	Erin Gadbois	9	Madeleine Fontaine	16	Melissa Maravic	17	Randi Schuster	3	Mike Vilme	4	Chris McGovern	18	Meg Donnelly	19	Carlos Taveras	20	Karlie Marrs	21	Nina Cherilus
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448	complete_survey_year_3_update_d_complete	Section Header: <i>Form Status</i> Complete?	<div>dropdown</div> <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete																																
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Instrument: Complete Survey Year 3 (complete_survey_year_3)			<div>^ Collapse</div>																																						
449	visit_3	Visit Date	text (datetime_mdy), Required																																						

450	fact_sheet_year_3_v2_v3	<p>Hi</p> <p>This is a confidential survey.</p> <p>We are asking you to participate because you receive psychiatric rehabilitation services from Bay Cove Human Services or Vinfen and last year you completed this brief survey about your smoking</p> <p>We want to learn if teaching primary care doctors about safe and effective use of smoking cessation treatments improves the care they provide to smokers with serious mental illness that they treat.</p> <p>Just like last year's survey, you will answer short questions about your smoking, smoking cessation treatment, age and race. This should take less than 5 minutes to complete. We will ask you to complete this survey and answer these questions one more time next year. Remember, like last year, we are not going to ask you to change your smoking.</p> <p>We will add 5 minutes to your meeting with your psychiatric rehabilitation team to ask you about your smoking. If you find this to be stressful, you can skip any questions that you don't want to answer.</p> <p>You may not receive any direct benefit.</p> <p>It is hoped that the findings from this study will help doctors, insurance companies and agencies such as the Department of Mental Health to provide and pay for the most effective smoking treatments for individuals with serious mental illness.</p> <p>Your participation is completely voluntary and you can stop the brief survey at any time.</p> <p>Your decision to participate or not will not affect in any way the medical care, psychiatric rehabilitation services or DMH services that you receive now or in the future. You do not have to take part in this study. Taking part in this study is up to you. There will be no penalty if you do not participate or if you stop the survey at any time; you will not lose any benefits you receive now or have a right to receive.</p> <p>During this survey, personal information about your health will be collected by your psychiatric rehabilitation team and shared with the MGH researchers who will see the responses identified only by a study number.</p> <p>You will receive \$5 cash for your time once you complete this survey.</p> <p>If you have questions or concerns please contact Madeleine Fontaine at 617- 643-4692.</p> <p>If you would like to speak to someone not involved in this research about your rights as a research subject, or any concerns or complaints you may have about the research, contact the Partners Human Research Committee at 617-424-4100.</p>	descriptive						
451	consent_year_2_v2_v3	<p>Do you want to participate by answering these questions?</p>	<p>yesno, Required</p> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> <p>Custom alignment: LH</p>	1	Yes	0	No		
1	Yes								
0	No								
452	blank_year_3		descriptive						
453	age_year_3 Show the field ONLY if: [consent_year_2_v2_v3] = '1'	Age	text (integer, Min: 19, Max: 90), Required						
454	currently_smoke_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1'	Do you regularly smoke any tobacco products? (I.e. Cigarettes, Cigars, Cigarillos, Rolliies, Mini Cigars, Pipe)	<p>radio, Required</p> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer
1	Yes								
0	No								
2	Prefer not to answer								
455	smoking_habits_year_3 Show the field ONLY if: [currently_smoke_v2_v3] = '1'	Tell me about your smoking. How much do you normally smoke each day?	<p>notes, Required</p> <p>Custom alignment: LH</p>						

456	cpd_3	On average, approximately how many tobacco products do you smoke on a typical day? (I.e. Cigarettes, Cigars, Cigarillos, Rollies, Mini Cigars, Pipe)	radio, Required <table><tr><td>1</td><td>less than 5</td></tr><tr><td>2</td><td>5 - 10</td></tr><tr><td>3</td><td>11 - 20</td></tr><tr><td>4</td><td>21 - 30</td></tr><tr><td>5</td><td>31 or more</td></tr></table> Custom alignment: LV	1	less than 5	2	5 - 10	3	11 - 20	4	21 - 30	5	31 or more					
1	less than 5																	
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457	notes_for_type_of_tobacco_year_3 Show the field ONLY if: [currently_smoke_v2_v3] = '1'	Notes for type of tobacco product	notes, Required Custom alignment: LH															
458	smoke_waking_up_3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [currently_smoke_v2_v3]='1'	How soon after waking up do you smoke your first tobacco product?	radio, Required <table><tr><td>1</td><td>Within 5 minutes</td></tr><tr><td>2</td><td>6-30 minutes</td></tr><tr><td>3</td><td>31-60 minutes</td></tr><tr><td>4</td><td>Greater than 60 minutes</td></tr><tr><td>5</td><td>Prefer not to answer</td></tr></table> Custom alignment: LV	1	Within 5 minutes	2	6-30 minutes	3	31-60 minutes	4	Greater than 60 minutes	5	Prefer not to answer					
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459	able_smoke_awakening_3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [currently_smoke_v2_v3]='1'	If you were able to, would you smoke right after waking up?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer									
1	Yes																	
0	No																	
2	Prefer not to answer																	
460	prevent_smoking_year_3 Show the field ONLY if: [able_smoke_awakening_3] = '1'	What prevents you from smoking upon awakening?	checkbox, Required <table><tr><td>1</td><td>prevent_smoking_year_3__1</td><td>I am not allowed to smoke in my house</td></tr><tr><td>2</td><td>prevent_smoking_year_3__2</td><td>I dont have cigarettes when I get up</td></tr><tr><td>3</td><td>prevent_smoking_year_3__3</td><td>I dont have time</td></tr><tr><td>4</td><td>prevent_smoking_year_3__4</td><td>Other</td></tr><tr><td>5</td><td>prevent_smoking_year_3__5</td><td>Prefer not to answer</td></tr></table>	1	prevent_smoking_year_3__1	I am not allowed to smoke in my house	2	prevent_smoking_year_3__2	I dont have cigarettes when I get up	3	prevent_smoking_year_3__3	I dont have time	4	prevent_smoking_year_3__4	Other	5	prevent_smoking_year_3__5	Prefer not to answer
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5	prevent_smoking_year_3__5	Prefer not to answer																
461	other_1_year_3 Show the field ONLY if: [prevent_smoking_year_3(4)] = '1'	Other	notes, Required Custom alignment: LH															
462	past_smoke_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [currently_smoke_v2_v3]='0'	In the past have you regularly used tobacco products?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer									
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0	No																	
2	Prefer not to answer																	
463	time_quit_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [currently_smoke_v2_v3]='0' and [past_smoke_v2_v3]='1'	please indicate how long you have been quit for (i.e not used tobacco products)	radio, Required <table><tr><td>1</td><td>less than 1 week</td></tr><tr><td>2</td><td>less than 1 month</td></tr><tr><td>3</td><td>less than 3 months</td></tr><tr><td>4</td><td>3 months or more</td></tr></table> Custom alignment: LV	1	less than 1 week	2	less than 1 month	3	less than 3 months	4	3 months or more							
1	less than 1 week																	
2	less than 1 month																	
3	less than 3 months																	
4	3 months or more																	
464	text	 																

466	clinic_location_year_3 Show the field ONLY if: [consent_year_2_v2_v3] = '1'	Where is the clinic located?	text								
467	name_of_pcp_year_3 Show the field ONLY if: [consent_year_2_v2_v3] = '1'	What is your doctor's name?	text								
468	psych_name_year_3 Show the field ONLY if: [consent_year_2_v2_v3] = '1'	What is your psychiatrist's name?	text								
469	seen_doc_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and ([currently_smoke_v2_v3]='1' or [past_smoke_v2_v3]='1')	Have you seen your medical doctor in the past year?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer		
1	Yes										
0	No										
2	Prefer not to answer										
470	doc_know_smoke_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [currently_smoke_v2_v3]='1'	Does your medical doctor know you smoke tobacco products?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>I don't know/Prefer not to answer</td></tr></table>	1	Yes	0	No	2	I don't know/Prefer not to answer		
1	Yes										
0	No										
2	I don't know/Prefer not to answer										
471	used_to_smoke_3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [currently_smoke_v2_v3]='0' and [past_smoke_v2_v3]='1'	Does your medical doctor know you used to smoke?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>I don't know/Prefer not to answer</td></tr></table> Custom alignment: LV	1	Yes	0	No	2	I don't know/Prefer not to answer		
1	Yes										
0	No										
2	I don't know/Prefer not to answer										
472	any_treatment_year_3	In the past year, have you used anything to quit smoking?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer		
1	Yes										
0	No										
2	Prefer not to answer										
473	what_treatment_year_3 Show the field ONLY if: [any_treatment_year_3] = '1'	What did you use?	notes, Required Custom alignment: LH								
474	doc_recommended_quit_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and ([doc_know_smoke_v2_v3]='1' or [used_to_smoke_3]='1') and [see n_doc_v2_v3]='1'	Has your medical doctor recommended that you quit smoking in the past year?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer		
1	Yes										
0	No										
2	Prefer not to answer										
475	often_recommended_quit_v3	How often did your medical doctor recommend you quit smoking?	radio, Required <table><tr><td>1</td><td>At every visit</td></tr><tr><td>2</td><td>At most visits</td></tr><tr><td>3</td><td>At some visits</td></tr><tr><td>4</td><td>Prefer not to answer</td></tr></table> Custom alignment: LV	1	At every visit	2	At most visits	3	At some visits	4	Prefer not to answer
1	At every visit										
2	At most visits										
3	At some visits										
4	Prefer not to answer										
476	quit_line_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1'	Has your medical doctor recommended that you call the quit-line in the past year?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer		
1	Yes										
0	No										
2	Prefer not to answer										
477	doc_group_therapy_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1'	Did your medical doctor arrange for you to attend any smoking group to help you quit smoking in the past year?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer		
1	Yes										
0	No										
2	Prefer not to answer										
478	attend_group_therapy_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_group_therapy_v2_v3]='1'	Did you attend the smoking group?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer		
1	Yes										
0	No										
2	Prefer not to answer										

479	number_therapy_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_group_therapy_v2_v3]='1' and [attend_group_therapy_v2_v3]='1'	How many sessions did you attend?	radio, Required <table border="1"> <tr><td>1</td><td>1-5</td></tr> <tr><td>2</td><td>5-10</td></tr> <tr><td>3</td><td>10-20</td></tr> <tr><td>4</td><td>Prefer not to answer</td></tr> </table> Custom alignment: LV	1	1-5	2	5-10	3	10-20	4	Prefer not to answer																			
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480	blank_year_3a		descriptive																											
481	doc_prescribed_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1'	In the past year, did your medical doctor prescribe medication, or suggest that you use nicotine patch, gum, lozenges or e-cigarettes to help you to quit smoking?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																					
1	Yes																													
0	No																													
2	Prefer not to answer																													
482	treatment_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1'	If yes, which? (Check all that apply)	checkbox, Required <table border="1"> <tr><td>1</td><td>treatment_v2_v3__1</td><td>Varenicline (i.e. Chantix)</td></tr> <tr><td>2</td><td>treatment_v2_v3__2</td><td>Bupropion (i.e. Zyban)</td></tr> <tr><td>3</td><td>treatment_v2_v3__3</td><td>Nicotine Patch</td></tr> <tr><td>4</td><td>treatment_v2_v3__4</td><td>Nicotine Gum/Lozenge</td></tr> <tr><td>5</td><td>treatment_v2_v3__5</td><td>E-cigarettes/Vape</td></tr> <tr><td>6</td><td>treatment_v2_v3__6</td><td>Pills</td></tr> <tr><td>7</td><td>treatment_v2_v3__7</td><td>Other</td></tr> <tr><td>8</td><td>treatment_v2_v3__8</td><td>Refused to answer</td></tr> <tr><td>9</td><td>treatment_v2_v3__9</td><td>Could not remember</td></tr> </table> Custom alignment: LV	1	treatment_v2_v3__1	Varenicline (i.e. Chantix)	2	treatment_v2_v3__2	Bupropion (i.e. Zyban)	3	treatment_v2_v3__3	Nicotine Patch	4	treatment_v2_v3__4	Nicotine Gum/Lozenge	5	treatment_v2_v3__5	E-cigarettes/Vape	6	treatment_v2_v3__6	Pills	7	treatment_v2_v3__7	Other	8	treatment_v2_v3__8	Refused to answer	9	treatment_v2_v3__9	Could not remember
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483	filled_var_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(1)]= '1'	Did you fill the prescription for varenicline (Chantix)?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																					
1	Yes																													
0	No																													
2	Prefer not to answer																													
484	took_var_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(1)]= '1' and [filled_var_v2_v3]='1'	Did you take any of the varenicline (Chantix)?	radio <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> <tr><td>2</td><td>Prefer not to answer</td></tr> </table>	1	Yes	0	No	2	Prefer not to answer																					
1	Yes																													
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2	Prefer not to answer																													

485	<div>reason_no_var_year_3</div> <div>Show the field ONLY if: [took_var_v2_v3] = '0' or [filled_var_v2_v3] = '0'</div>	why not?	<div>checkbox, Required</div> <table><tr><td>1</td><td>reason_no_var_year_3__1</td><td>I don't need to take more medications</td></tr><tr><td>2</td><td>reason_no_var_year_3__2</td><td>Fear of adverse effects</td></tr><tr><td>3</td><td>reason_no_var_year_3__3</td><td>Family/friends/media recommended not taking it</td></tr><tr><td>4</td><td>reason_no_var_year_3__4</td><td>I took it before and didn't like the effect (their past experiences)</td></tr><tr><td>5</td><td>reason_no_var_year_3__5</td><td>I didn't understand what the treatment was about</td></tr><tr><td>6</td><td>reason_no_var_year_3__6</td><td>I couldn't afford it</td></tr><tr><td>7</td><td>reason_no_var_year_3__7</td><td>I'd rather go to smoking groups</td></tr><tr><td>8</td><td>reason_no_var_year_3__8</td><td>I forgot</td></tr><tr><td>9</td><td>reason_no_var_year_3__9</td><td>Other</td></tr><tr><td>10</td><td>reason_no_var_year_3__10</td><td>Prefer not to answer</td></tr><tr><td>11</td><td>reason_no_var_year_3__11</td><td>I didn't want to quit smoking</td></tr></table> <div>Custom alignment: LV</div>	1	reason_no_var_year_3__1	I don't need to take more medications	2	reason_no_var_year_3__2	Fear of adverse effects	3	reason_no_var_year_3__3	Family/friends/media recommended not taking it	4	reason_no_var_year_3__4	I took it before and didn't like the effect (their past experiences)	5	reason_no_var_year_3__5	I didn't understand what the treatment was about	6	reason_no_var_year_3__6	I couldn't afford it	7	reason_no_var_year_3__7	I'd rather go to smoking groups	8	reason_no_var_year_3__8	I forgot	9	reason_no_var_year_3__9	Other	10	reason_no_var_year_3__10	Prefer not to answer	11	reason_no_var_year_3__11	I didn't want to quit smoking
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486	<div>other_no_var_1_year_3</div> <div>Show the field ONLY if: [reason_no_var_year_3(9)] = '1'</div>	Other	<div>notes, Required</div> <div>Custom alignment: LV</div>																																	
487	<div>time_var_v2_v3</div> <div>Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(1)]='1' and [filled_var_v2_v3]='1' and [took_var_v2_v3]='1'</div>	How long did you take varenicline (Chantix)?	<div>radio, Required</div> <table><tr><td>1</td><td>less than 1 week</td></tr><tr><td>2</td><td>less than 1 month</td></tr><tr><td>3</td><td>less than 3 months</td></tr><tr><td>4</td><td>3 months or more</td></tr></table> <div>Custom alignment: LV</div>	1	less than 1 week	2	less than 1 month	3	less than 3 months	4	3 months or more																									
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488	<div>refill_var_v2_v3</div> <div>Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(1)]='1' and [filled_var_v2_v3]='1'</div>	Did you refill your prescription for varenicline (Chantix)?	<div>radio, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer																											
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489	<div>blank_year_3b</div>		<div>descriptive</div>																																	
490	<div>filled_bup_v2_v3</div> <div>Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(2)]='1'</div>	Did you fill the prescription for Bupropion (Zyban)?	<div>radio, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer																											
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491	<div>took_bup_v2_v3</div> <div>Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(2)]='1' and [filled_bup_v2_v3]='1'</div>	Did you take any of the bupropion (Zyban)?	<div>radio, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer																											
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492	<div>reasons_no_bup_year_3</div> <div>Show the field ONLY if: [filled_bup_v2_v3] = '0' and [took_bup_v2_v3] = '0'</div>	why not?	<div>checkbox, Required</div> <table><tr><td>1</td><td>reasons_no_bup_year_3__1</td><td>I don't need to take more medications</td></tr><tr><td>2</td><td>reasons_no_bup_year_3__2</td><td>Fear of adverse effects,</td></tr><tr><td>3</td><td>reasons_no_bup_year_3__3</td><td>Family/friends/media recommended not taking it</td></tr><tr><td>4</td><td>reasons_no_bup_year_3__4</td><td>I took it before and didn't like the effect (their past experiences)</td></tr><tr><td>5</td><td>reasons_no_bup_year_3__5</td><td>I didn't understand what the treatment was about</td></tr><tr><td>6</td><td>reasons_no_bup_year_3__6</td><td>I couldn't afford it</td></tr><tr><td>7</td><td>reasons_no_bup_year_3__7</td><td>I'd rather go to smoking groups</td></tr><tr><td>8</td><td>reasons_no_bup_year_3__8</td><td>I forgot</td></tr><tr><td>9</td><td>reasons_no_bup_year_3__9</td><td>Other</td></tr><tr><td>10</td><td>reasons_no_bup_year_3__10</td><td>Prefer not to answer</td></tr><tr><td>11</td><td>reasons_no_bup_year_3__11</td><td>I didn't want to quit smoking</td></tr></table> <div>Custom alignment: LV</div>	1	reasons_no_bup_year_3__1	I don't need to take more medications	2	reasons_no_bup_year_3__2	Fear of adverse effects,	3	reasons_no_bup_year_3__3	Family/friends/media recommended not taking it	4	reasons_no_bup_year_3__4	I took it before and didn't like the effect (their past experiences)	5	reasons_no_bup_year_3__5	I didn't understand what the treatment was about	6	reasons_no_bup_year_3__6	I couldn't afford it	7	reasons_no_bup_year_3__7	I'd rather go to smoking groups	8	reasons_no_bup_year_3__8	I forgot	9	reasons_no_bup_year_3__9	Other	10	reasons_no_bup_year_3__10	Prefer not to answer	11	reasons_no_bup_year_3__11	I didn't want to quit smoking
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494	<div>time_bup_v2_v3</div> <div>Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(2)]='1' and [filled_bup_v2_v3]='1' and [took_bup_v2_v3]='1'</div>	How long did you take bupropion (Zyban)?	<div>radio, Required</div> <table><tr><td>1</td><td>less than 1 week</td></tr><tr><td>2</td><td>less than 1 month</td></tr><tr><td>3</td><td>less than 3 months</td></tr><tr><td>4</td><td>3 months or more</td></tr></table> <div>Custom alignment: LV</div>	1	less than 1 week	2	less than 1 month	3	less than 3 months	4	3 months or more																									
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495	<div>refill_bup_v2_v3</div> <div>Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(2)]='1' and [filled_bup_v2_v3]='1'</div>	Did you refill your prescription for bupropion (Zyban)?	<div>radio, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer																											
1	Yes																																			
0	No																																			
2	Prefer not to answer																																			
496	blank_year_3c		descriptive																																	
497	<div>took_patch_v2_v3</div> <div>Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(3)]='1'</div>	Did you use nicotine patches?	<div>radio, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer																											
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498	<div>reason_no_patch_year_3</div> <div>Show the field ONLY if: [took_patch_v2_v3] = '0'</div>	<div>why not?</div>	<div>checkbox, Required</div> <table><tr><td>1</td><td>reason_no_patch_year_3__1</td><td>I don't need to take more medications</td></tr><tr><td>2</td><td>reason_no_patch_year_3__2</td><td>Fear of adverse effects,</td></tr><tr><td>3</td><td>reason_no_patch_year_3__3</td><td>Family/friends/media recommended not using it</td></tr><tr><td>4</td><td>reason_no_patch_year_3__4</td><td>I took it before and didn't like the effect (their past experiences)</td></tr><tr><td>5</td><td>reason_no_patch_year_3__5</td><td>I didn't understand what the treatment was about</td></tr><tr><td>6</td><td>reason_no_patch_year_3__6</td><td>I couldn't afford it</td></tr><tr><td>7</td><td>reason_no_patch_year_3__7</td><td>I'd rather go to smoking groups</td></tr><tr><td>8</td><td>reason_no_patch_year_3__8</td><td>I forgot</td></tr><tr><td>9</td><td>reason_no_patch_year_3__9</td><td>Other</td></tr><tr><td>10</td><td>reason_no_patch_year_3__10</td><td>Prefer not to answer</td></tr><tr><td>11</td><td>reason_no_patch_year_3__11</td><td>I didn't want to quit smoking</td></tr></table> <div>Custom alignment: LV</div>	1	reason_no_patch_year_3__1	I don't need to take more medications	2	reason_no_patch_year_3__2	Fear of adverse effects,	3	reason_no_patch_year_3__3	Family/friends/media recommended not using it	4	reason_no_patch_year_3__4	I took it before and didn't like the effect (their past experiences)	5	reason_no_patch_year_3__5	I didn't understand what the treatment was about	6	reason_no_patch_year_3__6	I couldn't afford it	7	reason_no_patch_year_3__7	I'd rather go to smoking groups	8	reason_no_patch_year_3__8	I forgot	9	reason_no_patch_year_3__9	Other	10	reason_no_patch_year_3__10	Prefer not to answer	11	reason_no_patch_year_3__11	I didn't want to quit smoking
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499	<div>other_no_patch_year_3</div> <div>Show the field ONLY if: [reason_no_patch_year_3(9)] = '1'</div>	<div>Other</div>	<div>notes, Required</div> <div>Custom alignment: LV</div>																																	
500	<div>time_patch_v2_v3</div> <div>Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(3)]= '1' and [took_patch_v2_v3]='1'</div>	<div>How long did you use the patch?</div>	<div>radio, Required</div> <table><tr><td>1</td><td>less than 1 week</td></tr><tr><td>2</td><td>less than 1 month</td></tr><tr><td>3</td><td>less than 3 months</td></tr><tr><td>4</td><td>3 months or more</td></tr></table> <div>Custom alignment: LV</div>	1	less than 1 week	2	less than 1 month	3	less than 3 months	4	3 months or more																									
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502	<div>took_gum_v2_v3</div> <div>Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(4)]= '1'</div>	<div>Did you use Nicotine gum or lozenges?</div>	<div>radio, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer																											
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503	reasons_no_gum_year_3 Show the field ONLY if: [took_gum_v2_v3] = '0'	why not?	checkbox, Required <table><tr><td>1</td><td>reasons_no_gum_year_3__1</td><td>I don't need to take more medications</td></tr><tr><td>2</td><td>reasons_no_gum_year_3__2</td><td>Fear of adverse effects,</td></tr><tr><td>3</td><td>reasons_no_gum_year_3__3</td><td>Family/friends/media recommended not using it</td></tr><tr><td>4</td><td>reasons_no_gum_year_3__4</td><td>I took it before and didn't like the effect (their past experiences)</td></tr><tr><td>5</td><td>reasons_no_gum_year_3__5</td><td>I didn't understand what the treatment was about</td></tr><tr><td>6</td><td>reasons_no_gum_year_3__6</td><td>I couldn't afford it</td></tr><tr><td>7</td><td>reasons_no_gum_year_3__7</td><td>I'd rather go to smoking groups</td></tr><tr><td>8</td><td>reasons_no_gum_year_3__8</td><td>I forgot</td></tr><tr><td>9</td><td>reasons_no_gum_year_3__9</td><td>Other</td></tr><tr><td>10</td><td>reasons_no_gum_year_3__10</td><td>Prefer not to answer</td></tr><tr><td>11</td><td>reasons_no_gum_year_3__11</td><td>I didn't want to quit smoking</td></tr></table> Custom alignment: LV	1	reasons_no_gum_year_3__1	I don't need to take more medications	2	reasons_no_gum_year_3__2	Fear of adverse effects,	3	reasons_no_gum_year_3__3	Family/friends/media recommended not using it	4	reasons_no_gum_year_3__4	I took it before and didn't like the effect (their past experiences)	5	reasons_no_gum_year_3__5	I didn't understand what the treatment was about	6	reasons_no_gum_year_3__6	I couldn't afford it	7	reasons_no_gum_year_3__7	I'd rather go to smoking groups	8	reasons_no_gum_year_3__8	I forgot	9	reasons_no_gum_year_3__9	Other	10	reasons_no_gum_year_3__10	Prefer not to answer	11	reasons_no_gum_year_3__11	I didn't want to quit smoking
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505	time_gum_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(4)]='1' and [took_gum_v2_v3]='1'	How long did you use the Nicotine gum or lozenges?	radio, Required <table><tr><td>1</td><td>less than 1 week</td></tr><tr><td>2</td><td>less than 1 month</td></tr><tr><td>3</td><td>less than 3 months</td></tr><tr><td>4</td><td>3 months or more</td></tr></table> Custom alignment: LV	1	less than 1 week	2	less than 1 month	3	less than 3 months	4	3 months or more																									
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506	blank_year_3e		descriptive																																	
507	use_ecigs_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(5)]='1'	Did you use e-cigarettes/vape?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer																											
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508	reasons_no_ecig_year_3 Show the field ONLY if: [use_ecigs_v2_v3] = '0'	why not?	checkbox, Required <table><tr><td>1</td><td>reasons_no_ecig_year_3__1</td><td>I don't need to take more medications</td></tr><tr><td>2</td><td>reasons_no_ecig_year_3__2</td><td>Fear of adverse effects</td></tr><tr><td>3</td><td>reasons_no_ecig_year_3__3</td><td>Family/friends/media recommended not using it</td></tr><tr><td>4</td><td>reasons_no_ecig_year_3__4</td><td>I took it before and didn't like the effect (their past experiences)</td></tr><tr><td>5</td><td>reasons_no_ecig_year_3__5</td><td>I didnt understand what the treatment was about</td></tr><tr><td>6</td><td>reasons_no_ecig_year_3__6</td><td>I couldn't afford it</td></tr><tr><td>7</td><td>reasons_no_ecig_year_3__7</td><td>I'd rather go to smoking groups</td></tr><tr><td>8</td><td>reasons_no_ecig_year_3__8</td><td>I forgot</td></tr><tr><td>9</td><td>reasons_no_ecig_year_3__9</td><td>Other</td></tr><tr><td>10</td><td>reasons_no_ecig_year_3__10</td><td>Prefer not to answer</td></tr><tr><td>11</td><td>reasons_no_ecig_year_3__11</td><td>I didn't want to quit smoking</td></tr></table> Custom alignment: LV	1	reasons_no_ecig_year_3__1	I don't need to take more medications	2	reasons_no_ecig_year_3__2	Fear of adverse effects	3	reasons_no_ecig_year_3__3	Family/friends/media recommended not using it	4	reasons_no_ecig_year_3__4	I took it before and didn't like the effect (their past experiences)	5	reasons_no_ecig_year_3__5	I didnt understand what the treatment was about	6	reasons_no_ecig_year_3__6	I couldn't afford it	7	reasons_no_ecig_year_3__7	I'd rather go to smoking groups	8	reasons_no_ecig_year_3__8	I forgot	9	reasons_no_ecig_year_3__9	Other	10	reasons_no_ecig_year_3__10	Prefer not to answer	11	reasons_no_ecig_year_3__11	I didn't want to quit smoking
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510	time_ecigs_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(5)]='1' and [use_ecigs_v2_v3]='1'	How long did you use e-cigarettes/vape?	radio, Required <table><tr><td>1</td><td>less than 1 week</td></tr><tr><td>2</td><td>less than 1 month</td></tr><tr><td>3</td><td>less than 3 months</td></tr><tr><td>4</td><td>3 months or more</td></tr></table> Custom alignment: LV	1	less than 1 week	2	less than 1 month	3	less than 3 months	4	3 months or more																									
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511	filled_pills_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(6)]='1'	Did you fill the prescription for pills to quit smoking?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer																											
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512	took_pills_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(6)]='1' and [filled_pills_v2_v3]='1'	Did you take any of the pills to quit smoking?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>2</td><td>Prefer not to answer</td></tr></table>	1	Yes	0	No	2	Prefer not to answer																											
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513	reason_smoking_gettin2_ce7_year_3 r_3 Show the field ONLY if: [took_pills_v2_v3] = '0'	why not?	checkbox, Required	
			1	reason_smoking_gettin2_ce7_year_3__1 I don't need to take more medications
			2	reason_smoking_gettin2_ce7_year_3__2 Fear of adverse effects,
			3	reason_smoking_gettin2_ce7_year_3__3 Family/friends /media recommended not using it
			4	reason_smoking_gettin2_ce7_year_3__4 I took it before and didn't like the effect (their past experiences)
			5	reason_smoking_gettin2_ce7_year_3__5 I didn't understand what the treatment was about
			6	reason_smoking_gettin2_ce7_year_3__6 I couldn't afford it
			7	reason_smoking_gettin2_ce7_year_3__7 I'd rather go to smoking groups
			8	reason_smoking_gettin2_ce7_year_3__8 I forgot
			9	reason_smoking_gettin2_ce7_year_3__9 Other
			10	reason_smoking_gettin2_ce7_year_3__10 Prefer not to answer
			11	reason_smoking_gettin2_ce7_year_3__11 I didn't want to quit smoking
			Custom alignment: LV	
514	other_no_pill_year_3 Show the field ONLY if: [reason_smoking_gettin2_ce7_year_3(9)] = '1'	Other	notes, Required Custom alignment: LV	
515	blank_year_3f		descriptive	
516	time_pills_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(6)]='1' and [filled_pills_v2_v3]='1' and [took_pills_v2_v3]='1'	How long did you use pills to quit smoking?	radio, Required	
			1	less than 1 week
			2	less than 1 month
			3	less than 3 months
			4	3 months or more
			Custom alignment: LV	
517	refill_pills_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(6)]='1' and [filled_pills_v2_v3]='1'	Did you refill your prescription for pills to quit smoking?	radio, Required	
			1	Yes
			0	No
			2	Prefer not to answer
518	other_help_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(7)]='1'	What other method or treatment did you used to quit smoking?	notes, Required Custom alignment: LV	

519	other_use_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and [doc_recommended_quit_v2_v3]='1' and [doc_prescribed_v2_v3]='1' and [treatment_v2_v3(7)]= '1' and [other_v2]='1'	How long did you use this other method for?	radio, Required <table border="1"> <tr><td>1</td><td>less than 1 week</td></tr> <tr><td>2</td><td>less than 1 month</td></tr> <tr><td>3</td><td>less than 3 months</td></tr> <tr><td>4</td><td>3 months or more</td></tr> </table> Custom alignment: LV	1	less than 1 week	2	less than 1 month	3	less than 3 months	4	3 months or more																																											
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520	health_issues_year_3 Show the field ONLY if: [consent_year_2_v2_v3] = '1'	Do you have any health issues? if yes, which ones?	notes, Required																																																			
521	illness_smoking_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1' and ([currently_smoke_v2_v3]='1' or [past_smoke_v2_v3]='1')	Have you had any of these health conditions, either in the past or currently?	checkbox, Required <table border="1"> <tr><td>1</td><td>illness_smoking_v2_v3__1</td><td>Heart Disease</td></tr> <tr><td>2</td><td>illness_smoking_v2_v3__2</td><td>Heart Attack</td></tr> <tr><td>3</td><td>illness_smoking_v2_v3__3</td><td>Cancer (Any type)</td></tr> <tr><td>4</td><td>illness_smoking_v2_v3__4</td><td>Emphysema</td></tr> <tr><td>5</td><td>illness_smoking_v2_v3__5</td><td>Chronis bronchitis</td></tr> <tr><td>6</td><td>illness_smoking_v2_v3__6</td><td>Asthma</td></tr> <tr><td>7</td><td>illness_smoking_v2_v3__7</td><td>Respiratory Problems (can't remember)</td></tr> <tr><td>8</td><td>illness_smoking_v2_v3__8</td><td>Rheumatoid Arthritis</td></tr> <tr><td>9</td><td>illness_smoking_v2_v3__9</td><td>Diabetes (high blood sugar)</td></tr> <tr><td>10</td><td>illness_smoking_v2_v3__10</td><td>Blindness/Cataracts /Macular Degeneration</td></tr> <tr><td>11</td><td>illness_smoking_v2_v3__11</td><td>Tuberculosis</td></tr> <tr><td>12</td><td>illness_smoking_v2_v3__12</td><td>Hypertension (high blood pressure)</td></tr> <tr><td>13</td><td>illness_smoking_v2_v3__13</td><td>Hypotension (low blood pressure)</td></tr> <tr><td>14</td><td>illness_smoking_v2_v3__14</td><td>Other</td></tr> <tr><td>15</td><td>illness_smoking_v2_v3__15</td><td>Prefer not to answer</td></tr> <tr><td>16</td><td>illness_smoking_v2_v3__16</td><td>None</td></tr> <tr><td>17</td><td>illness_smoking_v2_v3__17</td><td>Pneumonia</td></tr> </table> Custom alignment: LV	1	illness_smoking_v2_v3__1	Heart Disease	2	illness_smoking_v2_v3__2	Heart Attack	3	illness_smoking_v2_v3__3	Cancer (Any type)	4	illness_smoking_v2_v3__4	Emphysema	5	illness_smoking_v2_v3__5	Chronis bronchitis	6	illness_smoking_v2_v3__6	Asthma	7	illness_smoking_v2_v3__7	Respiratory Problems (can't remember)	8	illness_smoking_v2_v3__8	Rheumatoid Arthritis	9	illness_smoking_v2_v3__9	Diabetes (high blood sugar)	10	illness_smoking_v2_v3__10	Blindness/Cataracts /Macular Degeneration	11	illness_smoking_v2_v3__11	Tuberculosis	12	illness_smoking_v2_v3__12	Hypertension (high blood pressure)	13	illness_smoking_v2_v3__13	Hypotension (low blood pressure)	14	illness_smoking_v2_v3__14	Other	15	illness_smoking_v2_v3__15	Prefer not to answer	16	illness_smoking_v2_v3__16	None	17	illness_smoking_v2_v3__17	Pneumonia
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16	illness_smoking_v2_v3__16	None																																																				
17	illness_smoking_v2_v3__17	Pneumonia																																																				
522	other_health_year_3 Show the field ONLY if: [consent_year_2_v2_v3] = '1' and [illness_smoking_v2_v3(14)] = '1'	Other Health conditions	notes, Required Custom alignment: LV																																																			
523	blank_year_3g		descriptive																																																			
524	sf_1_v2_v3 Show the field ONLY if: [consent_year_2_v2_v3]='1'	In general, would you say your health is:	radio, Required <table border="1"> <tr><td>1</td><td>Excellent</td></tr> <tr><td>2</td><td>Very Good</td></tr> <tr><td>3</td><td>Good</td></tr> <tr><td>4</td><td>Fair</td></tr> <tr><td>5</td><td>Poor</td></tr> <tr><td>6</td><td>Prefer not to answer</td></tr> </table> Custom alignment: LV	1	Excellent	2	Very Good	3	Good	4	Fair	5	Poor	6	Prefer not to answer																																							
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525	staff_completed_survey_3	Study staff who completed the survey	<div>radio, Required</div> <table><tr><td>5</td><td>Kelsey Lowman</td></tr><tr><td>10</td><td>Nate Phillips</td></tr><tr><td>11</td><td>Jessica Richman</td></tr><tr><td>12</td><td>Sophia Allen</td></tr><tr><td>13</td><td>Grace Wheeler</td></tr><tr><td>14</td><td>Rachel Plummer</td></tr><tr><td>15</td><td>Gladys Pachas</td></tr><tr><td>16</td><td>Melissa Maravic</td></tr><tr><td>17</td><td>Randi Schuster</td></tr><tr><td>9</td><td>Madeleine Fontaine</td></tr><tr><td>3</td><td>Mike Vilme</td></tr><tr><td>4</td><td>Chris McGovern</td></tr><tr><td>7</td><td>Bianca Deeb</td></tr><tr><td>8</td><td>Erin Gadbois</td></tr></table> <div>Custom alignment: LV</div>	5	Kelsey Lowman	10	Nate Phillips	11	Jessica Richman	12	Sophia Allen	13	Grace Wheeler	14	Rachel Plummer	15	Gladys Pachas	16	Melissa Maravic	17	Randi Schuster	9	Madeleine Fontaine	3	Mike Vilme	4	Chris McGovern	7	Bianca Deeb	8	Erin Gadbois
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526	complete_survey_year_3_complete	Section Header: <i>Form Status</i> Complete?	<div>dropdown</div> <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete																						
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Instrument: CO measurement Y2 UPDATED (co_measurement_y2) <div>^ Collapse</div>																															
527	expired_co_y2	Expired CO reading (ppm)	text (integer, Min: 0, Max: 100), Required																												
528	time_co_y2	Time of CO reading	text (datetime_seconds_mdy), Required																												
529	co_monitor_y2	CO Monitor ID	<div>radio, Required</div> <table><tr><td>1</td><td>A</td></tr><tr><td>2</td><td>B</td></tr><tr><td>3</td><td>C</td></tr><tr><td>4</td><td>D</td></tr><tr><td>5</td><td>E</td></tr><tr><td>6</td><td>F</td></tr><tr><td>7</td><td>G</td></tr><tr><td>8</td><td>H</td></tr><tr><td>9</td><td>I</td></tr><tr><td>10</td><td>J</td></tr></table> <div>Custom alignment: RH</div>	1	A	2	B	3	C	4	D	5	E	6	F	7	G	8	H	9	I	10	J								
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530	last_tobacco_prod_y2	Time of last tobacco product	text (datetime_mdy), Required Custom alignment: RH																												
531	cpd_today_y2	Number of tobacco products smoked today	text, Required Custom alignment: RH																												
532	cpd_y2	Average number of tobacco products per day	text, Required																												
533	notes_co_y2	Section Header: <i>Now that you completed the CO measurement, go back to the Survey Y2 and complete the determination of smoking status</i> Notes	notes Custom alignment: LH																												

534	co_staff_y2	Study Staff	radio, Required <table border="1"> <tr><td>1</td><td>Eve Manghis</td></tr> <tr><td>2</td><td>Mike Vilme</td></tr> <tr><td>3</td><td>Chris McGovern</td></tr> <tr><td>4</td><td>Kelsey Lowman</td></tr> <tr><td>5</td><td>Hannah Broos</td></tr> <tr><td>6</td><td>Alyssa Pingitore</td></tr> <tr><td>7</td><td>Bianca Deeb</td></tr> <tr><td>8</td><td>Erin Gadbois</td></tr> <tr><td>9</td><td>Madeleine Fontaine</td></tr> <tr><td>10</td><td>Nate Phillips</td></tr> <tr><td>11</td><td>Sophia Allen</td></tr> <tr><td>12</td><td>Jessica Richman</td></tr> <tr><td>13</td><td>Grace Wheeler</td></tr> <tr><td>14</td><td>Rachel Plummer</td></tr> <tr><td>15</td><td>Gladys Pachas</td></tr> <tr><td>16</td><td>Melissa Maravic</td></tr> <tr><td>17</td><td>Randi Schuster</td></tr> </table> Custom alignment: LV	1	Eve Manghis	2	Mike Vilme	3	Chris McGovern	4	Kelsey Lowman	5	Hannah Broos	6	Alyssa Pingitore	7	Bianca Deeb	8	Erin Gadbois	9	Madeleine Fontaine	10	Nate Phillips	11	Sophia Allen	12	Jessica Richman	13	Grace Wheeler	14	Rachel Plummer	15	Gladys Pachas	16	Melissa Maravic	17	Randi Schuster
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535	co_measurement_y2_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																												
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543	co_staff_y3	Study Staff	radio, Required <table><tr><td>5</td><td>Kelsey Lowman</td></tr><tr><td>10</td><td>Nate Phillips</td></tr><tr><td>11</td><td>Jessica Richman</td></tr><tr><td>12</td><td>Sophia Allen</td></tr><tr><td>13</td><td>Grace Wheeler</td></tr><tr><td>14</td><td>Rachel Plummer</td></tr><tr><td>15</td><td>Gladys Pachas</td></tr><tr><td>7</td><td>Bianca Deeb</td></tr><tr><td>22</td><td>Katey Williams</td></tr><tr><td>8</td><td>Erin Gadbois</td></tr><tr><td>9</td><td>Madeleine Fontaine</td></tr><tr><td>16</td><td>Melissa Maravic</td></tr><tr><td>17</td><td>Randi Schuster</td></tr><tr><td>3</td><td>Mike Vilme</td></tr><tr><td>4</td><td>Chris McGovern</td></tr><tr><td>18</td><td>Meg Donnelly</td></tr><tr><td>19</td><td>Carlos Taveras</td></tr><tr><td>20</td><td>Karlie Marrs</td></tr><tr><td>21</td><td>Nina Cherilus</td></tr></table> <div>Custom alignment: LV</div>	5	Kelsey Lowman	10	Nate Phillips	11	Jessica Richman	12	Sophia Allen	13	Grace Wheeler	14	Rachel Plummer	15	Gladys Pachas	7	Bianca Deeb	22	Katey Williams	8	Erin Gadbois	9	Madeleine Fontaine	16	Melissa Maravic	17	Randi Schuster	3	Mike Vilme	4	Chris McGovern	18	Meg Donnelly	19	Carlos Taveras	20	Karlie Marrs	21	Nina Cherilus
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Instrument: **Cotinine Saliva Test Y3** (cotinine_saliva_test_y3)

^ Collapse

545	self_report_abstinence	Did participant self-report abstinence (quit for at least 7 days)?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No
1	Yes						
0	No						
546	co_greater_5	Did participant have a CO reading ≥ 6?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No
1	Yes						
0	No						
547	nrt_use	Is participant using NRT? (i.e. gum, patch, lozenges, e-cigs)	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No
1	Yes						
0	No						
548	cot_collected Show the field ONLY if: [self_report_abstinence]='1' and [co_greater_5]='1' and [nrt_use]='0'	Was a saliva sample collected for cotinine analysis?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr></table> <div>Custom alignment: RH</div>	1	Yes	2	No
1	Yes						
2	No						
549	why_no_cotinine Show the field ONLY if: [cot_collected]='0'	Why not?	notes				
550	cot_consent Show the field ONLY if: [cot_collected]='1'	Informed Consent	descriptive				

551	<div>cot_consent_checklist</div> <div>Show the field ONLY if: [cot_collected]='1'</div>	Obtaining informed consent (check all that apply):	<div>checkbox, Required</div> <table><tr><td>1</td><td>cot_consent_checklist__1</td><td>Discussed, explained and reviewed the consent form with subject.</td></tr><tr><td>2</td><td>cot_consent_checklist__2</td><td>All of the subject's questions were answered/concerns addressed.</td></tr><tr><td>3</td><td>cot_consent_checklist__3</td><td>Participant and member of study staff signed consent form.</td></tr><tr><td>4</td><td>cot_consent_checklist__4</td><td>A copy of signed ICF was given to the subject.</td></tr></table>	1	cot_consent_checklist__1	Discussed, explained and reviewed the consent form with subject.	2	cot_consent_checklist__2	All of the subject's questions were answered/concerns addressed.	3	cot_consent_checklist__3	Participant and member of study staff signed consent form.	4	cot_consent_checklist__4	A copy of signed ICF was given to the subject.				
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4	cot_consent_checklist__4	A copy of signed ICF was given to the subject.																	
552	<div>cot_icf_time</div> <div>Show the field ONLY if: [cot_collected]='1'</div>	When was the copy of ICF given to the subject:	text (datetime_mdy), Required																
553	<div>cot_initials</div> <div>Show the field ONLY if: [cot_collected]='1'</div>	Initials of study staff who obtained informed consent:	text, Required																
554	<div>cot_header</div> <div>Show the field ONLY if: [cot_collected]='1'</div>	Saliva Collection and Cotinine Analysis	descriptive																
555	<div>cot_time</div> <div>Show the field ONLY if: [cot_collected] = '1'</div>	Time of cotinine saliva collection:	text (datetime_dmy), Required Custom alignment: RH																
556	<div>cot_zone</div> <div>Show the field ONLY if: [cot_collected] = '1'</div>	Cotinine zone #:	<div>dropdown, Required</div> <table><tr><td>1</td><td>0</td></tr><tr><td>2</td><td>1</td></tr><tr><td>3</td><td>2</td></tr><tr><td>4</td><td>3</td></tr><tr><td>5</td><td>4</td></tr><tr><td>6</td><td>5</td></tr><tr><td>7</td><td>6</td></tr><tr><td>8</td><td>not readable</td></tr></table> <div>Custom alignment: RH</div>	1	0	2	1	3	2	4	3	5	4	6	5	7	6	8	not readable
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5	4																		
6	5																		
7	6																		
8	not readable																		
557	<div>cot_lot_exp</div> <div>Show the field ONLY if: [cot_collected]='1'</div>	Current lot #: XE5346 Current expiration: 04/2020	descriptive																
558	<div>cot_lot</div> <div>Show the field ONLY if: [cot_collected] = '1'</div>	Device lot number:	text Custom alignment: RH																
559	<div>cot_expiration</div> <div>Show the field ONLY if: [cot_collected] = '1'</div>	Device expiration date:	text, Required Custom alignment: RH																
560	<div>cot_notes</div>	Notes:	notes																
561	<div>cot_pay</div> <div>Show the field ONLY if: [cot_collected]='1'</div>	Was the participant paid \$5 for providing a saliva sample?	<div>radio, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr></table> <div>Custom alignment: RH</div>	1	Yes	2	No												
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2	No																		

562	<div>cot_staff</div> <div>Show the field ONLY if: [cot_collected]='1'</div>	Study Staff who collected cotinine & paid participant:	<div>dropdown, Required</div> <table><tr><td>5</td><td>Kelsey Lowman</td></tr><tr><td>10</td><td>Nate Phillips</td></tr><tr><td>11</td><td>Jessica Richman</td></tr><tr><td>12</td><td>Sophia Allen</td></tr><tr><td>13</td><td>Grace Wheeler</td></tr><tr><td>14</td><td>Rachel Plummer</td></tr><tr><td>15</td><td>Gladys Pachas</td></tr><tr><td>7</td><td>Bianca Deeb</td></tr><tr><td>22</td><td>Katey Williams</td></tr><tr><td>8</td><td>Erin Gadbois</td></tr><tr><td>9</td><td>Madeleine Fontaine</td></tr><tr><td>16</td><td>Melissa Maravic</td></tr><tr><td>17</td><td>Randi Schuster</td></tr><tr><td>3</td><td>Mike Vilme</td></tr><tr><td>4</td><td>Chris McGovern</td></tr><tr><td>18</td><td>Meg Donnelly</td></tr><tr><td>19</td><td>Carlos Taveras</td></tr><tr><td>20</td><td>Karlie Marrs</td></tr><tr><td>21</td><td>Nina Cherilus</td></tr></table>	5	Kelsey Lowman	10	Nate Phillips	11	Jessica Richman	12	Sophia Allen	13	Grace Wheeler	14	Rachel Plummer	15	Gladys Pachas	7	Bianca Deeb	22	Katey Williams	8	Erin Gadbois	9	Madeleine Fontaine	16	Melissa Maravic	17	Randi Schuster	3	Mike Vilme	4	Chris McGovern	18	Meg Donnelly	19	Carlos Taveras	20	Karlie Marrs	21	Nina Cherilus
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564	<div>thank_you_y3</div>	<div>Thank you so much for your participation.</div> <div>You will receive \$5 cash for your time now</div>	<div>descriptive</div>																																						
565	<div>payment_receipt_y3</div>	<div>Did you receive \$5 cash for your time?</div>	<div>radio, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> <div>Custom alignment: LH</div>	1	Yes	0	No																																		
1	Yes																																								
0	No																																								

566	person_who_reimbursed_y2_3	Name of study staff who reimbursed the participant:	<div>radio, Required</div> <table><tr><td>5</td><td>Kelsey Lowman</td></tr><tr><td>10</td><td>Nate Phillips</td></tr><tr><td>11</td><td>Jessica Richman</td></tr><tr><td>12</td><td>Sophia Allen</td></tr><tr><td>13</td><td>Grace Wheeler</td></tr><tr><td>14</td><td>Rachel Plummer</td></tr><tr><td>15</td><td>Gladys Pachas</td></tr><tr><td>7</td><td>Bianca Deeb</td></tr><tr><td>22</td><td>Katey Williams</td></tr><tr><td>8</td><td>Erin Gadbois</td></tr><tr><td>9</td><td>Madeleine Fontaine</td></tr><tr><td>16</td><td>Melissa Maravic</td></tr><tr><td>17</td><td>Randi Schuster</td></tr><tr><td>3</td><td>Mike Vilme</td></tr><tr><td>4</td><td>Chris McGovern</td></tr><tr><td>18</td><td>Meg Donnelly</td></tr><tr><td>19</td><td>Carlos Taveras</td></tr><tr><td>20</td><td>Karlie Marrs</td></tr><tr><td>21</td><td>Nina Cherilus</td></tr></table> <div>Custom alignment: LV</div>	5	Kelsey Lowman	10	Nate Phillips	11	Jessica Richman	12	Sophia Allen	13	Grace Wheeler	14	Rachel Plummer	15	Gladys Pachas	7	Bianca Deeb	22	Katey Williams	8	Erin Gadbois	9	Madeleine Fontaine	16	Melissa Maravic	17	Randi Schuster	3	Mike Vilme	4	Chris McGovern	18	Meg Donnelly	19	Carlos Taveras	20	Karlie Marrs	21	Nina Cherilus
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571	person_who_reimbursed_y2	Name of study staff who reimbursed the participant:	radio, Required <table border="1"> <tr><td>1</td><td>Eve Manghis</td></tr> <tr><td>2</td><td>Mike Vilme</td></tr> <tr><td>3</td><td>Chris McGovern</td></tr> <tr><td>4</td><td>Kelsey Lowman</td></tr> <tr><td>5</td><td>Hannah Broos</td></tr> <tr><td>6</td><td>Alyssa Pingitore</td></tr> <tr><td>7</td><td>Bianca Deeb</td></tr> <tr><td>8</td><td>Erin Gadbois</td></tr> <tr><td>9</td><td>Madeleine Fontaine</td></tr> <tr><td>10</td><td>Nate Phillips</td></tr> <tr><td>11</td><td>Sophia Allen</td></tr> <tr><td>12</td><td>Jessica Richman</td></tr> <tr><td>13</td><td>Grace Wheeler</td></tr> <tr><td>14</td><td>Rachel Plummer</td></tr> <tr><td>15</td><td>Gladys Pachas</td></tr> <tr><td>16</td><td>Melissa Maravic</td></tr> <tr><td>17</td><td>Randi Schuster</td></tr> </table> Custom alignment: LV	1	Eve Manghis	2	Mike Vilme	3	Chris McGovern	4	Kelsey Lowman	5	Hannah Broos	6	Alyssa Pingitore	7	Bianca Deeb	8	Erin Gadbois	9	Madeleine Fontaine	10	Nate Phillips	11	Sophia Allen	12	Jessica Richman	13	Grace Wheeler	14	Rachel Plummer	15	Gladys Pachas	16	Melissa Maravic	17	Randi Schuster
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572	notes_payment_y2	Notes	notes Custom alignment: LV																																		
573	reimbursement_y2_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																												
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574	expired_co	Expired CO reading (ppm)	text (integer, Min: 0, Max: 100), Required																																		
575	time_co	Time of CO reading	text (datetime_seconds_mdy), Required																																		
576	co_monitor	CO Monitor ID	radio, Required <table border="1"> <tr><td>1</td><td>A</td></tr> <tr><td>2</td><td>B</td></tr> <tr><td>3</td><td>C</td></tr> <tr><td>4</td><td>D</td></tr> <tr><td>5</td><td>E</td></tr> <tr><td>6</td><td>F</td></tr> <tr><td>7</td><td>G</td></tr> <tr><td>8</td><td>H</td></tr> <tr><td>9</td><td>I</td></tr> <tr><td>10</td><td>J</td></tr> </table> Custom alignment: RH	1	A	2	B	3	C	4	D	5	E	6	F	7	G	8	H	9	I	10	J														
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577	last_cigarette	Time of last cigarette	text (datetime_mdy), Required Custom alignment: RH																																		
578	notes_co	Notes	notes Custom alignment: LH																																		

579	co_staff	Study Staff	radio, Required <table border="1"> <tr><td>1</td><td>Eve Manghis</td></tr> <tr><td>2</td><td>Madeleine Fontaine</td></tr> <tr><td>3</td><td>Mike Vilme</td></tr> <tr><td>4</td><td>Chris McGovern</td></tr> <tr><td>5</td><td>Lara Sullivan</td></tr> <tr><td>6</td><td>Bianca Deeb</td></tr> <tr><td>7</td><td>Shannon Brick</td></tr> <tr><td>8</td><td>Kelsey Lowman</td></tr> <tr><td>9</td><td>Hannah Broos</td></tr> <tr><td>10</td><td>Karlie Marrs</td></tr> <tr><td>11</td><td>Nina Cherilus</td></tr> <tr><td>12</td><td>Kara Santacroce</td></tr> <tr><td>13</td><td>Other</td></tr> </table> Custom alignment: LV	1	Eve Manghis	2	Madeleine Fontaine	3	Mike Vilme	4	Chris McGovern	5	Lara Sullivan	6	Bianca Deeb	7	Shannon Brick	8	Kelsey Lowman	9	Hannah Broos	10	Karlie Marrs	11	Nina Cherilus	12	Kara Santacroce	13	Other
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580	other_staff_co Show the field ONLY if: [co_staff] = '13'	Name of Other Staff	text, Required Custom alignment: LV																										
581	co_measurement_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																				
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Instrument: Reimbursement (reimbursement) ^ Collapse																													
582	thank_you Show the field ONLY if: ([sf_1]<>" or [sf_1_v2]<>" or [sf_1_v2_v3]<>")	Thank you so much for your participation. You will receive \$5 cash for your time now	descriptive																										
583	payment_receipt Show the field ONLY if: ([sf_1]<>" or [sf_1_v2]<>" or [sf_1_v2_v3]<>")	Did you receive \$5 cash for your time?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: LH	1	Yes	0	No																						
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584	person_who_reimbursed	Name of study staff who reimbursed the participant:	radio, Required <table border="1"> <tr><td>1</td><td>Eve Manghis</td></tr> <tr><td>2</td><td>Madeleine Fontaine</td></tr> <tr><td>3</td><td>Mike Vilme</td></tr> <tr><td>4</td><td>Chris McGovern</td></tr> <tr><td>5</td><td>Lara Sullivan</td></tr> <tr><td>6</td><td>Bianca Deeb</td></tr> <tr><td>7</td><td>Shannon Brick</td></tr> <tr><td>8</td><td>Kelsey Lowman</td></tr> <tr><td>9</td><td>Hannah Broos</td></tr> <tr><td>10</td><td>Karlie Marrs</td></tr> <tr><td>11</td><td>Nina Cherilus</td></tr> <tr><td>12</td><td>Kara Santacroce</td></tr> <tr><td>13</td><td>Other</td></tr> </table> Custom alignment: LV	1	Eve Manghis	2	Madeleine Fontaine	3	Mike Vilme	4	Chris McGovern	5	Lara Sullivan	6	Bianca Deeb	7	Shannon Brick	8	Kelsey Lowman	9	Hannah Broos	10	Karlie Marrs	11	Nina Cherilus	12	Kara Santacroce	13	Other
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585	other_staff_reimbursement Show the field ONLY if: [person_who_reimbursed] = '13'	Name of Other Staff	radio, Required Custom alignment: LV																										

586	reimbursement_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																																				
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Instrument: Day Of Visit Form (day_of_visit_form) ^ Collapse																																													
587	visit_number Show the field ONLY if: ([consent_year_1]<>" or [consent_year_2_v2]<>" or [consent_year_2_v2_v3]<>")	Which visit is this?	dropdown (autocomplete), Required <table border="1"> <tr><td>1</td><td>Year 1</td></tr> <tr><td>2</td><td>Year 2</td></tr> <tr><td>3</td><td>Year 3</td></tr> </table>	1	Year 1	2	Year 2	3	Year 3																																				
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588	visit_date	Date of encounter	text (datetime_seconds_mdy), Required																																										
589	location	Location of Data Collection	text, Required																																										
590	visit_complete	Visit Complete? <i>If unable to complete full data collection, please update contact log accordingly.</i>	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>2</td><td>No - Partial Data Collection</td></tr> </table>	1	Yes	2	No - Partial Data Collection																																						
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591	iap	Assessment completed at IAP meeting?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH	1	Yes	0	No																																						
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592	did_the_participant_receiv	Did the participant receive the \$5?	radio, Required <table border="1"> <tr><td>1</td><td>yes</td></tr> <tr><td>0</td><td>no</td></tr> </table>	1	yes	0	no																																						
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593	final_disposition	Final disposition	checkbox, Required <table border="1"> <tr><td>1</td><td>final_disposition__1</td><td>Contacted - Survey Complete</td></tr> <tr><td>2</td><td>final_disposition__2</td><td>Contacted - Ineligible</td></tr> <tr><td>3</td><td>final_disposition__3</td><td>Contacted - Refused - Check Later</td></tr> <tr><td>4</td><td>final_disposition__4</td><td>Contacted - Refused - DO NOT Check Later</td></tr> <tr><td>5</td><td>final_disposition__5</td><td>Contacted - Temporarily Not Ready to Participate - Check Later Recontact to Finish</td></tr> <tr><td>6</td><td>final_disposition__6</td><td>Contacted - Started Survey But Did Not Complete - Recontact to Finish</td></tr> <tr><td>7</td><td>final_disposition__7</td><td>Did Not Contact - Ineligible</td></tr> <tr><td>8</td><td>final_disposition__8</td><td>Did Not Contact - Refused - Check Later</td></tr> <tr><td>9</td><td>final_disposition__9</td><td>Did Not Contact - Refused - DO NOT Check Later</td></tr> <tr><td>10</td><td>final_disposition__10</td><td>Did Not Contact - Temporarily Not Ready to Participate - Check Later Recontact to Finish</td></tr> <tr><td>11</td><td>final_disposition__11</td><td>Lost to Follow-up</td></tr> <tr><td>12</td><td>final_disposition__12</td><td>Dropped Out</td></tr> <tr><td>13</td><td>final_disposition__13</td><td>CO completed</td></tr> <tr><td>14</td><td>final_disposition__14</td><td>Couldn't complete CO</td></tr> </table>	1	final_disposition__1	Contacted - Survey Complete	2	final_disposition__2	Contacted - Ineligible	3	final_disposition__3	Contacted - Refused - Check Later	4	final_disposition__4	Contacted - Refused - DO NOT Check Later	5	final_disposition__5	Contacted - Temporarily Not Ready to Participate - Check Later Recontact to Finish	6	final_disposition__6	Contacted - Started Survey But Did Not Complete - Recontact to Finish	7	final_disposition__7	Did Not Contact - Ineligible	8	final_disposition__8	Did Not Contact - Refused - Check Later	9	final_disposition__9	Did Not Contact - Refused - DO NOT Check Later	10	final_disposition__10	Did Not Contact - Temporarily Not Ready to Participate - Check Later Recontact to Finish	11	final_disposition__11	Lost to Follow-up	12	final_disposition__12	Dropped Out	13	final_disposition__13	CO completed	14	final_disposition__14	Couldn't complete CO
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594	if_eligible_participant_de	If eligible participant declines, please explain why:	notes																																										

595	staff_assess	Study Staff conducting assessment	dropdown (autocomplete), Required <table border="1"> <tr><td>8</td><td>Kelsey Lowman</td></tr> <tr><td>16</td><td>Nate Phillips</td></tr> <tr><td>18</td><td>Jessica Richman</td></tr> <tr><td>17</td><td>Sophia Allen</td></tr> <tr><td>19</td><td>Grace Wheeler</td></tr> <tr><td>23</td><td>Rachel Plummer</td></tr> <tr><td>20</td><td>Gladys Pachas</td></tr> <tr><td>6</td><td>Bianca Deeb</td></tr> <tr><td>24</td><td>Katey Williams</td></tr> <tr><td>15</td><td>Erin Gadbois</td></tr> <tr><td>2</td><td>Madeleine Fontaine</td></tr> <tr><td>22</td><td>Randi Schuster</td></tr> <tr><td>3</td><td>Mike Vilme</td></tr> <tr><td>4</td><td>Chris McGovern</td></tr> <tr><td>25</td><td>Meg Donnelly</td></tr> <tr><td>26</td><td>Carlos Taveras</td></tr> <tr><td>10</td><td>Karlie Marrs</td></tr> <tr><td>11</td><td>Nina Cherilus</td></tr> <tr><td>21</td><td>Melissa Maravic</td></tr> <tr><td>1</td><td>Eve Manghis</td></tr> <tr><td>5</td><td>Lara Sullivan</td></tr> <tr><td>7</td><td>Shannon Brick</td></tr> <tr><td>9</td><td>Hannah Broos</td></tr> <tr><td>12</td><td>Kara Santacroce</td></tr> <tr><td>13</td><td>Other</td></tr> <tr><td>14</td><td>Alyssa Pingitore</td></tr> </table>	8	Kelsey Lowman	16	Nate Phillips	18	Jessica Richman	17	Sophia Allen	19	Grace Wheeler	23	Rachel Plummer	20	Gladys Pachas	6	Bianca Deeb	24	Katey Williams	15	Erin Gadbois	2	Madeleine Fontaine	22	Randi Schuster	3	Mike Vilme	4	Chris McGovern	25	Meg Donnelly	26	Carlos Taveras	10	Karlie Marrs	11	Nina Cherilus	21	Melissa Maravic	1	Eve Manghis	5	Lara Sullivan	7	Shannon Brick	9	Hannah Broos	12	Kara Santacroce	13	Other	14	Alyssa Pingitore
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596	other_staff_day_of_visit_form_year_1 Show the field ONLY if: [staff_assess] = '13'	Name of Other Staff	text, Required																																																				
597	visit_notes	Visit Notes	notes																																																				
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599	did_the_participant_act_in Show the field ONLY if: ([consent_year_1]<>" or [consent_year_2_v2]<>" or [consent_year_2_v2_v3]<>")	Did the participant act inappropriate during the assessment?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH	1	Yes	0	No																																																
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600	please_describe_the_incide Show the field ONLY if: [did_the_participant_act_in] = '1'	Please describe the incident below:	notes																																																				
601	did_the_participant_act_vi	Did the participant act violent during assessment?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH	1	Yes	0	No																																																
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602	violent_incident Show the field ONLY if: [did_the_participant_act_vi] = '1'	Please describe the incident below:	notes																																																				

603	are_there_any_other_concer	Are there any other concerns that should be noted by study staff?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table> Custom alignment: RH	1	Yes	0	No																																																
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604	please_describe_below Show the field ONLY if: [are_there_any_other_concer] = '1'	Please describe below:	notes, Required																																																				
605	study_staff_member	Study Staff Member	dropdown (autocomplete), Required <table border="1"> <tr><td>8</td><td>Kelsey Lowman</td></tr> <tr><td>16</td><td>Nate Phillips</td></tr> <tr><td>18</td><td>Jessica Richman</td></tr> <tr><td>17</td><td>Sophia Allen</td></tr> <tr><td>19</td><td>Grace Wheeler</td></tr> <tr><td>20</td><td>Rachel Plummer</td></tr> <tr><td>21</td><td>Gladys Pachas</td></tr> <tr><td>6</td><td>Bianca Deeb</td></tr> <tr><td>25</td><td>Katey Williams</td></tr> <tr><td>15</td><td>Erin Gadbois</td></tr> <tr><td>2</td><td>Madeleine Fontaine</td></tr> <tr><td>22</td><td>Melissa Maravic</td></tr> <tr><td>23</td><td>Randi Schuster</td></tr> <tr><td>3</td><td>Mike Vilme</td></tr> <tr><td>1</td><td>Eve Manghis</td></tr> <tr><td>4</td><td>Chris McGovern</td></tr> <tr><td>26</td><td>Meg Donnelly</td></tr> <tr><td>24</td><td>Carlos Taveras</td></tr> <tr><td>10</td><td>Karlie Marrs</td></tr> <tr><td>11</td><td>Nina Cherilus</td></tr> <tr><td>5</td><td>Lara Sullivan</td></tr> <tr><td>7</td><td>Shannon Brick</td></tr> <tr><td>9</td><td>Hannah Broos</td></tr> <tr><td>12</td><td>Kara Santacroce</td></tr> <tr><td>13</td><td>Other</td></tr> <tr><td>14</td><td>Alyssa Pingitore</td></tr> </table>	8	Kelsey Lowman	16	Nate Phillips	18	Jessica Richman	17	Sophia Allen	19	Grace Wheeler	20	Rachel Plummer	21	Gladys Pachas	6	Bianca Deeb	25	Katey Williams	15	Erin Gadbois	2	Madeleine Fontaine	22	Melissa Maravic	23	Randi Schuster	3	Mike Vilme	1	Eve Manghis	4	Chris McGovern	26	Meg Donnelly	24	Carlos Taveras	10	Karlie Marrs	11	Nina Cherilus	5	Lara Sullivan	7	Shannon Brick	9	Hannah Broos	12	Kara Santacroce	13	Other	14	Alyssa Pingitore
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606	other_staff_conduct_log_yr_1 Show the field ONLY if: [study_staff_member] = '13'	Name of Other Staff	text, Required																																																				
607	future_action Show the field ONLY if: [did_the_participant_act_in] = '1' or [are_there_any_other_concer] = '1'	Future action:	notes																																																				
608	conduct_log_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																																														
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609	date_ae1 Show the field ONLY if: ([consent_year_2_v2]<>" or [consent_year_2_v2_v3]<>")	Date of the event	text (date_mdy), Required																																																				
610	describe_ae_1	Briefly describe the event:	notes, Required																																																				

611	severity	Please rate the severity of the Adverse Event:	radio, Required <table><tr><td>1</td><td>Mild</td></tr><tr><td>2</td><td>Moderate</td></tr><tr><td>3</td><td>Severe</td></tr></table>	1	Mild	2	Moderate	3	Severe																																				
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613	best_1	Did you need to contact BEST or emergency services?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																																						
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614	add_another_ae	Add another AE?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH	1	Yes	0	No																																						
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615	adverse_event_2 Show the field ONLY if: [add_another_ae] = '1'	Adverse Event 2	descriptive																																										
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617	date_ae2 Show the field ONLY if: [add_another_ae] = '1'	Date	text (date_mdy), Required																																										

618	<div>name_of_staff_ae2</div> <div>Show the field ONLY if: [add_another_ae] = '1'</div>	Name of Study Staff	<div>dropdown (autocomplete), Required</div> <table><tr><td>1</td><td>Eve Manghis</td></tr><tr><td>2</td><td>Madeleine Fontaine</td></tr><tr><td>3</td><td>Mike Vilme</td></tr><tr><td>4</td><td>Chris McGovern</td></tr><tr><td>5</td><td>Lara Sullivan</td></tr><tr><td>6</td><td>Bianca Deeb</td></tr><tr><td>7</td><td>Shannon Brick</td></tr><tr><td>8</td><td>Kelsey Lowman</td></tr><tr><td>9</td><td>Hannah Broos</td></tr><tr><td>10</td><td>Karlie Marrs</td></tr><tr><td>11</td><td>Nina Cherilus</td></tr><tr><td>12</td><td>Kara Santacroce</td></tr><tr><td>13</td><td>Other</td></tr><tr><td>14</td><td>Erin Gadbois</td></tr><tr><td>15</td><td>Nate Phillips</td></tr><tr><td>16</td><td>Sophia Allen</td></tr><tr><td>17</td><td>Jessica Richman</td></tr><tr><td>18</td><td>Grace Wheeler</td></tr><tr><td>19</td><td>Rachel Plummer</td></tr><tr><td>20</td><td>Gladys Pachas</td></tr><tr><td>21</td><td>Melissa Maravic</td></tr><tr><td>22</td><td>Randi Schuster</td></tr><tr><td>23</td><td>Carlos Taveras</td></tr></table>	1	Eve Manghis	2	Madeleine Fontaine	3	Mike Vilme	4	Chris McGovern	5	Lara Sullivan	6	Bianca Deeb	7	Shannon Brick	8	Kelsey Lowman	9	Hannah Broos	10	Karlie Marrs	11	Nina Cherilus	12	Kara Santacroce	13	Other	14	Erin Gadbois	15	Nate Phillips	16	Sophia Allen	17	Jessica Richman	18	Grace Wheeler	19	Rachel Plummer	20	Gladys Pachas	21	Melissa Maravic	22	Randi Schuster	23	Carlos Taveras
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621	<div>best2</div> <div>Show the field ONLY if: [add_another_ae] = '1'</div>	Did you contact BEST?	<div>yesno, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																																										
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622	<div>adverse_events_complete</div>	<div>Section Header: <i>Form Status</i></div> <div>Complete?</div>	<div>dropdown</div> <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete																																								
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623	<div>attempt1</div>	Attempt 1	descriptive																																														
624	<div>date_1</div>	Date	text (date_mdy), Required																																														
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628	outcome	Attempt outcome/ Final Disposition <i>If ineligible check what applies here</i>	radio, Required <table border="1"> <tr><td>1</td><td>Contacted - Refused - Check Later</td></tr> <tr><td>2</td><td>Contacted - Refused - DO NOT Check Later</td></tr> <tr><td>3</td><td>Contacted - Temporarily Not Ready to Participate - Check Later</td></tr> <tr><td>6</td><td>Contacted - Started Survey But Did Not Complete - Recontact to Finish</td></tr> <tr><td>7</td><td>Did Not Contact - wrong address</td></tr> <tr><td>8</td><td>Did Not Contact - couldn't find participant</td></tr> <tr><td>9</td><td>Did Not Contact -</td></tr> <tr><td>10</td><td>Contacted - Ineligible</td></tr> <tr><td>11</td><td>Did Not Contact - Deceased (ineligible)</td></tr> <tr><td>12</td><td>Did Not Contact - Disenrolled (ineligible)</td></tr> <tr><td>13</td><td>Did Not Contact - Hospitalized (ineligible)</td></tr> <tr><td>14</td><td>Did Not Contact - Non-Smoker (ineligible)</td></tr> <tr><td>15</td><td>Did Not Contact - Quit Smoking (ineligible)</td></tr> <tr><td>16</td><td>Did Not Contact - Disengaged (ineligible)</td></tr> <tr><td>17</td><td>Lost to Follow Up</td></tr> <tr><td>18</td><td>Dropped Out</td></tr> <tr><td>19</td><td>Did Not Contact - Ineligible</td></tr> </table>	1	Contacted - Refused - Check Later	2	Contacted - Refused - DO NOT Check Later	3	Contacted - Temporarily Not Ready to Participate - Check Later	6	Contacted - Started Survey But Did Not Complete - Recontact to Finish	7	Did Not Contact - wrong address	8	Did Not Contact - couldn't find participant	9	Did Not Contact -	10	Contacted - Ineligible	11	Did Not Contact - Deceased (ineligible)	12	Did Not Contact - Disenrolled (ineligible)	13	Did Not Contact - Hospitalized (ineligible)	14	Did Not Contact - Non-Smoker (ineligible)	15	Did Not Contact - Quit Smoking (ineligible)	16	Did Not Contact - Disengaged (ineligible)	17	Lost to Follow Up	18	Dropped Out	19	Did Not Contact - Ineligible				
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637	location_of_contact_2	Location of Contact Attempt <i>Will refine this later</i>	text, Required																																						
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662	contacted_program4	Contacted Program Manager?	yesno, Required <div><div><div>1</div><div>Yes</div></div><div><div>0</div><div>No</div></div></div> <div>Custom alignment: RH</div>
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671	attempt_outcome_5	Attempt outcome/ Final Disposition <i>If ineligible check what applies here</i>	radio, Required <table border="1"> <tr><td>1</td><td>Contacted - Refused - Check Later</td></tr> <tr><td>2</td><td>Contacted - Refused - DO NOT Check Later</td></tr> <tr><td>3</td><td>Contacted - Temporarily Not Ready to Participate - Check Later</td></tr> <tr><td>6</td><td>Contacted - Started Survey But Did Not Complete - Recontact to Finish</td></tr> <tr><td>7</td><td>Did Not Contact - wrong address</td></tr> <tr><td>8</td><td>Did Not Contact - couldn't find participant</td></tr> <tr><td>9</td><td>Did Not Contact -</td></tr> <tr><td>10</td><td>Contacted - Ineligible</td></tr> <tr><td>11</td><td>Did Not Contact - Deceased (ineligible)</td></tr> <tr><td>12</td><td>Did Not Contact - Disenrolled (ineligible)</td></tr> <tr><td>13</td><td>Did Not Contact - Hospitalized (ineligible)</td></tr> <tr><td>14</td><td>Did Not Contact - Non-Smoker (ineligible)</td></tr> <tr><td>15</td><td>Did Not Contact - Quit Smoking (ineligible)</td></tr> <tr><td>16</td><td>Did Not Contact - Disengaged (ineligible)</td></tr> <tr><td>17</td><td>Lost to Follow Up</td></tr> <tr><td>18</td><td>Dropped Out</td></tr> <tr><td>19</td><td>Did Not Contact - Ineligible</td></tr> </table>	1	Contacted - Refused - Check Later	2	Contacted - Refused - DO NOT Check Later	3	Contacted - Temporarily Not Ready to Participate - Check Later	6	Contacted - Started Survey But Did Not Complete - Recontact to Finish	7	Did Not Contact - wrong address	8	Did Not Contact - couldn't find participant	9	Did Not Contact -	10	Contacted - Ineligible	11	Did Not Contact - Deceased (ineligible)	12	Did Not Contact - Disenrolled (ineligible)	13	Did Not Contact - Hospitalized (ineligible)	14	Did Not Contact - Non-Smoker (ineligible)	15	Did Not Contact - Quit Smoking (ineligible)	16	Did Not Contact - Disengaged (ineligible)	17	Lost to Follow Up	18	Dropped Out	19	Did Not Contact - Ineligible
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693	attempt_outcome_52_472_49f	Attempt outcome/ Final Disposition <i>If ineligible check what applies here</i>	radio, Required <table border="1"> <tr><td>1</td><td>Contacted - Refused - Check Later</td></tr> <tr><td>2</td><td>Contacted - Refused - DO NOT Check Later</td></tr> <tr><td>3</td><td>Contacted - Temporarily Not Ready to Participate - Check Later</td></tr> <tr><td>6</td><td>Contacted - Started Survey But Did Not Complete - Recontact to Finish</td></tr> <tr><td>7</td><td>Did Not Contact - wrong address</td></tr> <tr><td>8</td><td>Did Not Contact - couldn't find participant</td></tr> <tr><td>9</td><td>Did Not Contact -</td></tr> <tr><td>10</td><td>Contacted - Ineligible</td></tr> <tr><td>11</td><td>Did Not Contact - Deceased (ineligible)</td></tr> <tr><td>12</td><td>Did Not Contact - Disenrolled (ineligible)</td></tr> <tr><td>13</td><td>Did Not Contact - Hospitalized (ineligible)</td></tr> <tr><td>14</td><td>Did Not Contact - Non-Smoker (ineligible)</td></tr> <tr><td>15</td><td>Did Not Contact - Quit Smoking (ineligible)</td></tr> <tr><td>16</td><td>Did Not Contact - Disengaged (ineligible)</td></tr> <tr><td>17</td><td>Lost to Follow Up</td></tr> <tr><td>18</td><td>Dropped Out</td></tr> <tr><td>19</td><td>Did Not Contact - Ineligible</td></tr> </table>	1	Contacted - Refused - Check Later	2	Contacted - Refused - DO NOT Check Later	3	Contacted - Temporarily Not Ready to Participate - Check Later	6	Contacted - Started Survey But Did Not Complete - Recontact to Finish	7	Did Not Contact - wrong address	8	Did Not Contact - couldn't find participant	9	Did Not Contact -	10	Contacted - Ineligible	11	Did Not Contact - Deceased (ineligible)	12	Did Not Contact - Disenrolled (ineligible)	13	Did Not Contact - Hospitalized (ineligible)	14	Did Not Contact - Non-Smoker (ineligible)	15	Did Not Contact - Quit Smoking (ineligible)	16	Did Not Contact - Disengaged (ineligible)	17	Lost to Follow Up	18	Dropped Out	19	Did Not Contact - Ineligible
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694	location_of_contact_52_de2	Location of Contact Attempt <i>Will refine this later</i>	text, Required																																		
695	contacted_program_52_2_7d5	Contacted Program Manager?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH	1	Yes	0	No																														
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696	next_52_9742_86e	Date for next attempt	text (datetime_seconds_mdy), Required																																		
697	name_of_study_staff522_a20	Name of Study Staff	dropdown (autocomplete), Required <table border="1"> <tr><td>1</td><td>Eve Manghis</td></tr> <tr><td>2</td><td>Madeleine Fontaine</td></tr> <tr><td>3</td><td>Mike Vilme</td></tr> <tr><td>4</td><td>Chris McGovern</td></tr> <tr><td>5</td><td>Lara Sullivan</td></tr> <tr><td>6</td><td>Bianca Deeb</td></tr> <tr><td>7</td><td>Shannon Brick</td></tr> <tr><td>8</td><td>Kelsey Lowman</td></tr> <tr><td>9</td><td>Hannah Broos</td></tr> <tr><td>10</td><td>Karlie Marrs</td></tr> <tr><td>11</td><td>Nina Cherilus</td></tr> <tr><td>12</td><td>Kara Santacroce</td></tr> <tr><td>13</td><td>Other</td></tr> </table>	1	Eve Manghis	2	Madeleine Fontaine	3	Mike Vilme	4	Chris McGovern	5	Lara Sullivan	6	Bianca Deeb	7	Shannon Brick	8	Kelsey Lowman	9	Hannah Broos	10	Karlie Marrs	11	Nina Cherilus	12	Kara Santacroce	13	Other								
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698	other_staff7 Show the field ONLY if: [name_of_study_staff522_a20] = '13'	Name of Other Staff	text, Required																																		
699	additional_notes_7	Additional Notes	notes																																		
700	contact_attempt_52_f42_028	Contact Attempt 8	descriptive																																		
701	date52_1c12_9eb2_9e8	Date	text (date_mdy), Required																																		
702	time_of_attempt52_a3c2_bca	Time of Attempt <i>Approximate time is fine.</i>	text (time), Required																																		
703	iap_meeting2_0e22_96a2_3be	Contact attempt at IAP Meeting?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH	1	Yes	0	No																														
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704	attempt_outcome_52_472_e71	Attempt outcome/ Final Disposition <i>If ineligible check what applies here</i>	radio, Required <table border="1"> <tr><td>1</td><td>Contacted - Refused - Check Later</td></tr> <tr><td>2</td><td>Contacted - Refused - DO NOT Check Later</td></tr> <tr><td>3</td><td>Contacted - Temporarily Not Ready to Participate - Check Later</td></tr> <tr><td>6</td><td>Contacted - Started Survey But Did Not Complete - Recontact to Finish</td></tr> <tr><td>7</td><td>Did Not Contact - wrong address</td></tr> <tr><td>8</td><td>Did Not Contact - couldn't find participant</td></tr> <tr><td>9</td><td>Did Not Contact -</td></tr> <tr><td>10</td><td>Contacted - Ineligible</td></tr> <tr><td>11</td><td>Did Not Contact - Deceased (ineligible)</td></tr> <tr><td>12</td><td>Did Not Contact - Disenrolled (ineligible)</td></tr> <tr><td>13</td><td>Did Not Contact - Hospitalized (ineligible)</td></tr> <tr><td>14</td><td>Did Not Contact - Non-Smoker (ineligible)</td></tr> <tr><td>15</td><td>Did Not Contact - Quit Smoking (ineligible)</td></tr> <tr><td>16</td><td>Did Not Contact - Disengaged (ineligible)</td></tr> <tr><td>17</td><td>Lost to Follow Up</td></tr> <tr><td>18</td><td>Dropped Out</td></tr> <tr><td>19</td><td>Did Not Contact - Ineligible</td></tr> </table>	1	Contacted - Refused - Check Later	2	Contacted - Refused - DO NOT Check Later	3	Contacted - Temporarily Not Ready to Participate - Check Later	6	Contacted - Started Survey But Did Not Complete - Recontact to Finish	7	Did Not Contact - wrong address	8	Did Not Contact - couldn't find participant	9	Did Not Contact -	10	Contacted - Ineligible	11	Did Not Contact - Deceased (ineligible)	12	Did Not Contact - Disenrolled (ineligible)	13	Did Not Contact - Hospitalized (ineligible)	14	Did Not Contact - Non-Smoker (ineligible)	15	Did Not Contact - Quit Smoking (ineligible)	16	Did Not Contact - Disengaged (ineligible)	17	Lost to Follow Up	18	Dropped Out	19	Did Not Contact - Ineligible
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705	location_of_contact_52_bbe	Location of Contact Attempt <i>Will refine this later</i>	text, Required																																		
706	contacted_program_52_2_e84	Contacted Program Manager?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH	1	Yes	0	No																														
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707	next_52_9742_86e2_912	Date for next attempt	text (datetime_seconds_mdy), Required																																		
708	name_of_study_staff522_ff3	Name of Study Staff	dropdown (autocomplete), Required <table border="1"> <tr><td>1</td><td>Eve Manghis</td></tr> <tr><td>2</td><td>Madeleine Fontaine</td></tr> <tr><td>3</td><td>Mike Vilme</td></tr> <tr><td>4</td><td>Chris McGovern</td></tr> <tr><td>5</td><td>Lara Sullivan</td></tr> <tr><td>6</td><td>Bianca Deeb</td></tr> <tr><td>7</td><td>Shannon Brick</td></tr> <tr><td>8</td><td>Kelsey Lowman</td></tr> <tr><td>9</td><td>Hannah Broos</td></tr> <tr><td>10</td><td>Karlie Marrs</td></tr> <tr><td>11</td><td>Nina Cherilus</td></tr> <tr><td>12</td><td>Kara Santacroe</td></tr> <tr><td>13</td><td>Other</td></tr> </table>	1	Eve Manghis	2	Madeleine Fontaine	3	Mike Vilme	4	Chris McGovern	5	Lara Sullivan	6	Bianca Deeb	7	Shannon Brick	8	Kelsey Lowman	9	Hannah Broos	10	Karlie Marrs	11	Nina Cherilus	12	Kara Santacroe	13	Other								
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710	additional_notes_8	Additional Notes	notes																																		
711	contact_attempt_52_f42_c0f	Contact Attempt 9	descriptive																																		
712	date52_1c12_9eb2_9e82_2ce	Date	text (date_mdy), Required																																		
713	time_of_attempt52_a3c2_47c	Time of Attempt <i>Approximate time is fine.</i>	text (time), Required																																		
714	iap_meeting2_0e22_96a2_acd	Contact attempt at IAP Meeting?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH	1	Yes	0	No																														
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715	attempt_outcome_52_472_8c2	Attempt outcome/ Final Disposition <i>If ineligible check what applies here</i>	<div>radio, Required</div> <table border="1"> <tr><td>1</td><td>Contacted - Refused - Check Later</td></tr> <tr><td>2</td><td>Contacted - Refused - DO NOT Check Later</td></tr> <tr><td>3</td><td>Contacted - Temporarily Not Ready to Participate - Check Later</td></tr> <tr><td>6</td><td>Contacted - Started Survey But Did Not Complete - Recontact to Finish</td></tr> <tr><td>7</td><td>Did Not Contact - wrong address</td></tr> <tr><td>8</td><td>Did Not Contact - couldn't find participant</td></tr> <tr><td>9</td><td>Did Not Contact -</td></tr> <tr><td>10</td><td>Contacted - Ineligible</td></tr> <tr><td>11</td><td>Did Not Contact - Deceased (ineligible)</td></tr> <tr><td>12</td><td>Did Not Contact - Disenrolled (ineligible)</td></tr> <tr><td>13</td><td>Did Not Contact - Hospitalized (ineligible)</td></tr> <tr><td>14</td><td>Did Not Contact - Non-Smoker (ineligible)</td></tr> <tr><td>15</td><td>Did Not Contact - Quit Smoking (ineligible)</td></tr> <tr><td>16</td><td>Did Not Contact - Disengaged (ineligible)</td></tr> <tr><td>17</td><td>Lost to Follow Up</td></tr> <tr><td>18</td><td>Dropped Out</td></tr> <tr><td>19</td><td>Did Not Contact - Ineligible</td></tr> </table>	1	Contacted - Refused - Check Later	2	Contacted - Refused - DO NOT Check Later	3	Contacted - Temporarily Not Ready to Participate - Check Later	6	Contacted - Started Survey But Did Not Complete - Recontact to Finish	7	Did Not Contact - wrong address	8	Did Not Contact - couldn't find participant	9	Did Not Contact -	10	Contacted - Ineligible	11	Did Not Contact - Deceased (ineligible)	12	Did Not Contact - Disenrolled (ineligible)	13	Did Not Contact - Hospitalized (ineligible)	14	Did Not Contact - Non-Smoker (ineligible)	15	Did Not Contact - Quit Smoking (ineligible)	16	Did Not Contact - Disengaged (ineligible)	17	Lost to Follow Up	18	Dropped Out	19	Did Not Contact - Ineligible
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716	location_of_contact_52_d0d	Location of Contact Attempt <i>Will refine this later</i>	text, Required																																		
717	contacted_program_52_2_c45	Contacted Program Manager?	<div>yesno, Required</div> <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> <div>Custom alignment: RH</div>	1	Yes	0	No																														
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718	next_52_9742_86e2_9122_526	Date for next attempt	text (datetime_seconds_mdy), Required																																		
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722	contact_attempt_52_f42_8ed	Contact Attempt 10	descriptive																																		
723	date52_1c12_9eb2_9e822_5f3	Date	text (date_mdy), Required																																		
724	time_of_attempt52_a3c2_127	Time of Attempt <i>Approximate time is fine.</i>	text (time), Required																																		
725	iap_meeting2_0e22_96a2_d61	Contact attempt at IAP Meeting?	<div>yesno, Required</div> <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> <div>Custom alignment: RH</div>	1	Yes	0	No																														
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726	attempt_outcome_52_472_855	Attempt outcome/ Final Disposition <i>If ineligible check what applies here</i>	radio, Required <table border="1"> <tr><td>1</td><td>Contacted - Refused - Check Later</td></tr> <tr><td>2</td><td>Contacted - Refused - DO NOT Check Later</td></tr> <tr><td>3</td><td>Contacted - Temporarily Not Ready to Participate - Check Later</td></tr> <tr><td>6</td><td>Contacted - Started Survey But Did Not Complete - Recontact to Finish</td></tr> <tr><td>7</td><td>Did Not Contact - wrong address</td></tr> <tr><td>8</td><td>Did Not Contact - couldn't find participant</td></tr> <tr><td>9</td><td>Did Not Contact -</td></tr> <tr><td>10</td><td>Contacted - Ineligible</td></tr> <tr><td>11</td><td>Did Not Contact - Deceased (ineligible)</td></tr> <tr><td>12</td><td>Did Not Contact - Disenrolled (ineligible)</td></tr> <tr><td>13</td><td>Did Not Contact - Hospitalized (ineligible)</td></tr> <tr><td>14</td><td>Did Not Contact - Non-Smoker (ineligible)</td></tr> <tr><td>15</td><td>Did Not Contact - Quit Smoking (ineligible)</td></tr> <tr><td>16</td><td>Did Not Contact - Disengaged (ineligible)</td></tr> <tr><td>17</td><td>Lost to Follow Up</td></tr> <tr><td>18</td><td>Dropped Out</td></tr> <tr><td>19</td><td>Did Not Contact - Ineligible</td></tr> </table>	1	Contacted - Refused - Check Later	2	Contacted - Refused - DO NOT Check Later	3	Contacted - Temporarily Not Ready to Participate - Check Later	6	Contacted - Started Survey But Did Not Complete - Recontact to Finish	7	Did Not Contact - wrong address	8	Did Not Contact - couldn't find participant	9	Did Not Contact -	10	Contacted - Ineligible	11	Did Not Contact - Deceased (ineligible)	12	Did Not Contact - Disenrolled (ineligible)	13	Did Not Contact - Hospitalized (ineligible)	14	Did Not Contact - Non-Smoker (ineligible)	15	Did Not Contact - Quit Smoking (ineligible)	16	Did Not Contact - Disengaged (ineligible)	17	Lost to Follow Up	18	Dropped Out	19	Did Not Contact - Ineligible
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728	contacted_program_52_2_71a	Contacted Program Manager?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH	1	Yes	0	No																														
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733	chasing_clients_log_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																												
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2	Complete																																				

Instrument: **Permission to Contact** (permission_to_contact)[^ Collapse](#)

734	title	<p>PERMISSION TO CONTACT Massachusetts General Hospital (MGH) Research Study</p> <p>Bay Cove is partnering with MGH on a research study. As part of that study, Bay Cove clients are invited to participate in a five minute survey about their primary care doctor's approach to smoking. People who complete the short survey will earn \$5 for their time.</p> <p>The survey is anonymous and voluntary. MGH staff will not record identifying information of participants. This form will be used by Bay Cove staff only. Please note that the first name and address given below will be shared with a MGH staff member for the purposes of scheduling a convenient time to present the survey only.</p>	descriptive						
735	client_s_name	Client's Name	text						
736	willing_to_participate	Is Client Willing to Participate?	dropdown (autocomplete), Required <table><tr><td>0</td><td>Yes</td></tr><tr><td>1</td><td>No</td></tr><tr><td>2</td><td>Not Sure</td></tr></table>	0	Yes	1	No	2	Not Sure
0	Yes								
1	No								
2	Not Sure								
737	contact_options	Contact Options	dropdown (autocomplete), Required <table><tr><td>0</td><td>Never Contact Again</td></tr><tr><td>1</td><td>Contact Me!</td></tr><tr><td>2</td><td>Change of Mind</td></tr></table>	0	Never Contact Again	1	Contact Me!	2	Change of Mind
0	Never Contact Again								
1	Contact Me!								
2	Change of Mind								
738	exact_words	Client's Exact Words on Participation	notes, Required						
739	residence_address	Residence/Address	text						
740	day_program_name	Name of Day Program	text						
741	community_name	Community Location Name	text						
742	community_address	Community Location Address	text						
743	team_meeting	Team Meeting or IAP meeting	text (datetime_mdy), Required						
744	team_meeting_address	Team Meeting Location/Address	text						
745	best_contact Show the field ONLY if: ([willing_to_participate] = "1" and [contact_options] = "1" or [contact_options] = "2") or ([willing_to_participate] = "0" and [contact_options] = "1") or ([willing_to_participate] = "2" and [contact_options] = "1")	Best Way to Contact Later	radio, Required <table><tr><td>0</td><td>Home Phone</td></tr><tr><td>1</td><td>Cell Phone</td></tr><tr><td>2</td><td>Email</td></tr></table>	0	Home Phone	1	Cell Phone	2	Email
0	Home Phone								
1	Cell Phone								
2	Email								
746	contact_information Show the field ONLY if: ([willing_to_participate] = "1" and [contact_options] = "1" or [contact_options] = "2") or ([willing_to_participate] = "0" and [contact_options] = "1") or ([willing_to_participate] = "2" and [contact_options] = "1")	Contact Information Phone	text (mrn_10d)						
747	contact_information2_560 Show the field ONLY if: ([willing_to_participate] = "1" and [contact_options] = "1" or [contact_options] = "2") or ([willing_to_participate] = "0" and [contact_options] = "1") or ([willing_to_participate] = "2" and [contact_options] = "1")	Contact Information Email	text (email)						

748	best_time Show the field ONLY if: ([willing_to_participate] = "1" and [contact_options] = "1" or [contact_options] = "2") or ([willing_to_participate] = "0" and [contact_options] = "1") or ([willing_to_participate] = "2" and [contact_options] = "1")	Best Time to Meet Please Select: 1) Day of Week AND 2) Time of Day	checkbox, Required <table border="1"> <tr><td>1</td><td>best_time__1</td><td>Monday</td></tr> <tr><td>2</td><td>best_time__2</td><td>Tuesday</td></tr> <tr><td>3</td><td>best_time__3</td><td>Wednesday</td></tr> <tr><td>4</td><td>best_time__4</td><td>Thursday</td></tr> <tr><td>5</td><td>best_time__5</td><td>Friday</td></tr> <tr><td>6</td><td>best_time__6</td><td>Morning</td></tr> <tr><td>7</td><td>best_time__7</td><td>Afternoon</td></tr> <tr><td>8</td><td>best_time__8</td><td>Evening</td></tr> </table>	1	best_time__1	Monday	2	best_time__2	Tuesday	3	best_time__3	Wednesday	4	best_time__4	Thursday	5	best_time__5	Friday	6	best_time__6	Morning	7	best_time__7	Afternoon	8	best_time__8	Evening
1	best_time__1	Monday																									
2	best_time__2	Tuesday																									
3	best_time__3	Wednesday																									
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6	best_time__6	Morning																									
7	best_time__7	Afternoon																									
8	best_time__8	Evening																									
749	number_of_times_contacted Show the field ONLY if: ([willing_to_participate] = "1" and [contact_options] = "1" or [contact_options] = "2") or ([willing_to_participate] = "0" and [contact_options] = "1") or ([willing_to_participate] = "2" and [contact_options] = "1")	Number of Times Contacted	radio <table border="1"> <tr><td>0</td><td>One</td></tr> <tr><td>1</td><td>Two</td></tr> <tr><td>2</td><td>Three</td></tr> </table>	0	One	1	Two	2	Three																		
0	One																										
1	Two																										
2	Three																										
750	when_completed	When the form is completed, please contact Bianca Deeb at bdeeb@baycove.org or 781-234-4140 to schedule the survey.	descriptive																								
751	permission_to_contact_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																		
0	Incomplete																										
1	Unverified																										
2	Complete																										
Instrument: Encounter Attempts Log Y2/Y3 (encounter_attempts_log_y2y3) ^ Collapse																											
752	succ_attempt_gen	Has there been a successful attempt to date? <i>A successful attempt means that the Day of Visit Form reflects that the survey is complete.</i>	yesno <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH	1	Yes	0	No																				
1	Yes																										
0	No																										
753	attempt1_y2y3	Attempt 1	descriptive																								
754	date_1_y2y3	Date and time of attempt	text (datetime_mdy), Required																								
755	contact_attempt_1_y2y3	Location of Contact Attempt <i>Will refine this later</i>	text, Required																								
756	iap_meeting_1_y2y3	Contact attempt at IAP Meeting?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH	1	Yes	0	No																				
1	Yes																										
0	No																										
757	outcome_y2y3	Attempt outcome	radio, Required <table border="1"> <tr><td>1</td><td>Contacted - Refused - Check Later</td></tr> <tr><td>2</td><td>Contacted - Refused - DO NOT Check Later</td></tr> <tr><td>3</td><td>Contacted - Temporarily Not Ready to Participate - Check Later</td></tr> <tr><td>6</td><td>Contacted - Started Survey But Did Not Complete - Recontact to Finish</td></tr> <tr><td>7</td><td>Did Not Contact - wrong address</td></tr> <tr><td>8</td><td>Did Not Contact - couldn't find participant</td></tr> <tr><td>9</td><td>Did Not Contact -</td></tr> </table>	1	Contacted - Refused - Check Later	2	Contacted - Refused - DO NOT Check Later	3	Contacted - Temporarily Not Ready to Participate - Check Later	6	Contacted - Started Survey But Did Not Complete - Recontact to Finish	7	Did Not Contact - wrong address	8	Did Not Contact - couldn't find participant	9	Did Not Contact -										
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8	Did Not Contact - couldn't find participant																										
9	Did Not Contact -																										
758	contacted_program_1_y2y3	Contacted Program Manager?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH	1	Yes	0	No																				
1	Yes																										
0	No																										
759	date_contact_y2y3	Date for next study contact	text (date_mdy)																								

760	study_staff1_y2y3	Name of Study Staff	dropdown (autocomplete), Required <table><tr><td>8</td><td>Kelsey Lowman</td></tr><tr><td>12</td><td>Nate Phillips</td></tr><tr><td>13</td><td>Jessica Richman</td></tr><tr><td>14</td><td>Sophia Allen</td></tr><tr><td>15</td><td>Grace Wheeler</td></tr><tr><td>16</td><td>Rachel Plummer</td></tr><tr><td>19</td><td>Gladys Pachas</td></tr><tr><td>6</td><td>Bianca Deeb</td></tr><tr><td>22</td><td>Katey Williams</td></tr><tr><td>11</td><td>Erin Gadbois</td></tr><tr><td>2</td><td>Madeleine Fontaine</td></tr><tr><td>20</td><td>Melissa Maravic</td></tr><tr><td>21</td><td>Randi Schuster</td></tr><tr><td>3</td><td>Mike Vilme</td></tr><tr><td>4</td><td>Chris McGovern</td></tr><tr><td>23</td><td>Meg Donnelly</td></tr><tr><td>17</td><td>Carlos Taveras</td></tr><tr><td>18</td><td>Karlie Marrs</td></tr><tr><td>24</td><td>Nina Cherilus</td></tr><tr><td>1</td><td>Eve Manghis</td></tr><tr><td>5</td><td>Lara Sullivan</td></tr><tr><td>7</td><td>Shannon Brick</td></tr><tr><td>9</td><td>Hannah Broos</td></tr><tr><td>10</td><td>Alyssa Pingitore</td></tr></table>	8	Kelsey Lowman	12	Nate Phillips	13	Jessica Richman	14	Sophia Allen	15	Grace Wheeler	16	Rachel Plummer	19	Gladys Pachas	6	Bianca Deeb	22	Katey Williams	11	Erin Gadbois	2	Madeleine Fontaine	20	Melissa Maravic	21	Randi Schuster	3	Mike Vilme	4	Chris McGovern	23	Meg Donnelly	17	Carlos Taveras	18	Karlie Marrs	24	Nina Cherilus	1	Eve Manghis	5	Lara Sullivan	7	Shannon Brick	9	Hannah Broos	10	Alyssa Pingitore
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10	Alyssa Pingitore																																																		
761	additional_notes_1_y2y3	Additional Notes	notes																																																
762	second_attempt_y2y3	Was there a second attempt?	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																																												
1	Yes																																																		
0	No																																																		
763	contact_attempt_2_y2y3 Show the field ONLY if: [second_attempt_y2y3]='1'	Contact Attempt 2	descriptive																																																
764	date2_y2y3 Show the field ONLY if: [second_attempt_y2y3]='1'	Date and time of attempt	text (datetime_mdy), Required																																																
765	location_of_contact_2_y2y3 Show the field ONLY if: [second_attempt_y2y3]='1'	Location of Contact Attempt <i>Will refine this later</i>	text, Required																																																
766	iap_meeting2_y2y3 Show the field ONLY if: [second_attempt_y2y3]='1'	Contact attempt at IAP Meeting?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH	1	Yes	0	No																																												
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767	attempt_outcome_2_y2y3 Show the field ONLY if: [second_attempt_y2y3]='1'	Attempt outcome	radio, Required <table><tr><td>1</td><td>Contacted - Refused - Check Later</td></tr><tr><td>2</td><td>Contacted - Refused - DO NOT Check Later</td></tr><tr><td>3</td><td>Contacted - Temporarily Not Ready to Participate - Check Later</td></tr><tr><td>6</td><td>Contacted - Started Survey But Did Not Complete - Recontact to Finish</td></tr><tr><td>7</td><td>Did Not Contact - wrong address</td></tr><tr><td>8</td><td>Did Not Contact - couldn't find participant</td></tr><tr><td>9</td><td>Did Not Contact -</td></tr></table>	1	Contacted - Refused - Check Later	2	Contacted - Refused - DO NOT Check Later	3	Contacted - Temporarily Not Ready to Participate - Check Later	6	Contacted - Started Survey But Did Not Complete - Recontact to Finish	7	Did Not Contact - wrong address	8	Did Not Contact - couldn't find participant	9	Did Not Contact -																																		
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768	contacted_program_man2_y2y3 Show the field ONLY if: [second_attempt_y2y3]='1'	Contacted Program Manager?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH	1	Yes	0	No																				
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769	next_contact_2_y2y3 Show the field ONLY if: [second_attempt_y2y3]='1'	Date for next attempt	text (datetime_seconds_mdy), Required																								
770	study_staff2_y2y3 Show the field ONLY if: [second_attempt_y2y3]='1'	Name of Study Staff	dropdown (autocomplete), Required <table><tr><td>1</td><td>Eve Manghis</td></tr><tr><td>2</td><td>Madeleine Fontaine</td></tr><tr><td>3</td><td>Mike Vilme</td></tr><tr><td>4</td><td>Chris McGovern</td></tr><tr><td>5</td><td>Lara Sullivan</td></tr><tr><td>6</td><td>Bianca Deeb</td></tr><tr><td>7</td><td>Shannon Brick</td></tr><tr><td>8</td><td>Alyssa Pingitore</td></tr><tr><td>9</td><td>Kelsey Lowman</td></tr><tr><td>10</td><td>Hannah Broos</td></tr><tr><td>11</td><td>Erin Gadbois</td></tr><tr><td>12</td><td>Nate Phillips</td></tr></table>	1	Eve Manghis	2	Madeleine Fontaine	3	Mike Vilme	4	Chris McGovern	5	Lara Sullivan	6	Bianca Deeb	7	Shannon Brick	8	Alyssa Pingitore	9	Kelsey Lowman	10	Hannah Broos	11	Erin Gadbois	12	Nate Phillips
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771	additional_notes2_y2y3 Show the field ONLY if: [second_attempt_y2y3]='1'	Additional Notes	notes																								
772	third_contact_y2y3	Was there a third contact attempt?	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																				
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773	contact_attempt_3_y2y3 Show the field ONLY if: [third_contact_y2y3]='1'	Contact Attempt 3	descriptive																								
774	date3_y2y3 Show the field ONLY if: [third_contact_y2y3]='1'	Date and time of attempt	text (datetime_mdy), Required																								
775	location_of_contact_3_y2y3 Show the field ONLY if: [third_contact_y2y3]='1'	Location of Contact Attempt <i>Will refine this later</i>	text, Required																								
776	iap_meeting3_y2y3 Show the field ONLY if: [third_contact_y2y3]='1'	Contact attempt at IAP Meeting?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH	1	Yes	0	No																				
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777	attempt_outcome_3_y2y3 Show the field ONLY if: [third_contact_y2y3]='1'	Attempt outcome	radio, Required <table><tr><td>1</td><td>Contacted - Refused - Check Later</td></tr><tr><td>2</td><td>Contacted - Refused - DO NOT Check Later</td></tr><tr><td>3</td><td>Contacted - Temporarily Not Ready to Participate - Check Later</td></tr><tr><td>6</td><td>Contacted - Started Survey But Did Not Complete - Recontact to Finish</td></tr><tr><td>7</td><td>Did Not Contact - wrong address</td></tr><tr><td>8</td><td>Did Not Contact - couldn't find participant</td></tr><tr><td>9</td><td>Did Not Contact -</td></tr></table>	1	Contacted - Refused - Check Later	2	Contacted - Refused - DO NOT Check Later	3	Contacted - Temporarily Not Ready to Participate - Check Later	6	Contacted - Started Survey But Did Not Complete - Recontact to Finish	7	Did Not Contact - wrong address	8	Did Not Contact - couldn't find participant	9	Did Not Contact -										
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778	program_manager_3_y2y3 Show the field ONLY if: [third_contact_y2y3]='1'	Contacted Program Manager?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH	1	Yes	0	No																				
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779	next_3_y2y3 Show the field ONLY if: [third_contact_y2y3]='1'	Date for next attempt	text (datetime_mdy), Required																								
780	study_staff3_y2y3 Show the field ONLY if: [third_contact_y2y3]='1'	Name of Study Staff	dropdown (autocomplete), Required <table><tr><td>1</td><td>Eve Manghis</td></tr><tr><td>2</td><td>Madeleine Fontaine</td></tr><tr><td>3</td><td>Mike Vilme</td></tr><tr><td>4</td><td>Chris McGovern</td></tr><tr><td>5</td><td>Lara Sullivan</td></tr><tr><td>6</td><td>Bianca Deeb</td></tr><tr><td>7</td><td>Shannon Brick</td></tr><tr><td>8</td><td>Alyssa Pingitore</td></tr><tr><td>9</td><td>Kelsey Lowman</td></tr><tr><td>10</td><td>Hannah Broos</td></tr><tr><td>11</td><td>Erin Gadbois</td></tr><tr><td>12</td><td>Nate Phillips</td></tr></table>	1	Eve Manghis	2	Madeleine Fontaine	3	Mike Vilme	4	Chris McGovern	5	Lara Sullivan	6	Bianca Deeb	7	Shannon Brick	8	Alyssa Pingitore	9	Kelsey Lowman	10	Hannah Broos	11	Erin Gadbois	12	Nate Phillips
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781	additional_notes3_y2y3 Show the field ONLY if: [third_contact_y2y3]='1'	Additional Notes	notes																								
782	fourth_contact_y2y3	Was there a fourth contact attempt?	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																				
1	Yes																										
0	No																										
783	contact_attempt_4_y2y3 Show the field ONLY if: [fourth_contact_y2y3]='1'	Contact Attempt 4	descriptive																								
784	date4_y2y3 Show the field ONLY if: [fourth_contact_y2y3]='1'	Date and time of attempt	text (datetime_mdy), Required																								
785	location_of_contact4_y2y3 Show the field ONLY if: [fourth_contact_y2y3]='1'	Location of Contact Attempt <i>Will refine this later</i>	text, Required																								
786	iap_meeting4_y2y3 Show the field ONLY if: [fourth_contact_y2y3]='1'	Contact attempt at IAP Meeting?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH	1	Yes	0	No																				
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787	attempt_outcome_4_y2y3 Show the field ONLY if: [fourth_contact_y2y3]='1'	Attempt outcome	radio, Required <table><tr><td>1</td><td>Contacted - Refused - Check Later</td></tr><tr><td>2</td><td>Contacted - Refused - DO NOT Check Later</td></tr><tr><td>3</td><td>Contacted - Temporarily Not Ready to Participate - Check Later</td></tr><tr><td>6</td><td>Contacted - Started Survey But Did Not Complete - Recontact to Finish</td></tr><tr><td>7</td><td>Did Not Contact - wrong address</td></tr><tr><td>8</td><td>Did Not Contact - couldn't find participant</td></tr><tr><td>9</td><td>Did Not Contact -</td></tr></table>	1	Contacted - Refused - Check Later	2	Contacted - Refused - DO NOT Check Later	3	Contacted - Temporarily Not Ready to Participate - Check Later	6	Contacted - Started Survey But Did Not Complete - Recontact to Finish	7	Did Not Contact - wrong address	8	Did Not Contact - couldn't find participant	9	Did Not Contact -										
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788	contacted_program4_y2y3 Show the field ONLY if: [fourth_contact_y2y3]='1'	Contacted Program Manager?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH	1	Yes	0	No																				
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0	No																										
789	next_4_y2y3 Show the field ONLY if: [fourth_contact_y2y3]='1'	Date for next attempt	text (datetime_seconds_mdy), Required																								

790	<div>name_of_study_staff4_y2y3</div> <div>Show the field ONLY if: [fourth_contact_y2y3]='1'</div>	<div>Name of Study Staff</div>	<div>dropdown (autocomplete), Required</div> <table><tr><td>1</td><td>Eve Manghis</td></tr><tr><td>2</td><td>Madeleine Fontaine</td></tr><tr><td>3</td><td>Mike Vilme</td></tr><tr><td>4</td><td>Chris McGovern</td></tr><tr><td>5</td><td>Lara Sullivan</td></tr><tr><td>6</td><td>Bianca Deeb</td></tr><tr><td>7</td><td>Shannon Brick</td></tr><tr><td>8</td><td>Alyssa Pingitore</td></tr><tr><td>9</td><td>Kelsey Lowman</td></tr><tr><td>10</td><td>Hannah Broos</td></tr><tr><td>11</td><td>Erin Gadbois</td></tr><tr><td>12</td><td>Nate Phillips</td></tr></table>	1	Eve Manghis	2	Madeleine Fontaine	3	Mike Vilme	4	Chris McGovern	5	Lara Sullivan	6	Bianca Deeb	7	Shannon Brick	8	Alyssa Pingitore	9	Kelsey Lowman	10	Hannah Broos	11	Erin Gadbois	12	Nate Phillips
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792	<div>fifth_contact_y2y3</div>	<div>Was there a fifth contact attempt?</div>	<div>yesno</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																				
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793	<div>contact_attempt_5_y2y3</div> <div>Show the field ONLY if: [fifth_contact_y2y3]='1'</div>	<div>Contact Attempt 5</div>	<div>descriptive</div>																								
794	<div>date5_y2y3</div> <div>Show the field ONLY if: [fifth_contact_y2y3]='1'</div>	<div>Date and time of attempt</div>	<div>text (datetime_mdy), Required</div>																								
795	<div>iap_meeting2_0e22_96a_y2y3</div> <div>Show the field ONLY if: [fifth_contact_y2y3]='1'</div>	<div>Contact attempt at IAP Meeting?</div>	<div>yesno, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> <div>Custom alignment: RH</div>	1	Yes	0	No																				
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799	<div>next_5_y2y3</div> <div>Show the field ONLY if: [fifth_contact_y2y3]='1'</div>	<div>Date for next attempt</div>	<div>text (datetime_seconds_mdy), Required</div>																								

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802	<div>sixth_contact_y2y3</div>	<div>Was there a sixth contact attempt?</div>	<div>yesno</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																				
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803	<div>contact_attempt_6_y2y3</div> <div>Show the field ONLY if: [sixth_contact_y2y3]='1'</div>	<div>Contact Attempt 6</div>	<div>descriptive</div>																								
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812	<div>seventh_contact_y2y3</div>	<div>Was there a seventh contact attempt?</div>	<div>yesno</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																																		
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814	<div>date7_y2y3</div> <div>Show the field ONLY if: [seventh_contact_y2y3]='1'</div>	<div>Date and time of attempt</div>	<div>text (datetime_mdy), Required</div>																																						
815	<div>iap_meeting7_y2y3</div> <div>Show the field ONLY if: [seventh_contact_y2y3]='1'</div>	<div>Contact attempt at IAP Meeting?</div>	<div>yesno, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> <div>Custom alignment: RH</div>	1	Yes	0	No																																		
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821	additional_notes_7_y2y3 Show the field ONLY if: [seventh_contact_y2y3]='1'	Additional Notes	notes																								
822	eighth_contact_y2y3	Was there an eighth contact attempt?	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																				
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837	attempt_outcome_9_y2y3 Show the field ONLY if: [ninth_contact_y2y3]='1'	Attempt outcome	radio, Required <table><tr><td>1</td><td>Contacted - Refused - Check Later</td></tr><tr><td>2</td><td>Contacted - Refused - DO NOT Check Later</td></tr><tr><td>3</td><td>Contacted - Temporarily Not Ready to Participate - Check Later</td></tr><tr><td>6</td><td>Contacted - Started Survey But Did Not Complete - Recontact to Finish</td></tr><tr><td>7</td><td>Did Not Contact - wrong address</td></tr><tr><td>8</td><td>Did Not Contact - couldn't find participant</td></tr><tr><td>9</td><td>Did Not Contact -</td></tr></table>	1	Contacted - Refused - Check Later	2	Contacted - Refused - DO NOT Check Later	3	Contacted - Temporarily Not Ready to Participate - Check Later	6	Contacted - Started Survey But Did Not Complete - Recontact to Finish	7	Did Not Contact - wrong address	8	Did Not Contact - couldn't find participant	9	Did Not Contact -										
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838	location_of_contact_9_y2y3 Show the field ONLY if: [ninth_contact_y2y3]='1'	Location of Contact Attempt <i>Will refine this later</i>	text, Required																								
839	contacted_program_9_y2y3 Show the field ONLY if: [ninth_contact_y2y3]='1'	Contacted Program Manager?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH	1	Yes	0	No																				
1	Yes																										
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840	next_9_y2y3 Show the field ONLY if: [ninth_contact_y2y3]='1'	Date for next attempt	text (datetime_seconds_mdy), Required																								

841	<div>name_of_study_staff9_y2y3</div> <div>Show the field ONLY if: [ninth_contact_y2y3]='1'</div>	<div>Name of Study Staff</div>	<div>dropdown (autocomplete), Required</div> <table><tr><td>1</td><td>Eve Manghis</td></tr><tr><td>2</td><td>Madeleine Fontaine</td></tr><tr><td>3</td><td>Mike Vilme</td></tr><tr><td>4</td><td>Chris McGovern</td></tr><tr><td>5</td><td>Lara Sullivan</td></tr><tr><td>6</td><td>Bianca Deeb</td></tr><tr><td>7</td><td>Shannon Brick</td></tr><tr><td>8</td><td>Alyssa Pingitore</td></tr><tr><td>9</td><td>Kelsey Lowman</td></tr><tr><td>10</td><td>Hannah Broos</td></tr><tr><td>11</td><td>Erin Gadbois</td></tr><tr><td>12</td><td>Nate Phillips</td></tr></table>	1	Eve Manghis	2	Madeleine Fontaine	3	Mike Vilme	4	Chris McGovern	5	Lara Sullivan	6	Bianca Deeb	7	Shannon Brick	8	Alyssa Pingitore	9	Kelsey Lowman	10	Hannah Broos	11	Erin Gadbois	12	Nate Phillips
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842	<div>additional_notes_9_y2y3</div> <div>Show the field ONLY if: [ninth_contact_y2y3]='1'</div>	<div>Additional Notes</div>	<div>notes</div>																								
843	<div>tenth_contact_y2y3</div>	<div>Was there a tenth contact attempt?</div>	<div>yesno</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																				
1	Yes																										
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844	<div>contact_attempt_10_y2y3</div> <div>Show the field ONLY if: [tenth_contact_y2y3]='1'</div>	<div>Contact Attempt 10</div>	<div>descriptive</div>																								
845	<div>date10_y2y3</div> <div>Show the field ONLY if: [tenth_contact_y2y3]='1'</div>	<div>Date and time of attempt</div>	<div>text (datetime_mdy), Required</div>																								
846	<div>iap_meeting10_y2y3</div> <div>Show the field ONLY if: [tenth_contact_y2y3]='1'</div>	<div>Contact attempt at IAP Meeting?</div>	<div>yesno, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> <div>Custom alignment: RH</div>	1	Yes	0	No																				
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847	<div>attempt_outcome10_y2y3</div> <div>Show the field ONLY if: [tenth_contact_y2y3]='1'</div>	<div>Attempt outcome</div>	<div>radio, Required</div> <table><tr><td>1</td><td>Contacted - Refused - Check Later</td></tr><tr><td>2</td><td>Contacted - Refused - DO NOT Check Later</td></tr><tr><td>3</td><td>Contacted - Temporarily Not Ready to Participate - Check Later</td></tr><tr><td>6</td><td>Contacted - Started Survey But Did Not Complete - Recontact to Finish</td></tr><tr><td>7</td><td>Did Not Contact - wrong address</td></tr><tr><td>8</td><td>Did Not Contact - couldn't find participant</td></tr><tr><td>9</td><td>Did Not Contact -</td></tr></table>	1	Contacted - Refused - Check Later	2	Contacted - Refused - DO NOT Check Later	3	Contacted - Temporarily Not Ready to Participate - Check Later	6	Contacted - Started Survey But Did Not Complete - Recontact to Finish	7	Did Not Contact - wrong address	8	Did Not Contact - couldn't find participant	9	Did Not Contact -										
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848	<div>location_of_contact_10_y2y3</div> <div>Show the field ONLY if: [tenth_contact_y2y3]='1'</div>	<div>Location of Contact Attempt</div> <div>Will refine this later</div>	<div>text, Required</div>																								
849	<div>contacted_program_10_y2y3</div> <div>Show the field ONLY if: [tenth_contact_y2y3]='1'</div>	<div>Contacted Program Manager?</div>	<div>yesno, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> <div>Custom alignment: RH</div>	1	Yes	0	No																				
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850	<div>next_10_y2y3</div> <div>Show the field ONLY if: [tenth_contact_y2y3]='1'</div>	<div>Date for next attempt</div>	<div>text (datetime_seconds_mdy), Required</div>																								

851	name_of_study_staff10_y2y3 Show the field ONLY if: [tenth_contact_y2y3]='1'	Name of Study Staff	dropdown (autocomplete), Required <table border="1"> <tr><td>1</td><td>Eve Manghis</td></tr> <tr><td>2</td><td>Madeleine Fontaine</td></tr> <tr><td>3</td><td>Mike Vilme</td></tr> <tr><td>4</td><td>Chris McGovern</td></tr> <tr><td>5</td><td>Lara Sullivan</td></tr> <tr><td>6</td><td>Bianca Deeb</td></tr> <tr><td>7</td><td>Shannon Brick</td></tr> <tr><td>8</td><td>Alyssa Pingitore</td></tr> <tr><td>9</td><td>Kelsey Lowman</td></tr> <tr><td>10</td><td>Hannah Broos</td></tr> <tr><td>11</td><td>Erin Gadbois</td></tr> <tr><td>12</td><td>Nate Phillips</td></tr> </table>		1	Eve Manghis	2	Madeleine Fontaine	3	Mike Vilme	4	Chris McGovern	5	Lara Sullivan	6	Bianca Deeb	7	Shannon Brick	8	Alyssa Pingitore	9	Kelsey Lowman	10	Hannah Broos	11	Erin Gadbois	12	Nate Phillips
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852	additional_notes_10_y2y3 Show the field ONLY if: [tenth_contact_y2y3]='1'	Additional Notes	notes																									
853	encounter_attempts_log_y2y3_complete mplete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>		0	Incomplete	1	Unverified	2	Complete																		
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Instrument: Failed Attempts Log CHW (encounter_attempts_log_chw) ^ Collapse																												
854	date_1_chw	Date	text (date_mdy), Required																									
855	contact_type_chw	Type of Meeting	radio, Required <table border="1"> <tr><td>1</td><td>phone</td></tr> <tr><td>2</td><td>in-person</td></tr> </table>		1	phone	2	in-person																				
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856	purpose_phone_chw Show the field ONLY if: [contact_type_chw] = '1'	Reasons Phone meeting	checkbox, Required <table border="1"> <tr><td>1</td><td>purpose_phone_chw__1</td><td>Schedule next meeting</td></tr> <tr><td>2</td><td>purpose_phone_chw__2</td><td>Confirm/remind time/place next meeting</td></tr> <tr><td>3</td><td>purpose_phone_chw__3</td><td>Smoking cessation follow up</td></tr> <tr><td>4</td><td>purpose_phone_chw__4</td><td>General checking</td></tr> <tr><td>5</td><td>purpose_phone_chw__5</td><td>Other</td></tr> </table>		1	purpose_phone_chw__1	Schedule next meeting	2	purpose_phone_chw__2	Confirm/remind time/place next meeting	3	purpose_phone_chw__3	Smoking cessation follow up	4	purpose_phone_chw__4	General checking	5	purpose_phone_chw__5	Other									
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857	phone_comments_chw	Comments	notes																									
858	purpose_contact_chw Show the field ONLY if: [contact_type_chw] = '2'	Reasons for In Person meeting (select all that apply)	checkbox, Required <table border="1"> <tr><td>1</td><td>purpose_contact_chw__1</td><td>Initial visit/obtain consent</td></tr> <tr><td>2</td><td>purpose_contact_chw__2</td><td>Intervention visit</td></tr> <tr><td>3</td><td>purpose_contact_chw__3</td><td>Taking participant to smoking group</td></tr> <tr><td>4</td><td>purpose_contact_chw__4</td><td>Taking participant to PCP</td></tr> <tr><td>5</td><td>purpose_contact_chw__5</td><td>Other</td></tr> </table>		1	purpose_contact_chw__1	Initial visit/obtain consent	2	purpose_contact_chw__2	Intervention visit	3	purpose_contact_chw__3	Taking participant to smoking group	4	purpose_contact_chw__4	Taking participant to PCP	5	purpose_contact_chw__5	Other									
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859	other_purpose_chw Show the field ONLY if: [purpose_contact_chw(5)] = '1'	Other	text, Required																									
860	location_contact_chw Show the field ONLY if: [contact_type_chw] = '2'	Location of Planned In-Person Meeting	radio, Required <table border="1"> <tr><td>1</td><td>Group home</td></tr> <tr><td>2</td><td>Individual home</td></tr> <tr><td>3</td><td>Smoking cessation group</td></tr> <tr><td>4</td><td>Public place</td></tr> <tr><td>5</td><td>Agency</td></tr> <tr><td>6</td><td>Other</td></tr> </table>		1	Group home	2	Individual home	3	Smoking cessation group	4	Public place	5	Agency	6	Other												
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861	other_location_chw Show the field ONLY if: [location_contact_chw] = '6'	Other location	text, Required																									

862	as_scheduled_chw Show the field ONLY if: [contact_type_chw] = '2'	Did Planned In-Person Meeting Happen?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																		
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863	start_time_chw Show the field ONLY if: [as_scheduled_chw]='1'	Meeting Start Time	text (time), Required																						
864	end_time_chw_2 Show the field ONLY if: [as_scheduled_chw]='1'	Meeting End Time	text (time), Required																						
865	why_noy_chw Show the field ONLY if: [as_scheduled_chw] = '0'	Reasons meeting didn't happen as scheduled? (select one)	radio, Required <table border="1"> <tr><td>1</td><td>Contacted - Refused - Check Later</td></tr> <tr><td>2</td><td>Didn't show up</td></tr> <tr><td>3</td><td>Cancelled without rescheduling</td></tr> <tr><td>4</td><td>Rescheduled</td></tr> <tr><td>5</td><td>Lost to Follow-up/withdrew consent</td></tr> <tr><td>6</td><td>Dropped Out</td></tr> <tr><td>7</td><td>Unavailable: hospitalized</td></tr> <tr><td>8</td><td>Unavailable: incarcerated</td></tr> <tr><td>9</td><td>Unavailable: disenrolled from CBFS services</td></tr> <tr><td>10</td><td>Too symptomatic</td></tr> <tr><td>11</td><td>Other</td></tr> </table>	1	Contacted - Refused - Check Later	2	Didn't show up	3	Cancelled without rescheduling	4	Rescheduled	5	Lost to Follow-up/withdrew consent	6	Dropped Out	7	Unavailable: hospitalized	8	Unavailable: incarcerated	9	Unavailable: disenrolled from CBFS services	10	Too symptomatic	11	Other
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866	other_why_not_chw Show the field ONLY if: [why_noy_chw] = '11'	Other	text, Required																						
867	resched_encounter_chw Show the field ONLY if: [as_scheduled_chw] = '0'	Did You Reschedule This Meeting?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																		
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868	no_sec_attempt_sched_chw Show the field ONLY if: [resched_encounter_chw] = '0'	Why wasn't a second attempt scheduled?	radio, Required <table border="1"> <tr><td>1</td><td>Contacted - Refused - Check Later</td></tr> <tr><td>2</td><td>Doesn't answer the phone</td></tr> <tr><td>3</td><td>Lost to Follow-up/withdrew consent</td></tr> <tr><td>4</td><td>Dropped Out</td></tr> <tr><td>5</td><td>Unavailable: hospitalized</td></tr> <tr><td>6</td><td>Unavailable: incarcerated</td></tr> <tr><td>7</td><td>Unavailable: disenrolled from CBFS services</td></tr> <tr><td>8</td><td>Too symptomatic</td></tr> <tr><td>9</td><td>Other</td></tr> </table>	1	Contacted - Refused - Check Later	2	Doesn't answer the phone	3	Lost to Follow-up/withdrew consent	4	Dropped Out	5	Unavailable: hospitalized	6	Unavailable: incarcerated	7	Unavailable: disenrolled from CBFS services	8	Too symptomatic	9	Other				
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869	other_no_sec_attempt_chw Show the field ONLY if: [no_sec_attempt_sched_chw] = '9'	Other	text, Required																						
870	resch_contact_to_chw Show the field ONLY if: [resched_encounter_chw]='1'	Meeting (second attempt) was rescheduled to	text (datetime_mdy), Required																						
871	location_second_chw Show the field ONLY if: [resched_encounter_chw] = '1'	Location of Meeting (second attempt)	radio, Required <table border="1"> <tr><td>1</td><td>Group home</td></tr> <tr><td>2</td><td>Individual home</td></tr> <tr><td>3</td><td>Smoking cessation group</td></tr> <tr><td>4</td><td>Public place</td></tr> <tr><td>5</td><td>Agency</td></tr> <tr><td>6</td><td>Other</td></tr> </table>	1	Group home	2	Individual home	3	Smoking cessation group	4	Public place	5	Agency	6	Other										
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872	other_loca_second_chw Show the field ONLY if: [location_second_chw] = '6'	Other location	text, Required																						

873	first_attempt_chw Show the field ONLY if: [resched_encounter_chw] = '1'	Did meeting (second attempt) happen as scheduled?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																							
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874	start_time_2_attempt_chw Show the field ONLY if: [first_attempt_chw] = '1'	Meeting Start Time	text (time), Required																											
875	end_time_2_attempt_chw Show the field ONLY if: [first_attempt_chw] = '1'	Meeting End Time	text (time), Required																											
876	why_no_sec_attempt_chw Show the field ONLY if: [first_attempt_chw] = '0'	Reasons meeting didn't happen as scheduled? (select one)	radio, Required <table border="1"> <tr><td>1</td><td>Contacted - Refused - Check Later</td></tr> <tr><td>2</td><td>Didn't show up</td></tr> <tr><td>3</td><td>Cancelled without rescheduling</td></tr> <tr><td>4</td><td>Rescheduled</td></tr> <tr><td>5</td><td>Lost to Follow-up/withdrew consent</td></tr> <tr><td>6</td><td>Dropped Out</td></tr> <tr><td>7</td><td>Unavailable: hospitalized</td></tr> <tr><td>8</td><td>Unavailable: incarcerated</td></tr> <tr><td>9</td><td>Unavailable: disenrolled from CBFS services</td></tr> <tr><td>10</td><td>Too symptomatic</td></tr> <tr><td>11</td><td>Other</td></tr> </table>	1	Contacted - Refused - Check Later	2	Didn't show up	3	Cancelled without rescheduling	4	Rescheduled	5	Lost to Follow-up/withdrew consent	6	Dropped Out	7	Unavailable: hospitalized	8	Unavailable: incarcerated	9	Unavailable: disenrolled from CBFS services	10	Too symptomatic	11	Other					
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877	why_not_other_first_chw Show the field ONLY if: [why_no_sec_attempt_chw] = '1'	Other	text, Required																											
878	next_contact_chw Show the field ONLY if: [first_attempt_chw] = '0'	Was a third attempt scheduled?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																							
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879	reason_no_resch_chw Show the field ONLY if: [next_contact_chw] = '0'	Why wasn't a third attempt scheduled?	checkbox, Required <table border="1"> <tr><td>1</td><td>reason_no_resch_chw__1</td><td>Contacted - Refused - Check Later</td></tr> <tr><td>2</td><td>reason_no_resch_chw__2</td><td>Doesn't answer the phone</td></tr> <tr><td>3</td><td>reason_no_resch_chw__3</td><td>Lost to Follow-up/withdrew consent</td></tr> <tr><td>4</td><td>reason_no_resch_chw__4</td><td>Dropped Out</td></tr> <tr><td>5</td><td>reason_no_resch_chw__5</td><td>Unavailable: hospitalized</td></tr> <tr><td>6</td><td>reason_no_resch_chw__6</td><td>Unavailable: incarcerated</td></tr> <tr><td>7</td><td>reason_no_resch_chw__7</td><td>Unavailable: disenrolled from CBFS services</td></tr> <tr><td>8</td><td>reason_no_resch_chw__8</td><td>Too symptomatic</td></tr> <tr><td>9</td><td>reason_no_resch_chw__9</td><td>Other</td></tr> </table>	1	reason_no_resch_chw__1	Contacted - Refused - Check Later	2	reason_no_resch_chw__2	Doesn't answer the phone	3	reason_no_resch_chw__3	Lost to Follow-up/withdrew consent	4	reason_no_resch_chw__4	Dropped Out	5	reason_no_resch_chw__5	Unavailable: hospitalized	6	reason_no_resch_chw__6	Unavailable: incarcerated	7	reason_no_resch_chw__7	Unavailable: disenrolled from CBFS services	8	reason_no_resch_chw__8	Too symptomatic	9	reason_no_resch_chw__9	Other
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880	other_no_third_resch_chw Show the field ONLY if: [reason_no_resch_chw(9)] = '1'	Other	text, Required																											
881	resch_third_contact_to_chw Show the field ONLY if: [next_contact_chw] = '1'	Meeting was rescheduled to (third attempt)	text (datetime_mdy), Required																											
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883	other_loca_third_chw Show the field ONLY if: [location_third_chw] = '6'	Other	text, Required																												
884	third_attempt_chw Show the field ONLY if: [next_contact_chw] = '1'	Did meeting (third attempt) happen as scheduled?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>		1	Yes	0	No																							
1	Yes																														
0	No																														
885	start_time_3_attempt_chw Show the field ONLY if: [third_attempt_chw] = '1'	Meeting Start Time	text (time), Required																												
886	end_time_3_attempt_chw Show the field ONLY if: [third_attempt_chw] = '1'	Meeting End Time	text (time), Required																												
887	why_no_third_attempt_chw Show the field ONLY if: [third_attempt_chw] = '0'	Reasons meeting didn't happen as scheduled? (select one)	radio, Required <table><tr><td>1</td><td>Contacted - Refused - Check Later</td></tr><tr><td>2</td><td>Didn't show up</td></tr><tr><td>3</td><td>Cancelled without rescheduling</td></tr><tr><td>4</td><td>Rescheduled</td></tr><tr><td>5</td><td>Lost to Follow-up/withdrew consent</td></tr><tr><td>6</td><td>Dropped Out</td></tr><tr><td>7</td><td>Unavailable: hospitalized</td></tr><tr><td>8</td><td>Unavailable: incarcerated</td></tr><tr><td>9</td><td>Unavailable: disenrolled from CBFS services</td></tr><tr><td>10</td><td>Too symptomatic</td></tr><tr><td>11</td><td>Other</td></tr></table>		1	Contacted - Refused - Check Later	2	Didn't show up	3	Cancelled without rescheduling	4	Rescheduled	5	Lost to Follow-up/withdrew consent	6	Dropped Out	7	Unavailable: hospitalized	8	Unavailable: incarcerated	9	Unavailable: disenrolled from CBFS services	10	Too symptomatic	11	Other					
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888	other_no_third_chw Show the field ONLY if: [why_no_third_attempt_chw] = '1' 1'	Other	text, Required																												
889	four_attempt_contact_chw Show the field ONLY if: [third_attempt_chw] = '0'	Was a fourth attempt scheduled?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>		1	Yes	0	No																							
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890	reason_no_resch_4_chw Show the field ONLY if: [four_attempt_contact_chw] = '0'	Why wasn't a fourth attempt scheduled?	checkbox, Required <table><tr><td>1</td><td>reason_no_resch_4_chw__1</td><td>Contacted - Refused - Check Later</td></tr><tr><td>2</td><td>reason_no_resch_4_chw__2</td><td>Doesn't answer the phone</td></tr><tr><td>3</td><td>reason_no_resch_4_chw__3</td><td>Lost to Follow-up/withdrew consent</td></tr><tr><td>4</td><td>reason_no_resch_4_chw__4</td><td>Dropped Out</td></tr><tr><td>5</td><td>reason_no_resch_4_chw__5</td><td>Unavailable: hospitalized</td></tr><tr><td>6</td><td>reason_no_resch_4_chw__6</td><td>Unavailable: incarcerated</td></tr><tr><td>7</td><td>reason_no_resch_4_chw__7</td><td>Unavailable: disenrolled from CBFS services</td></tr><tr><td>8</td><td>reason_no_resch_4_chw__8</td><td>Too symptomatic</td></tr><tr><td>9</td><td>reason_no_resch_4_chw__9</td><td>Other</td></tr></table>		1	reason_no_resch_4_chw__1	Contacted - Refused - Check Later	2	reason_no_resch_4_chw__2	Doesn't answer the phone	3	reason_no_resch_4_chw__3	Lost to Follow-up/withdrew consent	4	reason_no_resch_4_chw__4	Dropped Out	5	reason_no_resch_4_chw__5	Unavailable: hospitalized	6	reason_no_resch_4_chw__6	Unavailable: incarcerated	7	reason_no_resch_4_chw__7	Unavailable: disenrolled from CBFS services	8	reason_no_resch_4_chw__8	Too symptomatic	9	reason_no_resch_4_chw__9	Other
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892	resch_fourth_contact_to_chw Show the field ONLY if: [four_attempt_contact_chw] = '1'	Meeting was rescheduled to (fourth attempt)	text (datetime_mdy), Required																												

893	location_fourth_chw Show the field ONLY if: [four_attempt_contact_chw] = '1'	Location of Meeting (fourth attempt)	radio, Required <table border="1"> <tr><td>1</td><td>Group home</td></tr> <tr><td>2</td><td>Individual home</td></tr> <tr><td>3</td><td>Smoking cessation group</td></tr> <tr><td>4</td><td>Public place</td></tr> <tr><td>5</td><td>Agency</td></tr> <tr><td>6</td><td>Other</td></tr> </table>	1	Group home	2	Individual home	3	Smoking cessation group	4	Public place	5	Agency	6	Other															
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895	fourth_attempt_chw Show the field ONLY if: [four_attempt_contact_chw] = '1'	Did meeting (fourth attempt) happen as scheduled?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																							
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900	fifth_attempt_chw Show the field ONLY if: [fourth_attempt_chw] = '0'	Was a fifth attempt scheduled?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																							
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901	reason_no_resch_5_chw Show the field ONLY if: [fifth_attempt_chw] = '0'	Why wasn't a fifth attempt scheduled?	checkbox, Required <table border="1"> <tr><td>1</td><td>reason_no_resch_5_chw__1</td><td>Contacted - Refused - Check Later</td></tr> <tr><td>2</td><td>reason_no_resch_5_chw__2</td><td>Doesn't answer the phone</td></tr> <tr><td>3</td><td>reason_no_resch_5_chw__3</td><td>Lost to Follow-up/withdrew consent</td></tr> <tr><td>4</td><td>reason_no_resch_5_chw__4</td><td>Dropped Out</td></tr> <tr><td>5</td><td>reason_no_resch_5_chw__5</td><td>Unavailable: hospitalized</td></tr> <tr><td>6</td><td>reason_no_resch_5_chw__6</td><td>Unavailable: incarcerated</td></tr> <tr><td>7</td><td>reason_no_resch_5_chw__7</td><td>Unavailable: disenrolled from CBFS services</td></tr> <tr><td>8</td><td>reason_no_resch_5_chw__8</td><td>Too symptomatic</td></tr> <tr><td>9</td><td>reason_no_resch_5_chw__9</td><td>Other</td></tr> </table>	1	reason_no_resch_5_chw__1	Contacted - Refused - Check Later	2	reason_no_resch_5_chw__2	Doesn't answer the phone	3	reason_no_resch_5_chw__3	Lost to Follow-up/withdrew consent	4	reason_no_resch_5_chw__4	Dropped Out	5	reason_no_resch_5_chw__5	Unavailable: hospitalized	6	reason_no_resch_5_chw__6	Unavailable: incarcerated	7	reason_no_resch_5_chw__7	Unavailable: disenrolled from CBFS services	8	reason_no_resch_5_chw__8	Too symptomatic	9	reason_no_resch_5_chw__9	Other
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906	fifth_attempt_happen_chw Show the field ONLY if: [fifth_attempt_chw] = '1'	Did meeting (fifth attempt) happen as scheduled?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																		
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910	other_no_meet_fifth_chw Show the field ONLY if: [why_no_fifth_attempt_chw] = '11'	Other	text																						
911	sixth_attempt_chw Show the field ONLY if: [fifth_attempt_happen_chw] = '0'	Was a sixth attempt scheduled?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																		
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912	reason_no_resch_6_chw Show the field ONLY if: [sixth_attempt_chw] = '0'	Why wasn't a sixth attempt scheduled?	checkbox, Required <table border="1"> <tr> <td>1</td> <td>reason_no_resch_6_chw__1</td> <td>Contacted - Refused - Check Later</td> </tr> <tr> <td>2</td> <td>reason_no_resch_6_chw__2</td> <td>Doesn't answer the phone</td> </tr> <tr> <td>3</td> <td>reason_no_resch_6_chw__3</td> <td>Lost to Follow-up/withdrew consent</td> </tr> <tr> <td>4</td> <td>reason_no_resch_6_chw__4</td> <td>Dropped Out</td> </tr> <tr> <td>5</td> <td>reason_no_resch_6_chw__5</td> <td>Unavailable: hospitalized</td> </tr> <tr> <td>6</td> <td>reason_no_resch_6_chw__6</td> <td>Unavailable: incarcerated</td> </tr> <tr> <td>7</td> <td>reason_no_resch_6_chw__7</td> <td>Unavailable: disenrolled from CBFS services</td> </tr> <tr> <td>8</td> <td>reason_no_resch_6_chw__8</td> <td>Too symptomatic</td> </tr> <tr> <td>9</td> <td>reason_no_resch_6_chw__9</td> <td>Other</td> </tr> </table>	1	reason_no_resch_6_chw__1	Contacted - Refused - Check Later	2	reason_no_resch_6_chw__2	Doesn't answer the phone	3	reason_no_resch_6_chw__3	Lost to Follow-up/withdrew consent	4	reason_no_resch_6_chw__4	Dropped Out	5	reason_no_resch_6_chw__5	Unavailable: hospitalized	6	reason_no_resch_6_chw__6	Unavailable: incarcerated	7	reason_no_resch_6_chw__7	Unavailable: disenrolled from CBFS services	8	reason_no_resch_6_chw__8	Too symptomatic	9	reason_no_resch_6_chw__9	Other
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917	sixth_attempt_happen_chw Show the field ONLY if: [sixth_attempt_chw] = '1'	Did meeting (sixth attempt) happen as scheduled?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																							
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918	additional_notes_1_chw	Follow up Contact Attempt	notes																											
919	names_chw	CHW	radio, Required <table border="1"> <tr><td>1</td><td>Alexandra Fortune</td></tr> <tr><td>2</td><td>Ashley Newman</td></tr> <tr><td>3</td><td>Aysha Peralta</td></tr> <tr><td>4</td><td>Erin Hanrahan</td></tr> <tr><td>5</td><td>John Dowd</td></tr> <tr><td>6</td><td>Karlie Marrs</td></tr> <tr><td>7</td><td>Leeza Rojas</td></tr> <tr><td>8</td><td>Madalyn Davis</td></tr> <tr><td>9</td><td>Madeleine Fontaine</td></tr> <tr><td>10</td><td>Megan Donnelly</td></tr> <tr><td>11</td><td>Morgan Boudreau</td></tr> <tr><td>12</td><td>Nina Cherilus</td></tr> <tr><td>13</td><td>Carlos Taveras</td></tr> </table>	1	Alexandra Fortune	2	Ashley Newman	3	Aysha Peralta	4	Erin Hanrahan	5	John Dowd	6	Karlie Marrs	7	Leeza Rojas	8	Madalyn Davis	9	Madeleine Fontaine	10	Megan Donnelly	11	Morgan Boudreau	12	Nina Cherilus	13	Carlos Taveras	
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920	encounter_attempts_log_chw_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																					
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Instrument: **Consent visit CHW** (consent_log_chw)

[^ Collapse](#)

921	date_1_chw_v1	Date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																								
922	location_consent_chw	Location of Meeting	radio, Required <table><tr><td>1</td><td>Group home</td></tr><tr><td>2</td><td>Individual home</td></tr><tr><td>3</td><td>Smoking cessation group</td></tr><tr><td>4</td><td>Public place</td></tr><tr><td>5</td><td>Agency</td></tr><tr><td>6</td><td>Other</td></tr></table>	1	Group home	2	Individual home	3	Smoking cessation group	4	Public place	5	Agency	6	Other												
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924	start_time_chw_v1	Meeting Start Time	text (time), Required																								
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926	consent_by_chw	Did patient consent to participate? (select one)	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>Refused - Check Later</td></tr><tr><td>3</td><td>Refused - Don't check later</td></tr><tr><td>4</td><td>Other</td></tr></table>	1	Yes	2	Refused - Check Later	3	Refused - Don't check later	4	Other																
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928	baseline_sched_chw	Baseline visit scheduled	text (datetime_mdy), Required Field Annotation: @HIDEBUTTON																								
929	location_baseline_chw	Location of Baseline Meeting	radio, Required <table><tr><td>1</td><td>Group home</td></tr><tr><td>2</td><td>Individual home</td></tr><tr><td>3</td><td>Smoking cessation group</td></tr><tr><td>4</td><td>Public place</td></tr><tr><td>5</td><td>Agency</td></tr><tr><td>6</td><td>Other</td></tr></table>	1	Group home	2	Individual home	3	Smoking cessation group	4	Public place	5	Agency	6	Other												
1	Group home																										
2	Individual home																										
3	Smoking cessation group																										
4	Public place																										
5	Agency																										
6	Other																										
930	other_loca_baseline_chw Show the field ONLY if: [location_baseline_chw] = '6'	Other location	text, Required																								
931	names_chw_v1	CHW	radio, Required <table><tr><td>1</td><td>Alexandra Fortune</td></tr><tr><td>2</td><td>Ashley Newman</td></tr><tr><td>3</td><td>Aysha Peralta</td></tr><tr><td>4</td><td>Erin Hanrahan</td></tr><tr><td>5</td><td>John Dowd</td></tr><tr><td>6</td><td>Karlie Marrs</td></tr><tr><td>7</td><td>Leeza Rojas</td></tr><tr><td>8</td><td>Madalyn Davis</td></tr><tr><td>9</td><td>Madeleine Fontaine</td></tr><tr><td>10</td><td>Megan Donnelly</td></tr><tr><td>11</td><td>Morgan Boudreau</td></tr><tr><td>12</td><td>Nina Cherilus</td></tr></table>	1	Alexandra Fortune	2	Ashley Newman	3	Aysha Peralta	4	Erin Hanrahan	5	John Dowd	6	Karlie Marrs	7	Leeza Rojas	8	Madalyn Davis	9	Madeleine Fontaine	10	Megan Donnelly	11	Morgan Boudreau	12	Nina Cherilus
1	Alexandra Fortune																										
2	Ashley Newman																										
3	Aysha Peralta																										
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8	Madalyn Davis																										
9	Madeleine Fontaine																										
10	Megan Donnelly																										
11	Morgan Boudreau																										
12	Nina Cherilus																										
932	phone_comments_chw_v1	Comments	notes																								
933	consent_log_chw_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete																		
0	Incomplete																										
1	Unverified																										
2	Complete																										

Instrument: **CHW PCP/Prescriber contact sheet** (chw_pcp_contact_sheet)[^ Collapse](#)

934	pcp_encounter_pat_chw	Patient has an appointment with a PCP/Prescriber	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No											
1	Yes																	
0	No																	
935	visit_1_chw Show the field ONLY if: [pcp_encounter_pat_chw] = '1'	Visit Date	text (date_mdy), Required Field Annotation: @HIDEBUTTON															
936	start_visit_chw Show the field ONLY if: [pcp_encounter_pat_chw] = '1'	Start time	text (time), Required															
937	end_visit_chw Show the field ONLY if: [pcp_encounter_pat_chw] = '1'	End time	text (time), Required															
938	clinic_name_chw Show the field ONLY if: [pcp_encounter_pat_chw] = '1'	Name of the clinic	text															
939	name_doc_chw Show the field ONLY if: [pcp_encounter_pat_chw] = '1'	Doctor's name?	text															
940	specialties_encounter_chw Show the field ONLY if: [pcp_encounter_pat_chw] = '1'	Provider specialty	radio <table><tr><td>1</td><td>Primary Care Doctor</td></tr><tr><td>2</td><td>Psychiatrist</td></tr><tr><td>3</td><td>Other Provider</td></tr></table>	1	Primary Care Doctor	2	Psychiatrist	3	Other Provider									
1	Primary Care Doctor																	
2	Psychiatrist																	
3	Other Provider																	
941	other_provider_chw Show the field ONLY if: [specialties_encounter_chw] = '3'	Other Provider	text, Required															
942	goals_pcp_chw Show the field ONLY if: [pcp_encounter_pat_chw] = '1'	Items to be accomplished before visit with PCP (check all that apply)	checkbox, Required <table><tr><td>1</td><td>goals_pcp_chw__1</td><td>Call clinic before visit to get smoking on the participant's problem list</td></tr><tr><td>2</td><td>goals_pcp_chw__2</td><td>Communicate participant will be accompanied by CHW</td></tr><tr><td>3</td><td>goals_pcp_chw__3</td><td>Be up to date with participant's smoking history and smoking behavior</td></tr><tr><td>4</td><td>goals_pcp_chw__4</td><td>Coordinate with participant in regard of transportation to the clinic</td></tr><tr><td>5</td><td>goals_pcp_chw__5</td><td>Other</td></tr></table>	1	goals_pcp_chw__1	Call clinic before visit to get smoking on the participant's problem list	2	goals_pcp_chw__2	Communicate participant will be accompanied by CHW	3	goals_pcp_chw__3	Be up to date with participant's smoking history and smoking behavior	4	goals_pcp_chw__4	Coordinate with participant in regard of transportation to the clinic	5	goals_pcp_chw__5	Other
1	goals_pcp_chw__1	Call clinic before visit to get smoking on the participant's problem list																
2	goals_pcp_chw__2	Communicate participant will be accompanied by CHW																
3	goals_pcp_chw__3	Be up to date with participant's smoking history and smoking behavior																
4	goals_pcp_chw__4	Coordinate with participant in regard of transportation to the clinic																
5	goals_pcp_chw__5	Other																
943	other_item_before_chw Show the field ONLY if: [goals_pcp_chw(5)] = '1'	Other	text, Required															
944	pat_allowed_chw Show the field ONLY if: [pcp_encounter_pat_chw] = '1'	Did the participant allow the CHW to come with him/her to see PCP?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No											
1	Yes																	
0	No																	

945	goals_pcp_chw_2 Show the field ONLY if: [pcp_encounter_pat_chw] = '1' and [pat_allowed_chw] = '1'	Items accomplished during visit with PCP (check all that apply)	<div>checkbox, Required</div> <table><tr><td>1</td><td>goals_pcp_chw_2__1</td><td>Communicate to PCP participant' willness/desire to take smoking cessation aids/medication</td></tr><tr><td>2</td><td>goals_pcp_chw_2__2</td><td>Inform PCP about the role of study provided CHW</td></tr><tr><td>3</td><td>goals_pcp_chw_2__3</td><td>Inform PCP about smoking groups</td></tr><tr><td>4</td><td>goals_pcp_chw_2__4</td><td>Offer to assist PCP with filling out prescriptions</td></tr><tr><td>5</td><td>goals_pcp_chw_2__5</td><td>Offer to assist PCP with PAS</td></tr><tr><td>6</td><td>goals_pcp_chw_2__6</td><td>Assist PCP with setting quit date</td></tr><tr><td>7</td><td>goals_pcp_chw_2__7</td><td>Offer to assist PCP in observing with treatment tolerability and side effects</td></tr><tr><td>8</td><td>goals_pcp_chw_2__8</td><td>Report to PCP about tolerability and side effects</td></tr><tr><td>9</td><td>goals_pcp_chw_2__9</td><td>Schedule one month follow up with PCP</td></tr><tr><td>10</td><td>goals_pcp_chw_2__10</td><td>Communicate optimism</td></tr><tr><td>11</td><td>goals_pcp_chw_2__11</td><td>Other</td></tr></table>	1	goals_pcp_chw_2__1	Communicate to PCP participant' willness/desire to take smoking cessation aids/medication	2	goals_pcp_chw_2__2	Inform PCP about the role of study provided CHW	3	goals_pcp_chw_2__3	Inform PCP about smoking groups	4	goals_pcp_chw_2__4	Offer to assist PCP with filling out prescriptions	5	goals_pcp_chw_2__5	Offer to assist PCP with PAS	6	goals_pcp_chw_2__6	Assist PCP with setting quit date	7	goals_pcp_chw_2__7	Offer to assist PCP in observing with treatment tolerability and side effects	8	goals_pcp_chw_2__8	Report to PCP about tolerability and side effects	9	goals_pcp_chw_2__9	Schedule one month follow up with PCP	10	goals_pcp_chw_2__10	Communicate optimism	11	goals_pcp_chw_2__11	Other
1	goals_pcp_chw_2__1	Communicate to PCP participant' willness/desire to take smoking cessation aids/medication																																		
2	goals_pcp_chw_2__2	Inform PCP about the role of study provided CHW																																		
3	goals_pcp_chw_2__3	Inform PCP about smoking groups																																		
4	goals_pcp_chw_2__4	Offer to assist PCP with filling out prescriptions																																		
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7	goals_pcp_chw_2__7	Offer to assist PCP in observing with treatment tolerability and side effects																																		
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10	goals_pcp_chw_2__10	Communicate optimism																																		
11	goals_pcp_chw_2__11	Other																																		
946	other_during_pcp_chw Show the field ONLY if: [goals_pcp_chw_2(11)] = '1'	Other	text, Required																																	
947	notes1_pcp_chw_2 Show the field ONLY if: [pat_allowed_chw] = '1' or [pat_owed_chw] = '0'	NOTES	notes Custom alignment: RH																																	
948	pcp_ask_chw Show the field ONLY if: [pat_allowed_chw] = '1'	Did the PCP ask the participant if he/she smoked?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																													
1	Yes																																			
0	No																																			
949	pat_response_pcp Show the field ONLY if: [pcp_ask_chw] = '1'	What did the participant respond?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>3</td><td>Sometimes</td></tr><tr><td>4</td><td>Didn't answer</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	Yes	2	No	3	Sometimes	4	Didn't answer	5	Other																							
1	Yes																																			
2	No																																			
3	Sometimes																																			
4	Didn't answer																																			
5	Other																																			
950	other_pat_smoke_chw Show the field ONLY if: [pat_response_pcp] = '5'	Other	text, Required																																	
951	pcp_recommend_chw Show the field ONLY if: [pat_response_pcp] = '1' or [pat_response_pcp] = '3' or [pat_response_pcp] = '4' or [pat_response_pcp] = '5'	Did the PCP recommend that the participant quit smoking?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																													
1	Yes																																			
0	No																																			
952	pat_agree_pcp_chw Show the field ONLY if: [pcp_recommend_chw] = '1'	Did the participant agree?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>3</td><td>Not sure</td></tr></table> Custom alignment: LV	1	Yes	2	No	3	Not sure																											
1	Yes																																			
2	No																																			
3	Not sure																																			
953	pcp_prescribe_chw Show the field ONLY if: [pat_response_pcp] = '1' or [pat_response_pcp] = '3' or [pat_response_pcp] = '4' or [pat_response_pcp] = '5'	Did the PCP prescribe smoking cessation medication?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LV	1	Yes	0	No																													
1	Yes																																			
0	No																																			

954	what_pcp_prescribe_chw Show the field ONLY if: [pcp_prescribe_chw] = '1'	what did the PCP prescribe? (check all that apply)	checkbox, Required <table border="1"> <tr> <td>1</td> <td>what_pcp_prescribe_chw__1</td> <td>Varenicline (i.e. Chantix)</td> </tr> <tr> <td>2</td> <td>what_pcp_prescribe_chw__2</td> <td>Dual form NRT (patch + gum/lozenges)</td> </tr> <tr> <td>3</td> <td>what_pcp_prescribe_chw__3</td> <td>Bupropion (i.e. Wellbutrin, Zyban) + NRT</td> </tr> <tr> <td>4</td> <td>what_pcp_prescribe_chw__4</td> <td>Patch only</td> </tr> <tr> <td>5</td> <td>what_pcp_prescribe_chw__5</td> <td>Nicotine lozenge and/or gum only</td> </tr> <tr> <td>6</td> <td>what_pcp_prescribe_chw__6</td> <td>Other</td> </tr> </table>	1	what_pcp_prescribe_chw__1	Varenicline (i.e. Chantix)	2	what_pcp_prescribe_chw__2	Dual form NRT (patch + gum/lozenges)	3	what_pcp_prescribe_chw__3	Bupropion (i.e. Wellbutrin, Zyban) + NRT	4	what_pcp_prescribe_chw__4	Patch only	5	what_pcp_prescribe_chw__5	Nicotine lozenge and/or gum only	6	what_pcp_prescribe_chw__6	Other															
1	what_pcp_prescribe_chw__1	Varenicline (i.e. Chantix)																																		
2	what_pcp_prescribe_chw__2	Dual form NRT (patch + gum/lozenges)																																		
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4	what_pcp_prescribe_chw__4	Patch only																																		
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6	what_pcp_prescribe_chw__6	Other																																		
955	other_prescribe_chw Show the field ONLY if: [what_pcp_prescribe_chw(6)] = '1'	Other	text, Required Custom alignment: RH																																	
956	notes1_pcp_chw_3 Show the field ONLY if: [pcp_prescribe_chw] = '1' or [pcp_prescribe_chw] = '0'	NOTES	notes Custom alignment: RH																																	
957	pcp_no_prescribe_chw Show the field ONLY if: [pcp_prescribe_chw] = '0'	Reasons to no prescribing Smoking cessation medications? (check all that apply)	checkbox, Required <table border="1"> <tr> <td>1</td> <td>pcp_no_prescribe_chw__1</td> <td>PCP thinks psychiatrist should do it</td> </tr> <tr> <td>2</td> <td>pcp_no_prescribe_chw__2</td> <td>PCP doesn't understand/know how to prescribe smoking cessation Treatment</td> </tr> <tr> <td>3</td> <td>pcp_no_prescribe_chw__3</td> <td>Fear of adverse effects,</td> </tr> <tr> <td>4</td> <td>pcp_no_prescribe_chw__4</td> <td>Colleagues/media against using smoking cessation treatment in SMI</td> </tr> <tr> <td>5</td> <td>pcp_no_prescribe_chw__5</td> <td>Participant took it before and didn't like the effect (their past experiences),</td> </tr> <tr> <td>6</td> <td>pcp_no_prescribe_chw__6</td> <td>Believe that participant doesn't want to quit smoking</td> </tr> <tr> <td>7</td> <td>pcp_no_prescribe_chw__7</td> <td>Believe that participant will not be able to quit</td> </tr> <tr> <td>8</td> <td>pcp_no_prescribe_chw__8</td> <td>Believe participant wouldn't be able to afford it</td> </tr> <tr> <td>9</td> <td>pcp_no_prescribe_chw__9</td> <td>PCP doesn't know how to get it approved by insurance</td> </tr> <tr> <td>10</td> <td>pcp_no_prescribe_chw__10</td> <td>Other</td> </tr> <tr> <td>11</td> <td>pcp_no_prescribe_chw__11</td> <td>No reason</td> </tr> </table>	1	pcp_no_prescribe_chw__1	PCP thinks psychiatrist should do it	2	pcp_no_prescribe_chw__2	PCP doesn't understand/know how to prescribe smoking cessation Treatment	3	pcp_no_prescribe_chw__3	Fear of adverse effects,	4	pcp_no_prescribe_chw__4	Colleagues/media against using smoking cessation treatment in SMI	5	pcp_no_prescribe_chw__5	Participant took it before and didn't like the effect (their past experiences),	6	pcp_no_prescribe_chw__6	Believe that participant doesn't want to quit smoking	7	pcp_no_prescribe_chw__7	Believe that participant will not be able to quit	8	pcp_no_prescribe_chw__8	Believe participant wouldn't be able to afford it	9	pcp_no_prescribe_chw__9	PCP doesn't know how to get it approved by insurance	10	pcp_no_prescribe_chw__10	Other	11	pcp_no_prescribe_chw__11	No reason
1	pcp_no_prescribe_chw__1	PCP thinks psychiatrist should do it																																		
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3	pcp_no_prescribe_chw__3	Fear of adverse effects,																																		
4	pcp_no_prescribe_chw__4	Colleagues/media against using smoking cessation treatment in SMI																																		
5	pcp_no_prescribe_chw__5	Participant took it before and didn't like the effect (their past experiences),																																		
6	pcp_no_prescribe_chw__6	Believe that participant doesn't want to quit smoking																																		
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9	pcp_no_prescribe_chw__9	PCP doesn't know how to get it approved by insurance																																		
10	pcp_no_prescribe_chw__10	Other																																		
11	pcp_no_prescribe_chw__11	No reason																																		
958	other_no_prescribe_chw Show the field ONLY if: [pcp_no_prescribe_chw(10)] = '1'	Other	text, Required Custom alignment: RH																																	
959	notes1_pcp_chw_4 Show the field ONLY if: [pcp_prescribe_chw] = '0'	NOTES	notes Custom alignment: RH																																	
960	pcp_recommen_group_chw Show the field ONLY if: [pat_response_pcp] = '1' or [pat_response_pcp] = '3' or [pat_response_pcp] = '4' or [pat_response_pcp] = '5'	Did the PCP recommend attending a smoking group?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No																													
1	Yes																																			
0	No																																			

961	pat_response_pcp_3 Show the field ONLY if: [pcp_recommen_group_chw] = '1'	did the participant agree?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>2</td><td>No</td></tr> <tr><td>3</td><td>Not sure</td></tr> </table>	1	Yes	2	No	3	Not sure																								
1	Yes																																
2	No																																
3	Not sure																																
962	pcp_no_group_chw Show the field ONLY if: [pcp_recommen_group_chw] = '0'	Reasons for no recommending to attend groups (check all that apply)	checkbox, Required <table border="1"> <tr><td>1</td><td>pcp_no_group_chw__1</td><td>Believe it is not effective</td></tr> <tr><td>2</td><td>pcp_no_group_chw__2</td><td>Fear of adverse effects</td></tr> <tr><td>3</td><td>pcp_no_group_chw__3</td><td>Colleagues/media against recommending smoking groups to participants with SMI</td></tr> <tr><td>4</td><td>pcp_no_group_chw__4</td><td>Participant did it before and didn't like it (their past experiences),</td></tr> <tr><td>5</td><td>pcp_no_group_chw__5</td><td>PCP doesn't understand what the group is about</td></tr> <tr><td>6</td><td>pcp_no_group_chw__6</td><td>Believe the participant doesn't want to quit smoking</td></tr> <tr><td>7</td><td>pcp_no_group_chw__7</td><td>Believe the participant will not be able to quit</td></tr> <tr><td>8</td><td>pcp_no_group_chw__8</td><td>Participant doesn't have a way to get to the group</td></tr> <tr><td>9</td><td>pcp_no_group_chw__9</td><td>Other</td></tr> <tr><td>10</td><td>pcp_no_group_chw__10</td><td>No reason</td></tr> </table>	1	pcp_no_group_chw__1	Believe it is not effective	2	pcp_no_group_chw__2	Fear of adverse effects	3	pcp_no_group_chw__3	Colleagues/media against recommending smoking groups to participants with SMI	4	pcp_no_group_chw__4	Participant did it before and didn't like it (their past experiences),	5	pcp_no_group_chw__5	PCP doesn't understand what the group is about	6	pcp_no_group_chw__6	Believe the participant doesn't want to quit smoking	7	pcp_no_group_chw__7	Believe the participant will not be able to quit	8	pcp_no_group_chw__8	Participant doesn't have a way to get to the group	9	pcp_no_group_chw__9	Other	10	pcp_no_group_chw__10	No reason
1	pcp_no_group_chw__1	Believe it is not effective																															
2	pcp_no_group_chw__2	Fear of adverse effects																															
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4	pcp_no_group_chw__4	Participant did it before and didn't like it (their past experiences),																															
5	pcp_no_group_chw__5	PCP doesn't understand what the group is about																															
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9	pcp_no_group_chw__9	Other																															
10	pcp_no_group_chw__10	No reason																															
963	other_no_group_pcp_chw Show the field ONLY if: [pcp_no_group_chw(9)] = '1'	Other	text, Required Custom alignment: RH																														
964	pcp_recommend_other_chw Show the field ONLY if: [pcp_recommend_chw] = '1' or [p cp_prescribe_chw] = '1'	what other steps the PCP recommend to quit smoking?	notes, Required Custom alignment: RH																														
965	session_chw Show the field ONLY if: [pat_allowed_chw] = '1'	Brief description of session	notes, Required Custom alignment: LH																														
966	pcp_goals_chw Show the field ONLY if: [pcp_encounter_pat_chw] = '1'	Plan for next visit	checkbox, Required <table border="1"> <tr><td>1</td><td>pcp_goals_chw__1</td><td>Fill prescription</td></tr> <tr><td>2</td><td>pcp_goals_chw__2</td><td>Set up a quit date</td></tr> <tr><td>3</td><td>pcp_goals_chw__3</td><td>Work with the CHW</td></tr> <tr><td>4</td><td>pcp_goals_chw__4</td><td>Attend to smoking groups</td></tr> <tr><td>5</td><td>pcp_goals_chw__5</td><td>Other</td></tr> </table>	1	pcp_goals_chw__1	Fill prescription	2	pcp_goals_chw__2	Set up a quit date	3	pcp_goals_chw__3	Work with the CHW	4	pcp_goals_chw__4	Attend to smoking groups	5	pcp_goals_chw__5	Other															
1	pcp_goals_chw__1	Fill prescription																															
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3	pcp_goals_chw__3	Work with the CHW																															
4	pcp_goals_chw__4	Attend to smoking groups																															
5	pcp_goals_chw__5	Other																															
967	other_goals_pcp_chw Show the field ONLY if: [pcp_goals_chw(5)] = '1'	Other	text, Required																														

968	illness_pcp_chw Show the field ONLY if: [pcp_encounter_pat_chw] = '1'	Were any of these health conditions also addressed during the visit?	checkbox, Required <table border="1"> <tr><td>1</td><td>illness_pcp_chw__1</td><td>Heart Disease</td></tr> <tr><td>2</td><td>illness_pcp_chw__2</td><td>Cancer (Any type)</td></tr> <tr><td>3</td><td>illness_pcp_chw__3</td><td>Emphysema/COPD</td></tr> <tr><td>4</td><td>illness_pcp_chw__4</td><td>Chronic bronchitis</td></tr> <tr><td>5</td><td>illness_pcp_chw__5</td><td>Asthma</td></tr> <tr><td>6</td><td>illness_pcp_chw__6</td><td>Other Respiratory Problems</td></tr> <tr><td>7</td><td>illness_pcp_chw__7</td><td>Rheumatoid Arthritis</td></tr> <tr><td>8</td><td>illness_pcp_chw__8</td><td>Diabetes (high blood sugar)</td></tr> <tr><td>9</td><td>illness_pcp_chw__9</td><td>Weight problem</td></tr> <tr><td>10</td><td>illness_pcp_chw__10</td><td>Blindness/Cataracts/Macular Degeneration</td></tr> <tr><td>11</td><td>illness_pcp_chw__11</td><td>Hypertension (high blood pressure)</td></tr> <tr><td>12</td><td>illness_pcp_chw__12</td><td>Hypotension (low blood pressure)</td></tr> <tr><td>13</td><td>illness_pcp_chw__13</td><td>Other</td></tr> <tr><td>14</td><td>illness_pcp_chw__14</td><td>None</td></tr> </table>	1	illness_pcp_chw__1	Heart Disease	2	illness_pcp_chw__2	Cancer (Any type)	3	illness_pcp_chw__3	Emphysema/COPD	4	illness_pcp_chw__4	Chronic bronchitis	5	illness_pcp_chw__5	Asthma	6	illness_pcp_chw__6	Other Respiratory Problems	7	illness_pcp_chw__7	Rheumatoid Arthritis	8	illness_pcp_chw__8	Diabetes (high blood sugar)	9	illness_pcp_chw__9	Weight problem	10	illness_pcp_chw__10	Blindness/Cataracts/Macular Degeneration	11	illness_pcp_chw__11	Hypertension (high blood pressure)	12	illness_pcp_chw__12	Hypotension (low blood pressure)	13	illness_pcp_chw__13	Other	14	illness_pcp_chw__14	None
1	illness_pcp_chw__1	Heart Disease																																											
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13	illness_pcp_chw__13	Other																																											
14	illness_pcp_chw__14	None																																											
969	other_health_pcp_chw Show the field ONLY if: [illness_pcp_chw(13)] = '1'	Other Health conditions	notes, Required Custom alignment: RH																																										
970	next_visit_pcp_chw Show the field ONLY if: [pcp_encounter_pat_chw] = '1'	Was follow up visit with PCP scheduled?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																																						
1	Yes																																												
0	No																																												
971	schedule_pcp_chw Show the field ONLY if: [next_visit_pcp_chw] = '1'	Date follow up visit	text (datetime_mdy), Required Custom alignment: LV Field Annotation: @HIDEBUTTON																																										
972	no_schedule_pcp_chw Show the field ONLY if: [next_visit_pcp_chw] = '0'	Reasons follow up visit with PCP was not scheduled	notes, Required Custom alignment: LV																																										
973	notes_1_chw	NOTES	notes Custom alignment: LV																																										
974	chw	CHW	radio, Required <table border="1"> <tr><td>1</td><td>Alexandra Fortune</td></tr> <tr><td>2</td><td>Ashley Newman</td></tr> <tr><td>3</td><td>Aysha Peralta</td></tr> <tr><td>4</td><td>Erin Hanrahan</td></tr> <tr><td>5</td><td>John Dowd</td></tr> <tr><td>6</td><td>Karlie Marrs</td></tr> <tr><td>7</td><td>Leeza Rojas</td></tr> <tr><td>8</td><td>Madalyn Davis</td></tr> <tr><td>9</td><td>Madeleine Fontaine</td></tr> <tr><td>10</td><td>Megan Donnelly</td></tr> <tr><td>11</td><td>Morgan Boudreau</td></tr> <tr><td>12</td><td>Nina Cherilus</td></tr> <tr><td>13</td><td>Carlos Taveras</td></tr> </table>	1	Alexandra Fortune	2	Ashley Newman	3	Aysha Peralta	4	Erin Hanrahan	5	John Dowd	6	Karlie Marrs	7	Leeza Rojas	8	Madalyn Davis	9	Madeleine Fontaine	10	Megan Donnelly	11	Morgan Boudreau	12	Nina Cherilus	13	Carlos Taveras																
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975	chw_pcp_contact_sheet_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																																				
0	Incomplete																																												
1	Unverified																																												
2	Complete																																												

Instrument: **Contact Sheet All Visits CHW baseline** (contact_sheet_all_visits_chw_1)[^ Collapse](#)

976	date_all_visits_chw_v1	Section Header: <i>Smoking Behavior From Year 1 Survey # tobacco products: [year_1_arm_1][smoking_habits] In the past year, have you used anything to quit smoking? [year_1_arm_1][any_treatment] What did you use? [year_1_arm_1][what_treatment] In the past year, did your medical doctor prescribe/suggested medication, to help you to quit smoking? [year_1_arm_1][doc_prescribed]</i> Visit Date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																		
977	start_all_visits_chw_v1	Start time	text (time), Required																		
978	end_all_visits_chw_v1	End time	text (time), Required																		
979	smoking_chw_v1	Section Header: <i>Smoking Behavior</i> Is the participant currently smoking? i.e. in past 7 days?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																				
0	No																				
980	notes1_chw_v1	Notes	notes Custom alignment: RH																		
981	tobacco_prod_chw_v1	Which tobacco products does the participant currently smoke? (I.e. Cigarettes, Cigars, Cigarillos, Rollics, Mini Cigars, Pipe) Select all that apply	checkbox <table><tr><td>1</td><td>tobacco_prod_chw_v1__1</td><td>Cigarettes</td></tr><tr><td>2</td><td>tobacco_prod_chw_v1__2</td><td>Mini cigars (I.e. double diamonds)</td></tr><tr><td>3</td><td>tobacco_prod_chw_v1__3</td><td>loose tobacco (roll your own, rollics)</td></tr><tr><td>4</td><td>tobacco_prod_chw_v1__4</td><td>e-cigarettes/vaping</td></tr><tr><td>5</td><td>tobacco_prod_chw_v1__5</td><td>Other</td></tr><tr><td>6</td><td>tobacco_prod_chw_v1__6</td><td>Quit smoking</td></tr></table>	1	tobacco_prod_chw_v1__1	Cigarettes	2	tobacco_prod_chw_v1__2	Mini cigars (I.e. double diamonds)	3	tobacco_prod_chw_v1__3	loose tobacco (roll your own, rollics)	4	tobacco_prod_chw_v1__4	e-cigarettes/vaping	5	tobacco_prod_chw_v1__5	Other	6	tobacco_prod_chw_v1__6	Quit smoking
1	tobacco_prod_chw_v1__1	Cigarettes																			
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5	tobacco_prod_chw_v1__5	Other																			
6	tobacco_prod_chw_v1__6	Quit smoking																			
982	last_cigarette_chw_v1 Show the field ONLY if: [smoking_chw_v1] = '1' or [smoking_chw_v1] = '0'	Time of last cigarette (or other tobacco product)	text (datetime_mdy), Required Custom alignment: RH Field Annotation: @HIDEBUTTON																		
983	cpd_chw_v1 Show the field ONLY if: [smoking_chw_v1] = '1'	Cigarettes per day (average) in the past month	text (integer), Required																		
984	pat_co_done_chw_v1	Was CO testing completed today?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																				
0	No																				
985	pat_yes_co_chw_v1 Show the field ONLY if: [pat_co_done_chw_v1] = '1'	Reasons for CO measurement	checkbox, Required <table><tr><td>1</td><td>pat_yes_co_chw_v1__1</td><td>Baseline</td></tr><tr><td>2</td><td>pat_yes_co_chw_v1__2</td><td>Last CO month was done over a month ago</td></tr><tr><td>3</td><td>pat_yes_co_chw_v1__3</td><td>Participant changed smoking behavior after last CO measurement (quit or relapsed)</td></tr><tr><td>4</td><td>pat_yes_co_chw_v1__4</td><td>Participant asked for it</td></tr><tr><td>5</td><td>pat_yes_co_chw_v1__5</td><td>Other</td></tr></table>	1	pat_yes_co_chw_v1__1	Baseline	2	pat_yes_co_chw_v1__2	Last CO month was done over a month ago	3	pat_yes_co_chw_v1__3	Participant changed smoking behavior after last CO measurement (quit or relapsed)	4	pat_yes_co_chw_v1__4	Participant asked for it	5	pat_yes_co_chw_v1__5	Other			
1	pat_yes_co_chw_v1__1	Baseline																			
2	pat_yes_co_chw_v1__2	Last CO month was done over a month ago																			
3	pat_yes_co_chw_v1__3	Participant changed smoking behavior after last CO measurement (quit or relapsed)																			
4	pat_yes_co_chw_v1__4	Participant asked for it																			
5	pat_yes_co_chw_v1__5	Other																			
986	other_yes_co_chw Show the field ONLY if: [pat_yes_co_chw_v1(5)] = '1'	Other	text, Required																		
987	expired_co_chw_v1 Show the field ONLY if: [pat_co_done_chw_v1] = '1'	Expired CO reading (ppm)	text (integer, Min: 0, Max: 100), Required																		
988	time_co_chw_v1 Show the field ONLY if: [pat_co_done_chw_v1] = '1'	Date of CO reading	text (date_mdy), Required Field Annotation: @HIDEBUTTON																		
989	hour_co_chw_v1 Show the field ONLY if: [pat_co_done_chw_v1] = '1'	Time of CO reading	text (time), Required																		

990	co_monitor_chw_v1 Show the field ONLY if: [pat_co_done_chw_v1] = '1'	CO Monitor ID	radio, Required <table border="1"> <tr><td>1</td><td>A</td></tr> <tr><td>2</td><td>B</td></tr> <tr><td>3</td><td>C</td></tr> <tr><td>4</td><td>D</td></tr> <tr><td>5</td><td>E</td></tr> <tr><td>6</td><td>F</td></tr> <tr><td>7</td><td>G</td></tr> <tr><td>8</td><td>H</td></tr> <tr><td>9</td><td>I</td></tr> <tr><td>10</td><td>J</td></tr> <tr><td>11</td><td>K</td></tr> <tr><td>12</td><td>L</td></tr> <tr><td>13</td><td>M</td></tr> <tr><td>14</td><td>N</td></tr> <tr><td>15</td><td>O</td></tr> <tr><td>16</td><td>P</td></tr> </table>	1	A	2	B	3	C	4	D	5	E	6	F	7	G	8	H	9	I	10	J	11	K	12	L	13	M	14	N	15	O	16	P
1	A																																		
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15	O																																		
16	P																																		
			Custom alignment: RH																																
991	co_exec_chw_v1 Show the field ONLY if: [pat_co_done_chw_v1] = '1'	Was CO measuring executed properly?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																												
1	Yes																																		
0	No																																		
992	pat_no_co_chw_v1 Show the field ONLY if: [pat_co_done_chw_v1] = '0'	Reasons for NO CO measurement	checkbox, Required <table border="1"> <tr> <td>1</td> <td>pat_no_co_chw_v1__1</td> <td>CO was done within the past month and there was no change in smoking behavior</td> </tr> <tr> <td>2</td> <td>pat_no_co_chw_v1__2</td> <td>Participant refused</td> </tr> <tr> <td>3</td> <td>pat_no_co_chw_v1__3</td> <td>Participant unable (respiratory illness, symptomatic)</td> </tr> <tr> <td>4</td> <td>pat_no_co_chw_v1__4</td> <td>Other</td> </tr> </table>	1	pat_no_co_chw_v1__1	CO was done within the past month and there was no change in smoking behavior	2	pat_no_co_chw_v1__2	Participant refused	3	pat_no_co_chw_v1__3	Participant unable (respiratory illness, symptomatic)	4	pat_no_co_chw_v1__4	Other																				
1	pat_no_co_chw_v1__1	CO was done within the past month and there was no change in smoking behavior																																	
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4	pat_no_co_chw_v1__4	Other																																	
993	notes_co_chw_v1 Show the field ONLY if: [pat_no_co_chw_v1(4)] = '1'	Notes	notes Custom alignment: RH																																
994	seen_by_pcp_chw_v1	Was participant seen by a primary care team in the past 12 month?	radio, Required <table border="1"> <tr><td>1</td><td>None scheduled</td></tr> <tr><td>2</td><td>No, missed visit</td></tr> <tr><td>3</td><td>Yes, smoking discussed</td></tr> <tr><td>4</td><td>Yes, smoking not discussed</td></tr> <tr><td>5</td><td>Unknown</td></tr> </table>	1	None scheduled	2	No, missed visit	3	Yes, smoking discussed	4	Yes, smoking not discussed	5	Unknown																						
1	None scheduled																																		
2	No, missed visit																																		
3	Yes, smoking discussed																																		
4	Yes, smoking not discussed																																		
5	Unknown																																		
995	pcp_recommend_pat_chw_v1 Show the field ONLY if: [seen_by_pcp_chw_v1] = '3'	Did the PCP recommend that the participant quit smoking?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																												
1	Yes																																		
0	No																																		
996	pcp_prescribed_pat_chw_v1 Show the field ONLY if: [seen_by_pcp_chw_v1] = '3'	Did PCP prescribe smoking cessation medication?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																												
1	Yes																																		
0	No																																		
997	pat_what_prescribed_chw_v1 Show the field ONLY if: [pcp_prescribed_pat_chw_v1] = '1'	What did the PCP prescribe?	checkbox, Required <table border="1"> <tr> <td>1</td> <td>pat_what_prescribed_chw_v1__1</td> <td>Varenicline (i.e. Chantix)</td> </tr> <tr> <td>2</td> <td>pat_what_prescribed_chw_v1__2</td> <td>Nicotine patch</td> </tr> <tr> <td>3</td> <td>pat_what_prescribed_chw_v1__3</td> <td>Bupropion (i.e. Wellbutrin, Zyban)</td> </tr> <tr> <td>4</td> <td>pat_what_prescribed_chw_v1__4</td> <td>Nicotine gum</td> </tr> <tr> <td>5</td> <td>pat_what_prescribed_chw_v1__5</td> <td>Nicotine lozenge</td> </tr> <tr> <td>6</td> <td>pat_what_prescribed_chw_v1__6</td> <td>Other</td> </tr> </table>	1	pat_what_prescribed_chw_v1__1	Varenicline (i.e. Chantix)	2	pat_what_prescribed_chw_v1__2	Nicotine patch	3	pat_what_prescribed_chw_v1__3	Bupropion (i.e. Wellbutrin, Zyban)	4	pat_what_prescribed_chw_v1__4	Nicotine gum	5	pat_what_prescribed_chw_v1__5	Nicotine lozenge	6	pat_what_prescribed_chw_v1__6	Other														
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4	pat_what_prescribed_chw_v1__4	Nicotine gum																																	
5	pat_what_prescribed_chw_v1__5	Nicotine lozenge																																	
6	pat_what_prescribed_chw_v1__6	Other																																	

998	pat_taking_meds_chw_v1 Show the field ONLY if: [pcp_prescribed_pat_chw_v1] = '1'	Did the participant take the recommended/prescribed smoking cessation medication?	yesno, Required 1 Yes 0 No
999	pat_what_taking_chw_v1 Show the field ONLY if: [pat_taking_meds_chw_v1] = '1'	What did the participant use?	checkbox, Required 1 pat_what_taking_chw_v1__1 Varenicline (i.e. Chantix) 2 pat_what_taking_chw_v1__2 Nicotine patch 3 pat_what_taking_chw_v1__3 Bupropion (i.e. Wellbutrin, Zyban) 4 pat_what_taking_chw_v1__4 Nicotine gum 5 pat_what_taking_chw_v1__5 Nicotine lozenge 6 pat_what_taking_chw_v1__6 Other
1000	pat_other_med_chw_v1 Show the field ONLY if: [pat_what_taking_chw_v1(6)] = '1'	Other	text, Required
1001	pat_var_dose_chw_v1 Show the field ONLY if: [pat_what_taking_chw_v1(1)] = '1'	Varenicline (Chantix) Dose	radio, Required 1 0.5 mg once a day 2 0.5 mg twice a day 3 1 mg once a day 4 1 mg twice a day 5 Other
1002	pat_var_other_dose_chw_v1 Show the field ONLY if: [pat_var_dose_chw_v1] = '5'	Other Dose	text, Required
1003	pat_var_start_chw_v1 Show the field ONLY if: [pat_what_taking_chw_v1(1)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON
1004	varen_still_chw_v1 Show the field ONLY if: [pat_what_taking_chw_v1(1)] = '1'	Is participant still taking varenicline?	yesno, Required 1 Yes 0 No
1005	pat_var_end_chw_v1 Show the field ONLY if: [pat_what_taking_chw_v1(1)] = '1'	Change/end date	text (date_mdy) Field Annotation: @HIDEBUTTON
1006	pat_bup_dose_chw_v1 Show the field ONLY if: [pat_what_taking_chw_v1(3)] = '1'	Bupropion (Wellbutrin, Zyban) dose	radio, Required 1 150 mg once a day 2 150 mg twice a day 3 Other
1007	pat_bup_other_dose_chw_v1 Show the field ONLY if: [pat_bup_dose_chw_v1] = '3'	Other Dose	text, Required
1008	pat_bup_start_chw_v1 Show the field ONLY if: [pat_what_taking_chw_v1(3)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON
1009	bup_still_chw_v1 Show the field ONLY if: [pat_what_taking_chw_v1(3)] = '1'	Is participant still taking bupropion?	yesno, Required 1 Yes 0 No
1010	pat_bup_end_chw_v1 Show the field ONLY if: [bup_still_chw_v1] = '0'	Change/end date	text (date_mdy) Field Annotation: @HIDEBUTTON
1011	pat_patch_dose_chw_v1 Show the field ONLY if: [pat_what_taking_chw_v1(2)] = '1'	Nicotine patch dose	radio, Required 1 21 mg 2 14 mg 3 7 mg 4 Other

1012	pat_patch_other_dose_chw_v1 Show the field ONLY if: [pat_patch_dose_chw_v1] = '4'	Other Dose	text, Required										
1013	pat_patch_start_chw_v1 Show the field ONLY if: [pat_what_taking_chw_v1(2)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON										
1014	patch_still_chw_v1 Show the field ONLY if: [pat_what_taking_chw_v1(2)] = '1'	Is participant still using the patch?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No						
1	Yes												
0	No												
1015	pat_patch_end_chw_v1 Show the field ONLY if: [patch_still_chw_v1] = '0'	Change/end date	text (date_mdy) Field Annotation: @HIDEBUTTON										
1016	pat_gum_dose_chw_v1 Show the field ONLY if: [pat_what_taking_chw_v1(4)] = '1'	Nicotine gum	radio, Required <table><tr><td>1</td><td>4-6 mg per day</td></tr><tr><td>2</td><td>8-10 mg per day</td></tr><tr><td>3</td><td>12-14 mg per day</td></tr><tr><td>4</td><td>16-18 mg per day</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	4-6 mg per day	2	8-10 mg per day	3	12-14 mg per day	4	16-18 mg per day	5	Other
1	4-6 mg per day												
2	8-10 mg per day												
3	12-14 mg per day												
4	16-18 mg per day												
5	Other												
1017	pat_gum_other_dose_chw_v1 Show the field ONLY if: [pat_gum_dose_chw_v1] = '5'	Other Dose	text, Required										
1018	pat_gum_start_chw_v1 Show the field ONLY if: [pat_what_taking_chw_v1(4)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON										
1019	gum_still_chw_v1 Show the field ONLY if: [pat_what_taking_chw_v1(4)] = '1'	Is participant still using the gum?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No						
1	Yes												
0	No												
1020	pat_gum_end_chw_v1 Show the field ONLY if: [gum_still_chw_v1] = '0'	Change/end date	text (date_mdy) Field Annotation: @HIDEBUTTON										
1021	pat_loz_dose_chw_v1 Show the field ONLY if: [pat_what_taking_chw_v1(5)] = '1'	Nicotine lozenges	radio, Required <table><tr><td>1</td><td>4-6 mg per day</td></tr><tr><td>2</td><td>8-10 mg per day</td></tr><tr><td>3</td><td>12-14 mg per day</td></tr><tr><td>4</td><td>16-18 mg per day</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	4-6 mg per day	2	8-10 mg per day	3	12-14 mg per day	4	16-18 mg per day	5	Other
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2	8-10 mg per day												
3	12-14 mg per day												
4	16-18 mg per day												
5	Other												
1022	pat_loz_other_dose_chw_v1 Show the field ONLY if: [pat_loz_dose_chw_v1] = '5'	Other Dose	text, Required										
1023	pat_loz_start_chw_v1 Show the field ONLY if: [pat_what_taking_chw_v1(5)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON										
1024	loz_still_chw_v1 Show the field ONLY if: [pat_what_taking_chw_v1(5)] = '1'	Is participant still using lozenges?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No						
1	Yes												
0	No												
1025	pat_loz_end_chw_v1 Show the field ONLY if: [loz_still_chw_v1] = '0'	Change/end date	text (date_mdy) Field Annotation: @HIDEBUTTON										

1026	pat_no_meds_chw_v1 Show the field ONLY if: [pat_taking_meds_chw_v1] = '0'	Reasons participant didn't take prescribed/recommended smoking cessation medication	checkbox, Required <table border="1"> <tr> <td>1</td> <td>pat_no_meds_chw_v1__1</td> <td>I don't need/want to take more medications</td> </tr> <tr> <td>2</td> <td>pat_no_meds_chw_v1__2</td> <td>Fear of adverse effects,</td> </tr> <tr> <td>3</td> <td>pat_no_meds_chw_v1__3</td> <td>Family/friends/media recommended not taking it</td> </tr> <tr> <td>4</td> <td>pat_no_meds_chw_v1__4</td> <td>I took it before and didn't like the effect (their past experiences),</td> </tr> <tr> <td>5</td> <td>pat_no_meds_chw_v1__5</td> <td>I didn't understand what the Treatment was about</td> </tr> <tr> <td>6</td> <td>pat_no_meds_chw_v1__6</td> <td>I couldn't afford it</td> </tr> <tr> <td>7</td> <td>pat_no_meds_chw_v1__7</td> <td>I'd rather go to smoking groups</td> </tr> <tr> <td>8</td> <td>pat_no_meds_chw_v1__8</td> <td>I forgot</td> </tr> <tr> <td>9</td> <td>pat_no_meds_chw_v1__9</td> <td>Other</td> </tr> <tr> <td>10</td> <td>pat_no_meds_chw_v1__10</td> <td>Prefer not to answer</td> </tr> <tr> <td>11</td> <td>pat_no_meds_chw_v1__11</td> <td>I didn't want to quit smoking/ambivalent /changed my mind</td> </tr> </table>	1	pat_no_meds_chw_v1__1	I don't need/want to take more medications	2	pat_no_meds_chw_v1__2	Fear of adverse effects,	3	pat_no_meds_chw_v1__3	Family/friends/media recommended not taking it	4	pat_no_meds_chw_v1__4	I took it before and didn't like the effect (their past experiences),	5	pat_no_meds_chw_v1__5	I didn't understand what the Treatment was about	6	pat_no_meds_chw_v1__6	I couldn't afford it	7	pat_no_meds_chw_v1__7	I'd rather go to smoking groups	8	pat_no_meds_chw_v1__8	I forgot	9	pat_no_meds_chw_v1__9	Other	10	pat_no_meds_chw_v1__10	Prefer not to answer	11	pat_no_meds_chw_v1__11	I didn't want to quit smoking/ambivalent /changed my mind
1	pat_no_meds_chw_v1__1	I don't need/want to take more medications																																		
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1027	other_pat_no_meds_chw_v1 Show the field ONLY if: [pat_no_meds_chw_v1(9)] = '1'	Other	text, Required																																	
1028	pat_recommend_cbt_chw_v1 Show the field ONLY if: [seen_by_pcp_chw_v1] = '3'	Did the PCP recommend attending a smoking group?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No																													
1	Yes																																			
0	No																																			
1029	pat_cbt_chw_v1 Show the field ONLY if: [pat_recommend_cbt_chw_v1] = '1'	Did participant attend the smoking cessation group?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No																													
1	Yes																																			
0	No																																			
1030	cbt_still_chw_v1 Show the field ONLY if: [pat_cbt_chw_v1] = '1'	Is participant still attending a smoking group?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No																													
1	Yes																																			
0	No																																			
1031	pat_att_cbt_chw_v1 Show the field ONLY if: [cbt_still_chw_v1] = '1'	Attendance in past month	radio <table border="1"> <tr> <td>1</td> <td>1 session</td> </tr> <tr> <td>2</td> <td>2 sessions</td> </tr> <tr> <td>3</td> <td>3 sessions</td> </tr> <tr> <td>4</td> <td>4 sessions</td> </tr> <tr> <td>5</td> <td>5 or more sessions</td> </tr> </table>	1	1 session	2	2 sessions	3	3 sessions	4	4 sessions	5	5 or more sessions																							
1	1 session																																			
2	2 sessions																																			
3	3 sessions																																			
4	4 sessions																																			
5	5 or more sessions																																			
1032	pat_loc_cbt_chw_v1 Show the field ONLY if: [pat_cbt_chw_v1] = '1'	Group location	notes, Required																																	
1033	pat_no_cbt_chw_v1 Show the field ONLY if: [pat_cbt_chw_v1] = '0'	Reasons participant didn't attend a smoking group	checkbox, Required <table border="1"> <tr> <td>1</td> <td>pat_no_cbt_chw_v1__1</td> <td>I don't have a ride</td> </tr> <tr> <td>2</td> <td>pat_no_cbt_chw_v1__2</td> <td>Fear of adverse effects,</td> </tr> <tr> <td>3</td> <td>pat_no_cbt_chw_v1__3</td> <td>Family/friends/media recommended not going</td> </tr> <tr> <td>4</td> <td>pat_no_cbt_chw_v1__4</td> <td>I did it before and didn't like it (their past experiences),</td> </tr> <tr> <td>5</td> <td>pat_no_cbt_chw_v1__5</td> <td>I don't understand what the group is about</td> </tr> <tr> <td>6</td> <td>pat_no_cbt_chw_v1__6</td> <td>I'd rather quit smoking on my own</td> </tr> <tr> <td>7</td> <td>pat_no_cbt_chw_v1__7</td> <td>I don't want to quit smoking</td> </tr> <tr> <td>8</td> <td>pat_no_cbt_chw_v1__8</td> <td>Other</td> </tr> <tr> <td>9</td> <td>pat_no_cbt_chw_v1__9</td> <td>Prefer not to answer</td> </tr> </table>	1	pat_no_cbt_chw_v1__1	I don't have a ride	2	pat_no_cbt_chw_v1__2	Fear of adverse effects,	3	pat_no_cbt_chw_v1__3	Family/friends/media recommended not going	4	pat_no_cbt_chw_v1__4	I did it before and didn't like it (their past experiences),	5	pat_no_cbt_chw_v1__5	I don't understand what the group is about	6	pat_no_cbt_chw_v1__6	I'd rather quit smoking on my own	7	pat_no_cbt_chw_v1__7	I don't want to quit smoking	8	pat_no_cbt_chw_v1__8	Other	9	pat_no_cbt_chw_v1__9	Prefer not to answer						
1	pat_no_cbt_chw_v1__1	I don't have a ride																																		
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9	pat_no_cbt_chw_v1__9	Prefer not to answer																																		

1034	other_pat_no_cbt_chw_v1 Show the field ONLY if: [pat_no_cbt_chw_v1(8)] = '1'	Other	text, Required																									
1035	notes3_chw_v1	Notes	notes Custom alignment: RH																									
1036	session_content_chw_v1 Show the field ONLY if: [seen_by_pcp_chw_v1] = '1' or [seen_by_pcp_chw_v1] = '2' or [seen_by_pcp_chw_v1] = '4' or [seen_by_pcp_chw_v1] = '5' or [seen_by_pcp_chw_v1] = '3'	Session Content	checkbox, Required <table><tr><td>1</td><td>session_content_chw_v1__1</td><td>Engagement and involvement</td></tr><tr><td>2</td><td>session_content_chw_v1__2</td><td>Motivational interviewing</td></tr><tr><td>3</td><td>session_content_chw_v1__3</td><td>Motivational tools</td></tr><tr><td>4</td><td>session_content_chw_v1__4</td><td>Education topic</td></tr><tr><td>5</td><td>session_content_chw_v1__5</td><td>Medication compliance</td></tr><tr><td>6</td><td>session_content_chw_v1__6</td><td>Care coordination</td></tr><tr><td>7</td><td>session_content_chw_v1__7</td><td>Progress</td></tr><tr><td>8</td><td>session_content_chw_v1__8</td><td>Other</td></tr></table>		1	session_content_chw_v1__1	Engagement and involvement	2	session_content_chw_v1__2	Motivational interviewing	3	session_content_chw_v1__3	Motivational tools	4	session_content_chw_v1__4	Education topic	5	session_content_chw_v1__5	Medication compliance	6	session_content_chw_v1__6	Care coordination	7	session_content_chw_v1__7	Progress	8	session_content_chw_v1__8	Other
1	session_content_chw_v1__1	Engagement and involvement																										
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3	session_content_chw_v1__3	Motivational tools																										
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5	session_content_chw_v1__5	Medication compliance																										
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7	session_content_chw_v1__7	Progress																										
8	session_content_chw_v1__8	Other																										
1037	session_engag_chw_v1 Show the field ONLY if: [session_content_chw_v1(1)] = '1'	1, Engagement and involvement	notes Custom alignment: LH																									
1038	pat_mi_chw_v1 Show the field ONLY if: [session_content_chw_v1(2)] = '1'	2. Motivational Interviewing	notes Custom alignment: LH																									
1039	session_pros_cons_chw_v1 Show the field ONLY if: [session_content_chw_v1(3)] = '1'	3.Motivational tools (include benefits and barriers-be specific! Use participant's own words when possible)	checkbox <table><tr><td>1</td><td>session_pros_cons_chw_v1__1</td><td>Identifying pros of smoking</td></tr><tr><td>2</td><td>session_pros_cons_chw_v1__2</td><td>Identifying cons of smoking</td></tr><tr><td>3</td><td>session_pros_cons_chw_v1__3</td><td>Health benefits from quitting smoking</td></tr><tr><td>4</td><td>session_pros_cons_chw_v1__4</td><td>Cessation meds</td></tr><tr><td>5</td><td>session_pros_cons_chw_v1__5</td><td>Promoting smoking groups</td></tr><tr><td>6</td><td>session_pros_cons_chw_v1__6</td><td>Other</td></tr></table>		1	session_pros_cons_chw_v1__1	Identifying pros of smoking	2	session_pros_cons_chw_v1__2	Identifying cons of smoking	3	session_pros_cons_chw_v1__3	Health benefits from quitting smoking	4	session_pros_cons_chw_v1__4	Cessation meds	5	session_pros_cons_chw_v1__5	Promoting smoking groups	6	session_pros_cons_chw_v1__6	Other						
1	session_pros_cons_chw_v1__1	Identifying pros of smoking																										
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1040	other_session_pros_cons_chw_v1 Show the field ONLY if: [session_pros_cons_chw_v1(6)] = '1'	Other Motivational Tools	text, Required																									
1041	session_education_chw_v1 Show the field ONLY if: [session_content_chw_v1(4)] = '1'	4. Education Topic (check all that apply)	checkbox <table><tr><td>1</td><td>session_education_chw_v1__1</td><td>Withdrawal symptoms</td></tr><tr><td>2</td><td>session_education_chw_v1__2</td><td>Coping with withdrawal</td></tr><tr><td>3</td><td>session_education_chw_v1__3</td><td>Cessation medication</td></tr><tr><td>4</td><td>session_education_chw_v1__4</td><td>4Ds</td></tr><tr><td>5</td><td>session_education_chw_v1__5</td><td>Other</td></tr></table>		1	session_education_chw_v1__1	Withdrawal symptoms	2	session_education_chw_v1__2	Coping with withdrawal	3	session_education_chw_v1__3	Cessation medication	4	session_education_chw_v1__4	4Ds	5	session_education_chw_v1__5	Other									
1	session_education_chw_v1__1	Withdrawal symptoms																										
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5	session_education_chw_v1__5	Other																										
1042	other_education_chw_v1 Show the field ONLY if: [session_education_chw_v1(5)] = '1'	Other Education Topic	text, Required																									
1043	session_check_meds_chw_v1 Show the field ONLY if: [session_content_chw_v1(5)] = '1'	5. Check medication compliance	notes Custom alignment: LH																									
1044	session_care_chw_v1 Show the field ONLY if: [session_content_chw_v1(6)] = '1'	6. Care coordination (check all that apply)	checkbox <table><tr><td>1</td><td>session_care_chw_v1__1</td><td>Scheduling PCP visit</td></tr><tr><td>2</td><td>session_care_chw_v1__2</td><td>Smoking cessation group</td></tr><tr><td>3</td><td>session_care_chw_v1__3</td><td>Pharmacy and medications</td></tr></table>		1	session_care_chw_v1__1	Scheduling PCP visit	2	session_care_chw_v1__2	Smoking cessation group	3	session_care_chw_v1__3	Pharmacy and medications															
1	session_care_chw_v1__1	Scheduling PCP visit																										
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3	session_care_chw_v1__3	Pharmacy and medications																										

1045	session_progress_chw_v1 Show the field ONLY if: [session_content_chw_v1(7)] = '1'	7. Reinforcing progress and identifying what has been helpful in achieving gains (e.g., scheduling PCP visit, smoking cessation group)	notes Custom alignment: LH																								
1046	session_other_chw_v1 Show the field ONLY if: [session_content_chw_v1(8)] = '1'	8. Other	notes Custom alignment: LH																								
1047	session_descript_chw_v1	Brief description of the session	notes, Required Custom alignment: LH																								
1048	session_next_goals_chw_v1	Goals for next session	notes, Required Custom alignment: LH																								
1049	next_visit_chw	Next visit will be	text (datetime_mdy), Required Field Annotation: @HIDEBUTTON																								
1050	name_chw_v1	CHW	radio, Required <table><tr><td>1</td><td>Alexandra Fortune</td></tr><tr><td>2</td><td>Ashley Newman</td></tr><tr><td>3</td><td>Aysha Peralta</td></tr><tr><td>4</td><td>Erin Hanrahan</td></tr><tr><td>5</td><td>John Dowd</td></tr><tr><td>6</td><td>Karlie Marrs</td></tr><tr><td>7</td><td>Leeza Rojas</td></tr><tr><td>8</td><td>Madalyn Davis</td></tr><tr><td>9</td><td>Madeleine Fontaine</td></tr><tr><td>10</td><td>Megan Donnelly</td></tr><tr><td>11</td><td>Morgan Boudreau</td></tr><tr><td>12</td><td>Nina Cherilus</td></tr></table>	1	Alexandra Fortune	2	Ashley Newman	3	Aysha Peralta	4	Erin Hanrahan	5	John Dowd	6	Karlie Marrs	7	Leeza Rojas	8	Madalyn Davis	9	Madeleine Fontaine	10	Megan Donnelly	11	Morgan Boudreau	12	Nina Cherilus
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11	Morgan Boudreau																										
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1051	contact_sheet_all_visits_chw_1_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete																		
0	Incomplete																										
1	Unverified																										
2	Complete																										
Instrument: Contact Sheet All Visits CHW (contact_sheet_all_visits_chw) <div>^ Collapse</div>																											
1052	date_all_visits_chw	Visit Date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																								
1053	start_all_visits_chw	Start time	text (time), Required																								
1054	end_all_visits_chw	End time	text (time), Required																								
1055	visit_modality_chw	Visit modality	radio, Required <table><tr><td>1</td><td>Phone visit</td></tr><tr><td>2</td><td>In person visit</td></tr></table>	1	Phone visit	2	In person visit																				
1	Phone visit																										
2	In person visit																										
1056	reason_phone_chw Show the field ONLY if: [visit_modality_chw] = '1'	Reasons for the phone visit (select all that apply)	checkbox, Required <table><tr><td>1</td><td>reason_phone_chw__1</td><td>Help preparing for quit day</td></tr><tr><td>2</td><td>reason_phone_chw__2</td><td>Quit day</td></tr><tr><td>3</td><td>reason_phone_chw__3</td><td>Check for withdrawal symptoms</td></tr><tr><td>4</td><td>reason_phone_chw__4</td><td>Medication compliance/side effects</td></tr><tr><td>5</td><td>reason_phone_chw__5</td><td>Other</td></tr></table>	1	reason_phone_chw__1	Help preparing for quit day	2	reason_phone_chw__2	Quit day	3	reason_phone_chw__3	Check for withdrawal symptoms	4	reason_phone_chw__4	Medication compliance/side effects	5	reason_phone_chw__5	Other									
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2	reason_phone_chw__2	Quit day																									
3	reason_phone_chw__3	Check for withdrawal symptoms																									
4	reason_phone_chw__4	Medication compliance/side effects																									
5	reason_phone_chw__5	Other																									
1057	other_reason_phone_chw Show the field ONLY if: [reason_phone_chw(5)] = '1'	Other reason for a phone visit	text, Required																								

1058	reasons_contact_chw Show the field ONLY if: [visit_modality_chw] = '2'	Reasons for In Person meeting (select all that apply)	checkbox, Required <table><tr><td>1</td><td>reasons_contact_chw__1</td><td>Initial visit/obtain consent</td></tr><tr><td>2</td><td>reasons_contact_chw__2</td><td>Intervention visit</td></tr><tr><td>3</td><td>reasons_contact_chw__3</td><td>Taking participant to smoking group</td></tr><tr><td>4</td><td>reasons_contact_chw__4</td><td>Taking participant to PCP</td></tr><tr><td>5</td><td>reasons_contact_chw__5</td><td>Other</td></tr><tr><td>6</td><td>reasons_contact_chw__6</td><td>Medication Compliance/side effects</td></tr></table>	1	reasons_contact_chw__1	Initial visit/obtain consent	2	reasons_contact_chw__2	Intervention visit	3	reasons_contact_chw__3	Taking participant to smoking group	4	reasons_contact_chw__4	Taking participant to PCP	5	reasons_contact_chw__5	Other	6	reasons_contact_chw__6	Medication Compliance/side effects
1	reasons_contact_chw__1	Initial visit/obtain consent																			
2	reasons_contact_chw__2	Intervention visit																			
3	reasons_contact_chw__3	Taking participant to smoking group																			
4	reasons_contact_chw__4	Taking participant to PCP																			
5	reasons_contact_chw__5	Other																			
6	reasons_contact_chw__6	Medication Compliance/side effects																			
1059	other_reason_contact_chw Show the field ONLY if: [reasons_contact_chw(5)] = '1'	Other reason for an In Person Meeting	text, Required																		
1060	smoking_chw	Section Header: <i>Smoking Behavior</i> Has the participant smoked in the past 7 days?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																				
0	No																				
1061	notes1_chw	Notes	notes Custom alignment: RH																		
1062	tobacco_prod_chw	Which tobacco products does the participant currently smoke? (I.e. Cigarettes, Cigars, Cigarillos, Rollies, Mini Cigars, Pipe) Select all that apply	checkbox <table><tr><td>1</td><td>tobacco_prod_chw__1</td><td>Cigarettes</td></tr><tr><td>2</td><td>tobacco_prod_chw__2</td><td>Mini cigars (i.e. double diamonds)</td></tr><tr><td>3</td><td>tobacco_prod_chw__3</td><td>loose tobacco (roll your own, rollies)</td></tr><tr><td>4</td><td>tobacco_prod_chw__4</td><td>e-cigarettes/vaping</td></tr><tr><td>5</td><td>tobacco_prod_chw__5</td><td>Other</td></tr><tr><td>6</td><td>tobacco_prod_chw__6</td><td>Quit smoking</td></tr></table>	1	tobacco_prod_chw__1	Cigarettes	2	tobacco_prod_chw__2	Mini cigars (i.e. double diamonds)	3	tobacco_prod_chw__3	loose tobacco (roll your own, rollies)	4	tobacco_prod_chw__4	e-cigarettes/vaping	5	tobacco_prod_chw__5	Other	6	tobacco_prod_chw__6	Quit smoking
1	tobacco_prod_chw__1	Cigarettes																			
2	tobacco_prod_chw__2	Mini cigars (i.e. double diamonds)																			
3	tobacco_prod_chw__3	loose tobacco (roll your own, rollies)																			
4	tobacco_prod_chw__4	e-cigarettes/vaping																			
5	tobacco_prod_chw__5	Other																			
6	tobacco_prod_chw__6	Quit smoking																			
1063	cpd_chw Show the field ONLY if: [smoking_chw] = '1'	On average, how many cigarettes (or other tobacco product) per day has the participant smoked in past 7 days?	text (integer), Required																		
1064	cpd_no_daily_chw	COMPLETE ONLY IF PARTICIPANT HASN'T BEEN SMOKING EVERY DAY DURING THE PAST WEEK On average, how many cigarettes (or other tobacco product) per WEEK has the participant smoked in past week?	text																		
1065	last_cigarette_chw Show the field ONLY if: [smoking_chw] = '1' or [smoking_chw] = '0'	Time of last cigarette (or other tobacco product)	text (datetime_mdy), Required Custom alignment: RH Field Annotation: @HIDEBUTTON																		
1066	pat_co_done_chw Show the field ONLY if: [visit_modality_chw] = '2'	Section Header: <i>Previous CO measure: Visit 1: [visit_1_arm_2][expired_co_chw_v1][time_co_chw_v1] Visit 2: [visit_2_arm_2][expired_co_chw][time_co_chw] Visit 3: [visit_3_arm_2][expired_co_chw][time_co_chw] Visit 4: [visit_4_arm_2][expired_co_chw][time_co_chw] Visit 5: [visit_5_arm_2][expired_co_chw][time_co_chw] Visit 6: [visit_6_arm_2][expired_co_chw][time_co_chw] Visit 7: [visit_7_arm_2][expired_co_chw][time_co_chw] Visit 8: [visit_8_arm_2][expired_co_chw][time_co_chw] Visit 9: [visit_9_arm_2][expired_co_chw][time_co_chw] Visit 10: [visit_10_arm_2][expired_co_chw][time_co_chw] Visit 11: [visit_11_arm_2][expired_co_chw][time_co_chw] Visit 12: [visit_12_arm_2][expired_co_chw][time_co_chw] Visit 13: [visit_13_arm_2][expired_co_chw][time_co_chw] Visit 14: [visit_14_arm_2][expired_co_chw][time_co_chw] Visit 15: [visit_15_arm_2][expired_co_chw][time_co_chw] Visit 16: [visit_16_arm_2][expired_co_chw][time_co_chw] Visit 17: [visit_17_arm_2][expired_co_chw][time_co_chw] Visit 18: [visit_18_arm_2][expired_co_chw][time_co_chw] Visit 19: [visit_19_arm_2][expired_co_chw][time_co_chw] Visit 20: [visit_20_arm_2][expired_co_chw][time_co_chw]</i> Was CO testing completed today?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																				
0	No																				
1067	pat_yes_co_chw Show the field ONLY if: [pat_co_done_chw] = '1'	Reasons for CO measurement	checkbox, Required <table><tr><td>1</td><td>pat_yes_co_chw__1</td><td>Last CO month was done over a month ago</td></tr><tr><td>2</td><td>pat_yes_co_chw__2</td><td>Participant changed smoking behavior after last CO measurement (quit or relapsed)</td></tr><tr><td>3</td><td>pat_yes_co_chw__3</td><td>Participant asked for it</td></tr><tr><td>4</td><td>pat_yes_co_chw__4</td><td>Other</td></tr></table>	1	pat_yes_co_chw__1	Last CO month was done over a month ago	2	pat_yes_co_chw__2	Participant changed smoking behavior after last CO measurement (quit or relapsed)	3	pat_yes_co_chw__3	Participant asked for it	4	pat_yes_co_chw__4	Other						
1	pat_yes_co_chw__1	Last CO month was done over a month ago																			
2	pat_yes_co_chw__2	Participant changed smoking behavior after last CO measurement (quit or relapsed)																			
3	pat_yes_co_chw__3	Participant asked for it																			
4	pat_yes_co_chw__4	Other																			
1068	pat_other_co_chw Show the field ONLY if: [pat_yes_co_chw(4)] = '1'	Other	text, Required																		

1069	expired_co_chw Show the field ONLY if: [pat_co_done_chw] = '1'	Expired CO reading (ppm)	text (integer, Min: 0, Max: 100), Required																																
1070	time_co_chw Show the field ONLY if: [pat_co_done_chw] = '1'	Date of CO reading	text (date_mdy), Required Field Annotation: @HIDEBUTTON																																
1071	hour_co_chw Show the field ONLY if: [pat_co_done_chw] = '1'	Time of CO reading	text (time), Required																																
1072	co_monitor_chw Show the field ONLY if: [pat_co_done_chw] = '1'	CO Monitor ID	radio, Required <table><tr><td>1</td><td>A</td></tr><tr><td>2</td><td>B</td></tr><tr><td>3</td><td>C</td></tr><tr><td>4</td><td>D</td></tr><tr><td>5</td><td>E</td></tr><tr><td>6</td><td>F</td></tr><tr><td>7</td><td>G</td></tr><tr><td>8</td><td>H</td></tr><tr><td>9</td><td>I</td></tr><tr><td>10</td><td>J</td></tr><tr><td>11</td><td>K</td></tr><tr><td>12</td><td>L</td></tr><tr><td>13</td><td>M</td></tr><tr><td>14</td><td>N</td></tr><tr><td>15</td><td>O</td></tr><tr><td>16</td><td>P</td></tr></table> Custom alignment: RH	1	A	2	B	3	C	4	D	5	E	6	F	7	G	8	H	9	I	10	J	11	K	12	L	13	M	14	N	15	O	16	P
1	A																																		
2	B																																		
3	C																																		
4	D																																		
5	E																																		
6	F																																		
7	G																																		
8	H																																		
9	I																																		
10	J																																		
11	K																																		
12	L																																		
13	M																																		
14	N																																		
15	O																																		
16	P																																		
1073	co_exec_chw Show the field ONLY if: [pat_co_done_chw] = '1'	Was CO measuring executed properly?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																												
1	Yes																																		
0	No																																		
1074	pat_no_co_chw Show the field ONLY if: [pat_co_done_chw] = '0'	Reasons for NO CO measurement	checkbox, Required <table><tr><td>1</td><td>pat_no_co_chw__1</td><td>CO was done within the past month and there was no change in smoking behavior</td></tr><tr><td>2</td><td>pat_no_co_chw__2</td><td>Participant refused</td></tr><tr><td>3</td><td>pat_no_co_chw__3</td><td>Participant unable (respiratory illness, symptomatic)</td></tr><tr><td>4</td><td>pat_no_co_chw__4</td><td>Other</td></tr></table>	1	pat_no_co_chw__1	CO was done within the past month and there was no change in smoking behavior	2	pat_no_co_chw__2	Participant refused	3	pat_no_co_chw__3	Participant unable (respiratory illness, symptomatic)	4	pat_no_co_chw__4	Other																				
1	pat_no_co_chw__1	CO was done within the past month and there was no change in smoking behavior																																	
2	pat_no_co_chw__2	Participant refused																																	
3	pat_no_co_chw__3	Participant unable (respiratory illness, symptomatic)																																	
4	pat_no_co_chw__4	Other																																	
1075	other_no_co_chw Show the field ONLY if: [pat_no_co_chw(4)] = '1'	Other	text, Required																																
1076	notes_co_chw	Notes	notes Custom alignment: RH																																
1077	seen_by_pcp_chw Show the field ONLY if: [visit_modality_chw] = '2'	Was subject seen by primary care team since last meeting?	radio, Required <table><tr><td>1</td><td>None scheduled</td></tr><tr><td>2</td><td>No, missed visit</td></tr><tr><td>3</td><td>Yes, smoking discussed</td></tr><tr><td>4</td><td>Yes, smoking not discussed</td></tr><tr><td>5</td><td>Unknown</td></tr></table>	1	None scheduled	2	No, missed visit	3	Yes, smoking discussed	4	Yes, smoking not discussed	5	Unknown																						
1	None scheduled																																		
2	No, missed visit																																		
3	Yes, smoking discussed																																		
4	Yes, smoking not discussed																																		
5	Unknown																																		
1078	pcp_recommend_pat_chw Show the field ONLY if: [seen_by_pcp_chw] = '3'	Did the PCP recommend that the participant quit smoking?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																												
1	Yes																																		
0	No																																		

1079	pcp_prescribed_pat_chw Show the field ONLY if: [seen_by_pcp_chw] = '3'	Did PCP prescribe smoking cessation medication?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
1080	pat_what_prescribed_chw Show the field ONLY if: [pcp_prescribed_pat_chw] = '1' or [reason_phone_chw(4)] = '1'	What did the PCP prescribe?	checkbox, Required <table border="1"> <tr> <td>1</td> <td>pat_what_prescribed_chw__1</td> <td>Varenicline (i.e. Chantix)</td> </tr> <tr> <td>2</td> <td>pat_what_prescribed_chw__2</td> <td>Nicotine patch</td> </tr> <tr> <td>3</td> <td>pat_what_prescribed_chw__3</td> <td>Bupropion (i.e. Wellbutrin, Zyban)</td> </tr> <tr> <td>4</td> <td>pat_what_prescribed_chw__4</td> <td>Nicotine gum</td> </tr> <tr> <td>5</td> <td>pat_what_prescribed_chw__5</td> <td>Nicotine lozenge</td> </tr> <tr> <td>6</td> <td>pat_what_prescribed_chw__6</td> <td>Other</td> </tr> </table>	1	pat_what_prescribed_chw__1	Varenicline (i.e. Chantix)	2	pat_what_prescribed_chw__2	Nicotine patch	3	pat_what_prescribed_chw__3	Bupropion (i.e. Wellbutrin, Zyban)	4	pat_what_prescribed_chw__4	Nicotine gum	5	pat_what_prescribed_chw__5	Nicotine lozenge	6	pat_what_prescribed_chw__6	Other
1	pat_what_prescribed_chw__1	Varenicline (i.e. Chantix)																			
2	pat_what_prescribed_chw__2	Nicotine patch																			
3	pat_what_prescribed_chw__3	Bupropion (i.e. Wellbutrin, Zyban)																			
4	pat_what_prescribed_chw__4	Nicotine gum																			
5	pat_what_prescribed_chw__5	Nicotine lozenge																			
6	pat_what_prescribed_chw__6	Other																			
1081	other_prescribed_chw Show the field ONLY if: [pat_what_prescribed_chw(6)] = '1'	Other	text, Required																		
1082	pat_filled_med_chw Show the field ONLY if: [pcp_prescribed_pat_chw] = '1' or [reason_phone_chw(4)] = '1'	Did the participant fill the prescription for the smoking cessation medication?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
1083	pat_what_taking_chw Show the field ONLY if: [pcp_prescribed_pat_chw] = '1' or [reason_phone_chw(4)] = '1' or [reasons_contact_chw(6)] = '1'	What is the participant taking?	checkbox, Required <table border="1"> <tr> <td>1</td> <td>pat_what_taking_chw__1</td> <td>Varenicline (i.e. Chantix)</td> </tr> <tr> <td>2</td> <td>pat_what_taking_chw__2</td> <td>Nicotine patch</td> </tr> <tr> <td>3</td> <td>pat_what_taking_chw__3</td> <td>Bupropion (i.e. Wellbutrin, Zyban)</td> </tr> <tr> <td>4</td> <td>pat_what_taking_chw__4</td> <td>Nicotine gum</td> </tr> <tr> <td>5</td> <td>pat_what_taking_chw__5</td> <td>Nicotine lozenge</td> </tr> <tr> <td>6</td> <td>pat_what_taking_chw__6</td> <td>Other</td> </tr> </table>	1	pat_what_taking_chw__1	Varenicline (i.e. Chantix)	2	pat_what_taking_chw__2	Nicotine patch	3	pat_what_taking_chw__3	Bupropion (i.e. Wellbutrin, Zyban)	4	pat_what_taking_chw__4	Nicotine gum	5	pat_what_taking_chw__5	Nicotine lozenge	6	pat_what_taking_chw__6	Other
1	pat_what_taking_chw__1	Varenicline (i.e. Chantix)																			
2	pat_what_taking_chw__2	Nicotine patch																			
3	pat_what_taking_chw__3	Bupropion (i.e. Wellbutrin, Zyban)																			
4	pat_what_taking_chw__4	Nicotine gum																			
5	pat_what_taking_chw__5	Nicotine lozenge																			
6	pat_what_taking_chw__6	Other																			
1084	pat_other_med_chw Show the field ONLY if: [pat_what_taking_chw(6)] = '1'	Other	text, Required																		
1085	pat_var_dose_chw Show the field ONLY if: [pat_what_taking_chw(1)] = '1'	Varenicline (Chantix) Dose	radio, Required <table border="1"> <tr> <td>1</td> <td>0.5 mg once a day</td> </tr> <tr> <td>2</td> <td>0.5 mg twice a day</td> </tr> <tr> <td>3</td> <td>1 mg once a day</td> </tr> <tr> <td>4</td> <td>1 mg twice a day</td> </tr> <tr> <td>5</td> <td>Other</td> </tr> </table>	1	0.5 mg once a day	2	0.5 mg twice a day	3	1 mg once a day	4	1 mg twice a day	5	Other								
1	0.5 mg once a day																				
2	0.5 mg twice a day																				
3	1 mg once a day																				
4	1 mg twice a day																				
5	Other																				
1086	pat_var_other_dose_chw Show the field ONLY if: [pat_var_dose_chw] = '5'	Other Dose	text, Required																		
1087	pat_var_start_chw Show the field ONLY if: [pat_what_taking_chw(1)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																		
1088	pat_7days_var_chw Show the field ONLY if: [pat_what_taking_chw(1)] = '1'	Days used as prescribed in past 7 days	radio, Required <table border="1"> <tr> <td>1</td> <td>1</td> </tr> <tr> <td>2</td> <td>2</td> </tr> <tr> <td>3</td> <td>3</td> </tr> <tr> <td>4</td> <td>4</td> </tr> <tr> <td>5</td> <td>5</td> </tr> <tr> <td>6</td> <td>6</td> </tr> <tr> <td>7</td> <td>7</td> </tr> </table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7				
1	1																				
2	2																				
3	3																				
4	4																				
5	5																				
6	6																				
7	7																				
1089	var_still_chw Show the field ONLY if: [pat_what_taking_chw(1)] = '1'	Is participant still taking Varenicline?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				

1090	pat_var_end_chw Show the field ONLY if: [var_still_chw] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1091	pat_bup_dose_chw Show the field ONLY if: [pat_what_taking_chw(3)] = '1'	Bupropion (Wellbutrin, Zyban) dose	radio, Required <table><tr><td>1</td><td>150 mg once a day</td></tr><tr><td>2</td><td>150 mg twice a day</td></tr><tr><td>3</td><td>Other</td></tr></table>	1	150 mg once a day	2	150 mg twice a day	3	Other								
1	150 mg once a day																
2	150 mg twice a day																
3	Other																
1092	pat_bup_other_dose_chw Show the field ONLY if: [pat_bup_dose_chw] = '3'	Other Dose	text, Required														
1093	pat_bup_start_chw Show the field ONLY if: [pat_what_taking_chw(3)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1094	pat_7days_bup_chw Show the field ONLY if: [pat_what_taking_chw(3)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
3	3																
4	4																
5	5																
6	6																
7	7																
1095	bup_still_chw Show the field ONLY if: [pat_what_taking_chw(3)] = '1'	Is participant still taking Bupropion?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1096	pat_bup_end_chw Show the field ONLY if: [bup_still_chw] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1097	pat_patch_dose_chw Show the field ONLY if: [pat_what_taking_chw(2)] = '1'	Nicotine patch dose	radio, Required <table><tr><td>1</td><td>21 mg</td></tr><tr><td>2</td><td>14 mg</td></tr><tr><td>3</td><td>7 mg</td></tr><tr><td>4</td><td>Other</td></tr></table>	1	21 mg	2	14 mg	3	7 mg	4	Other						
1	21 mg																
2	14 mg																
3	7 mg																
4	Other																
1098	pat_patch_other_dose_chw Show the field ONLY if: [pat_patch_dose_chw] = '4'	Other Dose	text, Required														
1099	pat_patch_start_chw Show the field ONLY if: [pat_what_taking_chw(2)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1100	pat_7days_patch_chw Show the field ONLY if: [pat_what_taking_chw(2)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
3	3																
4	4																
5	5																
6	6																
7	7																
1101	patch_still_chw Show the field ONLY if: [pat_what_taking_chw(2)] = '1'	Is participant still using the patch?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1102	pat_patch_end_chw Show the field ONLY if: [patch_still_chw] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														

1103	pat_gum_dose_chw Show the field ONLY if: [pat_what_taking_chw(4)] = '1'	Nicotine gum	radio, Required <table><tr><td>1</td><td>4-6 mg per day</td></tr><tr><td>2</td><td>8-10 mg per day</td></tr><tr><td>3</td><td>12-14 mg per day</td></tr><tr><td>4</td><td>16-18 mg per day</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	4-6 mg per day	2	8-10 mg per day	3	12-14 mg per day	4	16-18 mg per day	5	Other				
1	4-6 mg per day																
2	8-10 mg per day																
3	12-14 mg per day																
4	16-18 mg per day																
5	Other																
1104	pat_gum_other_dose_chw Show the field ONLY if: [pat_gum_dose_chw] = '5'	Other Dose	text, Required														
1105	pat_gum_start_chw Show the field ONLY if: [pat_what_taking_chw(4)] = '1'	Start date	text (date_mdy), Required														
1106	pat_7days_gum_chw Show the field ONLY if: [pat_what_taking_chw(4)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
3	3																
4	4																
5	5																
6	6																
7	7																
1107	gum_still_chw Show the field ONLY if: [pat_what_taking_chw(4)] = '1'	Is participant still using the gum?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1108	pat_gum_end_chw Show the field ONLY if: [gum_still_chw] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1109	pat_loz_dose_chw Show the field ONLY if: [pat_what_taking_chw(5)] = '1'	Nicotine lozenges	radio, Required <table><tr><td>1</td><td>4-6 mg per day</td></tr><tr><td>2</td><td>8-10 mg per day</td></tr><tr><td>3</td><td>12-14 mg per day</td></tr><tr><td>4</td><td>16-18 mg per day</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	4-6 mg per day	2	8-10 mg per day	3	12-14 mg per day	4	16-18 mg per day	5	Other				
1	4-6 mg per day																
2	8-10 mg per day																
3	12-14 mg per day																
4	16-18 mg per day																
5	Other																
1110	pat_loz_other_dose_chw Show the field ONLY if: [pat_loz_dose_chw] = '5'	Other Dose	text, Required														
1111	pat_loz_start_chw Show the field ONLY if: [pat_what_taking_chw(5)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1112	pat_7days_loz_chw Show the field ONLY if: [pat_what_taking_chw(5)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
3	3																
4	4																
5	5																
6	6																
7	7																
1113	gum_still_chw_2 Show the field ONLY if: [pat_what_taking_chw(5)] = '1'	Is participant still using the lozenges?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1114	pat_loz_end_chw Show the field ONLY if: [gum_still_chw_2] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														

1115	pat_no_meds_chw Show the field ONLY if: [pat_filled_med_chw] = '0'	if not taking smoking cessation medication, why not	checkbox, Required <table><tr><td>1</td><td>pat_no_meds_chw__1</td><td>I don't need/want to take more medications</td></tr><tr><td>2</td><td>pat_no_meds_chw__2</td><td>Fear of adverse effects,</td></tr><tr><td>3</td><td>pat_no_meds_chw__3</td><td>Family/friends/media recommended not taking it</td></tr><tr><td>4</td><td>pat_no_meds_chw__4</td><td>I took it before and didn't like the effect (their past experiences),</td></tr><tr><td>5</td><td>pat_no_meds_chw__5</td><td>I didn't understand what the Treatment was about</td></tr><tr><td>6</td><td>pat_no_meds_chw__6</td><td>I couldn't afford it</td></tr><tr><td>7</td><td>pat_no_meds_chw__7</td><td>I'd rather go to smoking groups</td></tr><tr><td>8</td><td>pat_no_meds_chw__8</td><td>I forgot</td></tr><tr><td>9</td><td>pat_no_meds_chw__9</td><td>Other</td></tr><tr><td>10</td><td>pat_no_meds_chw__10</td><td>Prefer not to answer</td></tr><tr><td>11</td><td>pat_no_meds_chw__11</td><td>I didn't want to quit smoking/ambivalent /changed my mind</td></tr></table>	1	pat_no_meds_chw__1	I don't need/want to take more medications	2	pat_no_meds_chw__2	Fear of adverse effects,	3	pat_no_meds_chw__3	Family/friends/media recommended not taking it	4	pat_no_meds_chw__4	I took it before and didn't like the effect (their past experiences),	5	pat_no_meds_chw__5	I didn't understand what the Treatment was about	6	pat_no_meds_chw__6	I couldn't afford it	7	pat_no_meds_chw__7	I'd rather go to smoking groups	8	pat_no_meds_chw__8	I forgot	9	pat_no_meds_chw__9	Other	10	pat_no_meds_chw__10	Prefer not to answer	11	pat_no_meds_chw__11	I didn't want to quit smoking/ambivalent /changed my mind
1	pat_no_meds_chw__1	I don't need/want to take more medications																																		
2	pat_no_meds_chw__2	Fear of adverse effects,																																		
3	pat_no_meds_chw__3	Family/friends/media recommended not taking it																																		
4	pat_no_meds_chw__4	I took it before and didn't like the effect (their past experiences),																																		
5	pat_no_meds_chw__5	I didn't understand what the Treatment was about																																		
6	pat_no_meds_chw__6	I couldn't afford it																																		
7	pat_no_meds_chw__7	I'd rather go to smoking groups																																		
8	pat_no_meds_chw__8	I forgot																																		
9	pat_no_meds_chw__9	Other																																		
10	pat_no_meds_chw__10	Prefer not to answer																																		
11	pat_no_meds_chw__11	I didn't want to quit smoking/ambivalent /changed my mind																																		
1116	other_pat_no_meds_chw Show the field ONLY if: [pat_no_meds_chw(9)] = '1'	Other	text, Required																																	
1117	pat_recommend_cbt_chw Show the field ONLY if: [seen_by_pcp_chw] = '3'	Did the PCP recommend attending a smoking group?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																													
1	Yes																																			
0	No																																			
1118	pat_cbt_chw Show the field ONLY if: [pat_recommend_cbt_chw] = '1'	Is participant attending a smoking cessation group?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																													
1	Yes																																			
0	No																																			
1119	pat_cbt_start_chw Show the field ONLY if: [pat_cbt_chw] = '1'	Date started	text (date_mdy), Required Field Annotation: @HIDEBUTTON																																	
1120	pat_att_cbt_chw Show the field ONLY if: [pat_cbt_chw] = '1'	Attendance in past month	radio <table><tr><td>1</td><td>1 session</td></tr><tr><td>2</td><td>2 sessions</td></tr><tr><td>3</td><td>3 sessions</td></tr><tr><td>4</td><td>4 sessions</td></tr><tr><td>5</td><td>5 sessions or more</td></tr></table>	1	1 session	2	2 sessions	3	3 sessions	4	4 sessions	5	5 sessions or more																							
1	1 session																																			
2	2 sessions																																			
3	3 sessions																																			
4	4 sessions																																			
5	5 sessions or more																																			
1121	pat_loc_cbt_chw Show the field ONLY if: [pat_cbt_chw] = '1'	Group location	notes, Required																																	
1122	pat_no_cbt_chw Show the field ONLY if: [pat_cbt_chw] = '0'	If not attending cessation group, why not	checkbox, Required <table><tr><td>1</td><td>pat_no_cbt_chw__1</td><td>I don't have a ride</td></tr><tr><td>2</td><td>pat_no_cbt_chw__2</td><td>Fear of adverse effects,</td></tr><tr><td>3</td><td>pat_no_cbt_chw__3</td><td>Family/friends/media recommended not going</td></tr><tr><td>4</td><td>pat_no_cbt_chw__4</td><td>I did it before and didn't like it (their past experiences),</td></tr><tr><td>5</td><td>pat_no_cbt_chw__5</td><td>I don't understand what the group is about</td></tr><tr><td>6</td><td>pat_no_cbt_chw__6</td><td>I'd rather quit smoking on my own</td></tr><tr><td>7</td><td>pat_no_cbt_chw__7</td><td>I don't want to quit smoking</td></tr><tr><td>8</td><td>pat_no_cbt_chw__8</td><td>Other</td></tr><tr><td>9</td><td>pat_no_cbt_chw__9</td><td>Prefer not to answer</td></tr></table>	1	pat_no_cbt_chw__1	I don't have a ride	2	pat_no_cbt_chw__2	Fear of adverse effects,	3	pat_no_cbt_chw__3	Family/friends/media recommended not going	4	pat_no_cbt_chw__4	I did it before and didn't like it (their past experiences),	5	pat_no_cbt_chw__5	I don't understand what the group is about	6	pat_no_cbt_chw__6	I'd rather quit smoking on my own	7	pat_no_cbt_chw__7	I don't want to quit smoking	8	pat_no_cbt_chw__8	Other	9	pat_no_cbt_chw__9	Prefer not to answer						
1	pat_no_cbt_chw__1	I don't have a ride																																		
2	pat_no_cbt_chw__2	Fear of adverse effects,																																		
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9	pat_no_cbt_chw__9	Prefer not to answer																																		

1123	<div>other_pat_no_cbt_chw</div> <div>Show the field ONLY if: [pat_no_cbt_chw(8)] = '1'</div>	Other	text, Required
1124	notes3_chw	Notes	notes Custom alignment: RH
1125	<div>session_prev_goals_chw</div> <div>Show the field ONLY if: [seen_by_pcp_chw] = '1' or [seen_by_pcp_chw] = '2' or [seen_by_pcp_chw] = '3' or [seen_by_pcp_chw] = '4' or [seen_by_pcp_chw] = '5'</div>	<div>Plan from previous session</div> <div>Visit 1: [visit_1_arm_2][session_next_goals_chw_v1]</div> <div>Visit 2: [visit_2_arm_2][session_next_goals_chw]</div> <div>Visit 3: [visit_3_arm_2][session_next_goals_chw]</div> <div>Visit 4: [visit_4_arm_2][session_next_goals_chw]</div> <div>Visit 5: [visit_5_arm_2][session_next_goals_chw]</div> <div>Visit 6: [visit_6_arm_2][session_next_goals_chw]</div> <div>Visit 7: [visit_7_arm_2][session_next_goals_chw]</div> <div>Visit 8: [visit_8_arm_2][session_next_goals_chw]</div> <div>Visit 9: [visit_9_arm_2][session_next_goals_chw]</div> <div>Visit 10: [visit_10_arm_2][session_next_goals_chw]</div> <div>Visit 11: [visit_11_arm_2][session_next_goals_chw]</div> <div>Visit 12: [visit_12_arm_2][session_next_goals_chw]</div> <div>Visit 13: [visit_13_arm_2][session_next_goals_chw]</div> <div>Visit 14: [visit_14_arm_2][session_next_goals_chw]</div> <div>Visit 15: [visit_15_arm_2][session_next_goals_chw]</div> <div>Visit 16: [visit_16_arm_2][session_next_goals_chw]</div> <div>Visit 17: [visit_17_arm_2][session_next_goals_chw]</div> <div>Visit 18: [visit_18_arm_2][session_next_goals_chw]</div> <div>Visit 19: [visit_19_arm_2][session_next_goals_chw]</div>	descriptive, Required
1126	<div>pat_goals_acc_chw</div> <div>Show the field ONLY if: [seen_by_pcp_chw] = '1' or [seen_by_pcp_chw] = '2' or [seen_by_pcp_chw] = '3' or [seen_by_pcp_chw] = '4' or [seen_by_pcp_chw] = '5'</div>	Plan accomplished?	radio, Required <div><div>1</div>Yes</div> <div><div>2</div>No</div> <div><div>3</div>Partially</div>

1129	session_content_chw Show the field ONLY if: [seen_by_pcp_chw] = '1' or [seen_by_pcp_chw] = '2' or [seen_by_pcp_chw] = '3' or [seen_by_pcp_chw] = '4' or [seen_by_pcp_chw] = '5'	Session Content	checkbox, Required <table><tr><td>1</td><td>session_content_chw__1</td><td>Engagement and involvement</td></tr><tr><td>2</td><td>session_content_chw__2</td><td>Motivational interviewing</td></tr><tr><td>3</td><td>session_content_chw__3</td><td>Motivational tools</td></tr><tr><td>4</td><td>session_content_chw__4</td><td>Education topic</td></tr><tr><td>5</td><td>session_content_chw__5</td><td>Medication compliance</td></tr><tr><td>6</td><td>session_content_chw__6</td><td>Care coordination</td></tr><tr><td>7</td><td>session_content_chw__7</td><td>Progress</td></tr><tr><td>8</td><td>session_content_chw__8</td><td>Other</td></tr><tr><td>9</td><td>session_content_chw__9</td><td>Quit Line</td></tr></table>	1	session_content_chw__1	Engagement and involvement	2	session_content_chw__2	Motivational interviewing	3	session_content_chw__3	Motivational tools	4	session_content_chw__4	Education topic	5	session_content_chw__5	Medication compliance	6	session_content_chw__6	Care coordination	7	session_content_chw__7	Progress	8	session_content_chw__8	Other	9	session_content_chw__9	Quit Line			
1	session_content_chw__1	Engagement and involvement																															
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4	session_content_chw__4	Education topic																															
5	session_content_chw__5	Medication compliance																															
6	session_content_chw__6	Care coordination																															
7	session_content_chw__7	Progress																															
8	session_content_chw__8	Other																															
9	session_content_chw__9	Quit Line																															
1130	session_engag_chw Show the field ONLY if: [session_content_chw(1)] = '1'	1, Engagement and involvement	notes, Required Custom alignment: LH																														
1131	pat_mi_chw Show the field ONLY if: [session_content_chw(2)] = '1'	2. Motivational Interviewing	notes, Required Custom alignment: LH																														
1132	session_pros_cons_chw Show the field ONLY if: [session_content_chw(3)] = '1'	3. Motivational tools: (include benefits and barriers-be specific! Use patient's own words when possible)	checkbox, Required <table><tr><td>1</td><td>session_pros_cons_chw__1</td><td>Identifying pros of smoking</td></tr><tr><td>2</td><td>session_pros_cons_chw__2</td><td>Identifying cons of smoking</td></tr><tr><td>3</td><td>session_pros_cons_chw__3</td><td>Health benefits from quitting smoking</td></tr><tr><td>4</td><td>session_pros_cons_chw__4</td><td>Cessation medications</td></tr><tr><td>5</td><td>session_pros_cons_chw__5</td><td>Promoting smoking groups</td></tr><tr><td>6</td><td>session_pros_cons_chw__6</td><td>Other</td></tr><tr><td>7</td><td>session_pros_cons_chw__7</td><td>CO and smoking</td></tr><tr><td>8</td><td>session_pros_cons_chw__8</td><td>Smoking triggers, pack wraps</td></tr><tr><td>9</td><td>session_pros_cons_chw__9</td><td>Reasons to quit smoking</td></tr><tr><td>10</td><td>session_pros_cons_chw__10</td><td>Preparing for the quit day</td></tr></table>	1	session_pros_cons_chw__1	Identifying pros of smoking	2	session_pros_cons_chw__2	Identifying cons of smoking	3	session_pros_cons_chw__3	Health benefits from quitting smoking	4	session_pros_cons_chw__4	Cessation medications	5	session_pros_cons_chw__5	Promoting smoking groups	6	session_pros_cons_chw__6	Other	7	session_pros_cons_chw__7	CO and smoking	8	session_pros_cons_chw__8	Smoking triggers, pack wraps	9	session_pros_cons_chw__9	Reasons to quit smoking	10	session_pros_cons_chw__10	Preparing for the quit day
1	session_pros_cons_chw__1	Identifying pros of smoking																															
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9	session_pros_cons_chw__9	Reasons to quit smoking																															
10	session_pros_cons_chw__10	Preparing for the quit day																															
1133	other_motiv_tools_chw Show the field ONLY if: [session_pros_cons_chw(6)] = '1'	Other	text, Required																														
1134	session_education_chw Show the field ONLY if: [session_content_chw(4)] = '1'	4. Education Topic (check all that apply)	checkbox, Required <table><tr><td>1</td><td>session_education_chw__1</td><td>Withdrawal symptoms</td></tr><tr><td>2</td><td>session_education_chw__2</td><td>Coping with withdrawal</td></tr><tr><td>3</td><td>session_education_chw__3</td><td>Cessation medication</td></tr><tr><td>4</td><td>session_education_chw__4</td><td>Things to do instead of smoking, the 4Ds</td></tr><tr><td>5</td><td>session_education_chw__5</td><td>Other</td></tr><tr><td>6</td><td>session_education_chw__6</td><td>Dealing with stress</td></tr><tr><td>7</td><td>session_education_chw__7</td><td>Dealing with weight gain</td></tr><tr><td>8</td><td>session_education_chw__8</td><td>Dealing with high risk situations</td></tr><tr><td>9</td><td>session_education_chw__9</td><td>Dealing with slips</td></tr></table>	1	session_education_chw__1	Withdrawal symptoms	2	session_education_chw__2	Coping with withdrawal	3	session_education_chw__3	Cessation medication	4	session_education_chw__4	Things to do instead of smoking, the 4Ds	5	session_education_chw__5	Other	6	session_education_chw__6	Dealing with stress	7	session_education_chw__7	Dealing with weight gain	8	session_education_chw__8	Dealing with high risk situations	9	session_education_chw__9	Dealing with slips			
1	session_education_chw__1	Withdrawal symptoms																															
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8	session_education_chw__8	Dealing with high risk situations																															
9	session_education_chw__9	Dealing with slips																															
1135	other_educ_chw Show the field ONLY if: [session_education_chw(5)] = '1'	Other	text, Required																														
1136	session_check_meds_chw Show the field ONLY if: [session_content_chw(5)] = '1'	5. Check medication compliance	notes Custom alignment: LH																														

1137	session_care_chw Show the field ONLY if: [session_content_chw(6)] = '1'	6. Care coordination (check all that apply)	checkbox, Required <table><tr><td>1</td><td>session_care_chw__1</td><td>Scheduling PCP visit</td></tr><tr><td>2</td><td>session_care_chw__2</td><td>Smoking cessation group</td></tr><tr><td>3</td><td>session_care_chw__3</td><td>Other</td></tr><tr><td>4</td><td>session_care_chw__4</td><td>Pharmacy and medications</td></tr></table>	1	session_care_chw__1	Scheduling PCP visit	2	session_care_chw__2	Smoking cessation group	3	session_care_chw__3	Other	4	session_care_chw__4	Pharmacy and medications
1	session_care_chw__1	Scheduling PCP visit													
2	session_care_chw__2	Smoking cessation group													
3	session_care_chw__3	Other													
4	session_care_chw__4	Pharmacy and medications													
1138	other_care_chw Show the field ONLY if: [session_care_chw(3)] = '1'	Other	text, Required												
1139	session_progress_chw Show the field ONLY if: [session_content_chw(7)] = '1'	7. Reinforcing progress and identifying what has been helpful in achieving gains (e.g., scheduling PCP visit, smoking cessation group)	notes Custom alignment: LH												
1140	session_other_chw Show the field ONLY if: [session_content_chw(8)] = '1'	8. Other	notes Custom alignment: LH												
1141	session_qline_chw Show the field ONLY if: [session_content_chw(9)] = '1'	9. QUIT LINE Was QUIT LINE presented/discussed to participant TODAY?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH	1	Yes	0	No								
1	Yes														
0	No														
1142	session_noqline_chw Show the field ONLY if: [session_qline_chw] = '0'	Why not?	notes, Required Custom alignment: LH												
1143	session_qline_interest_chw Show the field ONLY if: [session_qline_chw] = '1'	Was participant interested?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH	1	Yes	0	No								
1	Yes														
0	No														
1144	session_qlineatsession_chw Show the field ONLY if: [session_qline_chw] = '1'	Did the participant call the Quit Line during this session?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH	1	Yes	0	No								
1	Yes														
0	No														
1145	session_qlinenoatsession_chw Show the field ONLY if: [session_qlineatsession_chw] = '0'	Why not?	notes, Required Custom alignment: LH												
1146	session_qlinesched_chw Show the field ONLY if: [session_qlineatsession_chw] = '0'	Was a Quit Line call scheduled?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH	1	Yes	0	No								
1	Yes														
0	No														
1147	session_qlinenosched_chw Show the field ONLY if: [session_qlinesched_chw] = '0'	Why not?	notes, Required Custom alignment: LH												
1148	session_qlinetime_chw Show the field ONLY if: [session_qlineatsession_chw] = '1'	Date/Time Quit Line call	text (datetime_mdy), Required Custom alignment: LH												
1149	session_qline_chwinvolv Show the field ONLY if: [session_qlineatsession_chw] = '1'	Was the CHW involved in the Quit Line call?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH	1	Yes	0	No								
1	Yes														
0	No														
1150	session_qlinecall_chw Show the field ONLY if: [session_qlineatsession_chw] = '1'	Describe session/call	notes, Required Custom alignment: LH												

1151	session_qlineirt_chw Show the field ONLY if: [session_qlineatsession_chw] = '1'	Did the participant/CHW request NRT? Please explain	notes, Required Custom alignment: LH																										
1152	session_qlineirtuse_chw Show the field ONLY if: [session_qlineatsession_chw] = '1'	Did the participant use the NRT? Please explain	notes, Required Custom alignment: LH																										
1153	session_qlineable_chw Show the field ONLY if: [session_qlineatsession_chw] = '1'	Did the quitline staff seem able to work with people with SMI? Please explain	notes, Required Custom alignment: LH																										
1154	session_qlinefu_chw Show the field ONLY if: [session_qlineatsession_chw] = '1'	Was a follow up call scheduled?	notes, Required Custom alignment: LH																										
1155	session_qlinecom_chw	Quit Line Notes	notes Custom alignment: LH																										
1156	session_descript_chw	Brief description of the session	notes, Required Custom alignment: LH																										
1157	session_next_goals_chw	Goals for next session	notes, Required Custom alignment: LH																										
1158	next_visit_all_chw	Next visit will be	text (datetime_mdy), Required Field Annotation: @HIDEBUTTON																										
1159	name_chw	CHW	radio, Required <table><tr><td>1</td><td>Alexandra Fortune</td></tr><tr><td>2</td><td>Ashley Newman</td></tr><tr><td>3</td><td>Aysha Peralta</td></tr><tr><td>4</td><td>Erin Hanrahan</td></tr><tr><td>5</td><td>John Dowd</td></tr><tr><td>6</td><td>Karlie Marrs</td></tr><tr><td>7</td><td>Leeza Rojas</td></tr><tr><td>8</td><td>Madalyn Davis</td></tr><tr><td>9</td><td>Madeleine Fontaine</td></tr><tr><td>10</td><td>Megan Donnelly</td></tr><tr><td>11</td><td>Morgan Boudreau</td></tr><tr><td>12</td><td>Nina Cherilus</td></tr><tr><td>13</td><td>Carlos Taveras</td></tr></table>	1	Alexandra Fortune	2	Ashley Newman	3	Aysha Peralta	4	Erin Hanrahan	5	John Dowd	6	Karlie Marrs	7	Leeza Rojas	8	Madalyn Davis	9	Madeleine Fontaine	10	Megan Donnelly	11	Morgan Boudreau	12	Nina Cherilus	13	Carlos Taveras
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12	Nina Cherilus																												
13	Carlos Taveras																												
1160	contact_sheet_all_visits_chw_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete																				
0	Incomplete																												
1	Unverified																												
2	Complete																												
Instrument: CBT groups (cbt_groups) ^ Collapse																													
1161	date_1_chw_v1_cbt	Date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																										
1162	location_cbt	Location of Meeting	radio, Required <table><tr><td>1</td><td>Group home</td></tr><tr><td>2</td><td>MGH</td></tr><tr><td>3</td><td>Library</td></tr><tr><td>4</td><td>Church</td></tr><tr><td>5</td><td>Agency</td></tr><tr><td>6</td><td>Other</td></tr></table>	1	Group home	2	MGH	3	Library	4	Church	5	Agency	6	Other														
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3	Library																												
4	Church																												
5	Agency																												
6	Other																												
1163	other_location_chw_v1_cbt Show the field ONLY if: [location_cbt] = '6'	Other location	text, Required																										

1164	location_name_cbt_chw	Name of the location	radio, Required <table border="1"> <tr><td>1</td><td>MMH</td></tr> <tr><td>2</td><td>153 South Street</td></tr> <tr><td>3</td><td>Paul Sullivan Housing (151 Geneva)</td></tr> <tr><td>4</td><td>TOB (1500 Dorchester)</td></tr> <tr><td>5</td><td>DMH Lowell</td></tr> <tr><td>6</td><td>Gill Wellness Center</td></tr> <tr><td>7</td><td>DMH Lawrence</td></tr> <tr><td>8</td><td>Pentucket Medical-Haverhill</td></tr> <tr><td>9</td><td>Other</td></tr> </table>	1	MMH	2	153 South Street	3	Paul Sullivan Housing (151 Geneva)	4	TOB (1500 Dorchester)	5	DMH Lowell	6	Gill Wellness Center	7	DMH Lawrence	8	Pentucket Medical-Haverhill	9	Other										
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8	Pentucket Medical-Haverhill																														
9	Other																														
1165	other_location_cbt_chw Show the field ONLY if: [location_name_cbt_chw] = '9'	Other location	text, Required																												
1166	group_track_cbt	Group Track	radio, Required <table border="1"> <tr><td>1</td><td>Motivational Enhancement</td></tr> <tr><td>2</td><td>Cessation</td></tr> <tr><td>3</td><td>Relapse prevention</td></tr> </table>	1	Motivational Enhancement	2	Cessation	3	Relapse prevention																						
1	Motivational Enhancement																														
2	Cessation																														
3	Relapse prevention																														
1167	group_number_cbt	Group Number	radio, Required <table border="1"> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td></tr> <tr><td>3</td><td>3</td></tr> <tr><td>4</td><td>4</td></tr> <tr><td>5</td><td>5</td></tr> <tr><td>6</td><td>6</td></tr> <tr><td>7</td><td>7</td></tr> <tr><td>8</td><td>8</td></tr> <tr><td>9</td><td>9</td></tr> <tr><td>10</td><td>10</td></tr> <tr><td>11</td><td>11</td></tr> <tr><td>12</td><td>12</td></tr> <tr><td>13</td><td>13</td></tr> <tr><td>14</td><td>14</td></tr> </table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14
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1168	start_time_chw_v1_cbt	Meeting Start Time	text (time), Required																												
1169	end_time_chw_2_v1_cbt	Meeting End Time	text (time), Required																												
1170	cigs_today_chw_cbt	Total number of cigarettes smoked today	text, Required																												
1171	cigs_yesterday_chw_cbt	Total number cigarettes smoked yesterday	text, Required																												
1172	cpd_last_week_cbt	Total number of cigarettes smoked in the last week	text, Required																												
1173	date_last_group_cbt	If participant didn't attend group last week, enter the date of last group	text (date_mdy) Field Annotation: @HIDEBUTTON																												
1174	cigs_since_last_chw_cbt	If participant didn't attend group last week, enter the total number of cigarettes smoked since the last group. (for example, if last group attended was 21 days ago and participant smoked 10 cpd, the amount to be enter here should be 210)	text																												
1175	last_cig_chw_cbt	Time since last cigarette	text, Required																												
1176	time_last_cig_units_cbt		radio, Required <table border="1"> <tr><td>1</td><td>minutes</td></tr> <tr><td>2</td><td>hours</td></tr> <tr><td>3</td><td>days</td></tr> <tr><td>4</td><td>weeks</td></tr> <tr><td>5</td><td>months</td></tr> </table> Custom alignment: LH	1	minutes	2	hours	3	days	4	weeks	5	months																		
1	minutes																														
2	hours																														
3	days																														
4	weeks																														
5	months																														

1177	co_chw_cbt	Was CO testing completed today?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																																
1	Yes																																						
0	No																																						
1178	co_number_chw_cbt Show the field ONLY if: [co_chw_cbt] = '1'	Expired CO reading (ppm)	text, Required																																				
1179	time_co_chw_cbt Show the field ONLY if: [co_chw_cbt] = '1'	Date of CO reading	text (date_mdy), Required Field Annotation: @HIDEBUTTON																																				
1180	hour_co_chw_cbt Show the field ONLY if: [co_chw_cbt] = '1'	Time of CO reading	text (time), Required Field Annotation: @HIDEBUTTON																																				
1181	co_monitor_chw_cbt Show the field ONLY if: [co_chw_cbt] = '1'	CO Monitor ID	radio, Required <table><tr><td>1</td><td>A</td></tr><tr><td>2</td><td>B</td></tr><tr><td>3</td><td>C</td></tr><tr><td>4</td><td>D</td></tr><tr><td>5</td><td>E</td></tr><tr><td>6</td><td>F</td></tr><tr><td>7</td><td>G</td></tr><tr><td>8</td><td>H</td></tr><tr><td>9</td><td>I</td></tr><tr><td>10</td><td>J</td></tr></table>	1	A	2	B	3	C	4	D	5	E	6	F	7	G	8	H	9	I	10	J																
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7	G																																						
8	H																																						
9	I																																						
10	J																																						
1182	topics_cbt	Groups main topics	checkbox, Required <table><tr><td>1</td><td>topics_cbt__1</td><td>CO and smoking</td></tr><tr><td>2</td><td>topics_cbt__2</td><td>Smoking triggers, pack wraps</td></tr><tr><td>3</td><td>topics_cbt__3</td><td>Reasons to quit smoking</td></tr><tr><td>4</td><td>topics_cbt__4</td><td>Withdrawal symptoms</td></tr><tr><td>5</td><td>topics_cbt__5</td><td>Things to do instead of smoking, the 4Ds</td></tr><tr><td>6</td><td>topics_cbt__6</td><td>Preparing for the Quit day</td></tr><tr><td>7</td><td>topics_cbt__7</td><td>Pros and cons of quitting smoking</td></tr><tr><td>8</td><td>topics_cbt__8</td><td>High risk situations</td></tr><tr><td>9</td><td>topics_cbt__9</td><td>Problem solving</td></tr><tr><td>10</td><td>topics_cbt__10</td><td>Dealing with stress, boredom</td></tr><tr><td>11</td><td>topics_cbt__11</td><td>Dealing with weight gain</td></tr><tr><td>12</td><td>topics_cbt__12</td><td>Dealing with slips</td></tr></table>	1	topics_cbt__1	CO and smoking	2	topics_cbt__2	Smoking triggers, pack wraps	3	topics_cbt__3	Reasons to quit smoking	4	topics_cbt__4	Withdrawal symptoms	5	topics_cbt__5	Things to do instead of smoking, the 4Ds	6	topics_cbt__6	Preparing for the Quit day	7	topics_cbt__7	Pros and cons of quitting smoking	8	topics_cbt__8	High risk situations	9	topics_cbt__9	Problem solving	10	topics_cbt__10	Dealing with stress, boredom	11	topics_cbt__11	Dealing with weight gain	12	topics_cbt__12	Dealing with slips
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12	topics_cbt__12	Dealing with slips																																					
1183	homework_cbt	Homework (Completed/partially completed/did not complete)	notes Custom alignment: LH																																				
1184	notes_cbt	Notes	notes Custom alignment: LH																																				

1185	smoking_status_chw_cby	<p>Section Header: SMOKING STATUS Group 1: [visit_1_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_1_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_1_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_1_arm_2][co_number_chw_cbt] ppm CO Group 2: [visit_2_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_2_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_2_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_2_arm_2][co_number_chw_cbt] ppm CO Group 3: [visit_3_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_3_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_3_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_3_arm_2][co_number_chw_cbt] ppm CO Group 4: [visit_4_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_4_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_4_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_4_arm_2][co_number_chw_cbt] ppm CO Group 5: [visit_5_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_5_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_5_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_5_arm_2][co_number_chw_cbt] ppm CO Group 6: [visit_6_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_6_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_6_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_6_arm_2][co_number_chw_cbt] ppm CO Group 7: [visit_7_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_7_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_7_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_7_arm_2][co_number_chw_cbt] ppm CO Group 8: [visit_8_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_8_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_8_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_8_arm_2][co_number_chw_cbt] ppm CO Group 9: [visit_9_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_9_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_9_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_9_arm_2][co_number_chw_cbt] ppm CO Group 10: [visit_10_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_10_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_10_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_10_arm_2][co_number_chw_cbt] ppm CO Group 11: [visit_11_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_11_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_11_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_11_arm_2][co_number_chw_cbt] ppm CO Group 12: [visit_12_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_12_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_12_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_12_arm_2][co_number_chw_cbt] ppm CO Group 13: [visit_13_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_13_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_13_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_13_arm_2][co_number_chw_cbt] ppm CO Group 14: [visit_14_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_14_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_14_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_14_arm_2][co_number_chw_cbt] ppm CO Group 15: [visit_15_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_15_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_15_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_15_arm_2][co_number_chw_cbt] ppm CO Group 16: [visit_16_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_16_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_16_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_16_arm_2][co_number_chw_cbt] ppm CO Group 17: [visit_17_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_17_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_17_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_17_arm_2][co_number_chw_cbt] ppm CO Group 18: [visit_18_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_18_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_18_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_18_arm_2][co_number_chw_cbt] ppm CO Group 19: [visit_19_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_19_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_19_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_19_arm_2][co_number_chw_cbt] ppm CO Group 20: [visit_20_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_20_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_20_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_20_arm_2][co_number_chw_cbt] ppm CO</p> <p>Today, participant is (refer to most recent prior report to make this determination)</p>	<div>radio, Required</div> <table><tr><td>1</td><td>smoking</td></tr><tr><td>2</td><td>Quit for at least 24 hours</td></tr><tr><td>3</td><td>Quit for 7 days (but less than 14 days)</td></tr><tr><td>4</td><td>Quit for 14 days (but less than 4 weeks)</td></tr><tr><td>5</td><td>Quit for 4 weeks or more</td></tr></table>	1	smoking	2	Quit for at least 24 hours	3	Quit for 7 days (but less than 14 days)	4	Quit for 14 days (but less than 4 weeks)	5	Quit for 4 weeks or more
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5	Quit for 4 weeks or more												
1186	reasons_quit_chw_cbt	REASONS TO QUIT (for example: "Client wants to quit because her daughter is expecting twins in August")	<div>notes</div> <div>Custom alignment: LH</div>										
1187	barriers_quit_chw_cbt	Barriers to Quitting Smoking (for example: "worried about irritability at work")	<div>notes</div> <div>Custom alignment: LH</div>										
1188	session_info_chw_cbt	Information relevant to today's session (for example "Client related to boredom as a trigger; notes he does not think about smoking while at day program")	<div>notes</div> <div>Custom alignment: LH</div>										
1189	session_plans_chw_cbt	Plans made in session (for example: "Client will do a jigsaw puzzle to keep her mind off of smoking")	<div>notes</div> <div>Custom alignment: LH</div>										

1190	treatment_pat_chw_cbt	Pharmacotherapy: is the participant on any smoking cessation treatment?	checkbox <table border="1"> <tr> <td>1</td> <td>treatment_pat_chw_cbt__1</td> <td>Varenicline (i.e. Chantix)</td> </tr> <tr> <td>2</td> <td>treatment_pat_chw_cbt__2</td> <td>Nicotine patch</td> </tr> <tr> <td>3</td> <td>treatment_pat_chw_cbt__3</td> <td>Bupropion (i.e. Wellbutrin, Zyban)</td> </tr> <tr> <td>4</td> <td>treatment_pat_chw_cbt__4</td> <td>Nicotine gum</td> </tr> <tr> <td>5</td> <td>treatment_pat_chw_cbt__5</td> <td>Nicotine lozenge</td> </tr> <tr> <td>6</td> <td>treatment_pat_chw_cbt__6</td> <td>Other</td> </tr> <tr> <td>7</td> <td>treatment_pat_chw_cbt__7</td> <td>No treatment</td> </tr> </table>	1	treatment_pat_chw_cbt__1	Varenicline (i.e. Chantix)	2	treatment_pat_chw_cbt__2	Nicotine patch	3	treatment_pat_chw_cbt__3	Bupropion (i.e. Wellbutrin, Zyban)	4	treatment_pat_chw_cbt__4	Nicotine gum	5	treatment_pat_chw_cbt__5	Nicotine lozenge	6	treatment_pat_chw_cbt__6	Other	7	treatment_pat_chw_cbt__7	No treatment					
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3	treatment_pat_chw_cbt__3	Bupropion (i.e. Wellbutrin, Zyban)																											
4	treatment_pat_chw_cbt__4	Nicotine gum																											
5	treatment_pat_chw_cbt__5	Nicotine lozenge																											
6	treatment_pat_chw_cbt__6	Other																											
7	treatment_pat_chw_cbt__7	No treatment																											
1191	other_treatment_pat_chw_cbt Show the field ONLY if: [treatment_pat_chw_cbt(6)] = '1'	Other treatment	text, Required																										
1192	dose_treatment_pat_chw_cbt	Dose(s)	text																										
1193	treatment_start_pat_chw_cbt	start date	text (date_mdy)																										
1194	reimb_cbt_chw	Did the participant receive \$5 for his/her participation in the smoking group?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No																						
1	Yes																												
0	No																												
1195	notes_cbt_chw	Notes	notes Custom alignment: LH																										
1196	names_chw_v1_cbt	CHW	radio, Required <table border="1"> <tr><td>1</td><td>Alexandra Fortune</td></tr> <tr><td>2</td><td>Ashley Newman</td></tr> <tr><td>3</td><td>Aysha Peralta</td></tr> <tr><td>4</td><td>Erin Hanrahan</td></tr> <tr><td>5</td><td>John Dowd</td></tr> <tr><td>6</td><td>Karlie Marrs</td></tr> <tr><td>7</td><td>Leeza Rojas</td></tr> <tr><td>8</td><td>Madalyn Davis</td></tr> <tr><td>9</td><td>Madeleine Fontaine</td></tr> <tr><td>10</td><td>Megan Donnelly</td></tr> <tr><td>11</td><td>Morgan Boudreau</td></tr> <tr><td>12</td><td>Nina Cherilus</td></tr> <tr><td>13</td><td>Carlos Taveras</td></tr> </table>	1	Alexandra Fortune	2	Ashley Newman	3	Aysha Peralta	4	Erin Hanrahan	5	John Dowd	6	Karlie Marrs	7	Leeza Rojas	8	Madalyn Davis	9	Madeleine Fontaine	10	Megan Donnelly	11	Morgan Boudreau	12	Nina Cherilus	13	Carlos Taveras
1	Alexandra Fortune																												
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12	Nina Cherilus																												
13	Carlos Taveras																												
1197	phone_comments_chw_v1_cbt	Comments	notes																										
1198	cbt_groups_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																				
0	Incomplete																												
1	Unverified																												
2	Complete																												
Instrument: Academic Detailing (academic_detailing)			^ Collapse																										
1199	adinterv	Has this patient's PCP received the AD intervention?	yesno <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table> Custom alignment: RH	1	Yes	0	No																						
1	Yes																												
0	No																												
1200	academic_detailing_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																				
0	Incomplete																												
1	Unverified																												
2	Complete																												
Instrument: Contact Sheet All Visits CHW 21_40 (contact_sheet_all_visits_chw_11_20)			^ Collapse																										
1201	date_all_visits_chw_g2	Visit Date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																										
1202	start_all_visits_chw_g2	Start time	text (time), Required																										
1203	end_all_visits_chw_g2	End time	text (time), Required																										

1204	visit_modality_chw_g2	Visit modality	radio, Required <table><tr><td>1</td><td>Phone visit</td></tr><tr><td>2</td><td>In person visit</td></tr></table>	1	Phone visit	2	In person visit														
1	Phone visit																				
2	In person visit																				
1205	reason_phone_chw_g2 Show the field ONLY if: [visit_modality_chw_g2] = '1'	Reasons for the phone visit (select all that apply)	checkbox, Required <table><tr><td>1</td><td>reason_phone_chw_g2__1</td><td>Help preparing for quit day</td></tr><tr><td>2</td><td>reason_phone_chw_g2__2</td><td>Quit day</td></tr><tr><td>3</td><td>reason_phone_chw_g2__3</td><td>Check for withdrawal symptoms</td></tr><tr><td>4</td><td>reason_phone_chw_g2__4</td><td>Medication compliance/side effects</td></tr><tr><td>5</td><td>reason_phone_chw_g2__5</td><td>Other</td></tr></table>	1	reason_phone_chw_g2__1	Help preparing for quit day	2	reason_phone_chw_g2__2	Quit day	3	reason_phone_chw_g2__3	Check for withdrawal symptoms	4	reason_phone_chw_g2__4	Medication compliance/side effects	5	reason_phone_chw_g2__5	Other			
1	reason_phone_chw_g2__1	Help preparing for quit day																			
2	reason_phone_chw_g2__2	Quit day																			
3	reason_phone_chw_g2__3	Check for withdrawal symptoms																			
4	reason_phone_chw_g2__4	Medication compliance/side effects																			
5	reason_phone_chw_g2__5	Other																			
1206	other_reason_phone_chw_g2 Show the field ONLY if: [reason_phone_chw_g2(5)] = '1'	Other reason for a phone visit	text, Required																		
1207	reasons_contact_chw_g2 Show the field ONLY if: [visit_modality_chw_g2] = '2'	Reasons for In Person meeting (select all that apply)	checkbox, Required <table><tr><td>1</td><td>reasons_contact_chw_g2__1</td><td>Initial visit/obtain consent</td></tr><tr><td>2</td><td>reasons_contact_chw_g2__2</td><td>Intervention visit</td></tr><tr><td>3</td><td>reasons_contact_chw_g2__3</td><td>Taking participant to smoking group</td></tr><tr><td>4</td><td>reasons_contact_chw_g2__4</td><td>Taking participant to PCP</td></tr><tr><td>5</td><td>reasons_contact_chw_g2__5</td><td>Other</td></tr><tr><td>6</td><td>reasons_contact_chw_g2__6</td><td>Medication compliance/side effects</td></tr></table>	1	reasons_contact_chw_g2__1	Initial visit/obtain consent	2	reasons_contact_chw_g2__2	Intervention visit	3	reasons_contact_chw_g2__3	Taking participant to smoking group	4	reasons_contact_chw_g2__4	Taking participant to PCP	5	reasons_contact_chw_g2__5	Other	6	reasons_contact_chw_g2__6	Medication compliance/side effects
1	reasons_contact_chw_g2__1	Initial visit/obtain consent																			
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3	reasons_contact_chw_g2__3	Taking participant to smoking group																			
4	reasons_contact_chw_g2__4	Taking participant to PCP																			
5	reasons_contact_chw_g2__5	Other																			
6	reasons_contact_chw_g2__6	Medication compliance/side effects																			
1208	other_reason_contact_chw_g2 Show the field ONLY if: [reasons_contact_chw_g2(5)] = '1'	Other reason for an In Person Meeting	text, Required																		
1209	smoking_chw_g2	Section Header: <i>Smoking Behavior</i> Has the participant smoked in the past 7 days?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																				
0	No																				
1210	notes1_chw_g2	Notes	notes Custom alignment: RH																		
1211	tobacco_prod_chw_g2	Which tobacco products does the participant currently smoke? (I.e. Cigarettes, Cigars, Cigarillos, Rollies, Mini Cigars, Pipe) Select all that apply	checkbox <table><tr><td>1</td><td>tobacco_prod_chw_g2__1</td><td>Cigarettes</td></tr><tr><td>2</td><td>tobacco_prod_chw_g2__2</td><td>Mini cigars (I.e. double diamonds)</td></tr><tr><td>3</td><td>tobacco_prod_chw_g2__3</td><td>loose tobacco (roll your own, rollies)</td></tr><tr><td>4</td><td>tobacco_prod_chw_g2__4</td><td>e-cigarettes/vaping</td></tr><tr><td>5</td><td>tobacco_prod_chw_g2__5</td><td>Other</td></tr><tr><td>6</td><td>tobacco_prod_chw_g2__6</td><td>Quit smoking</td></tr></table>	1	tobacco_prod_chw_g2__1	Cigarettes	2	tobacco_prod_chw_g2__2	Mini cigars (I.e. double diamonds)	3	tobacco_prod_chw_g2__3	loose tobacco (roll your own, rollies)	4	tobacco_prod_chw_g2__4	e-cigarettes/vaping	5	tobacco_prod_chw_g2__5	Other	6	tobacco_prod_chw_g2__6	Quit smoking
1	tobacco_prod_chw_g2__1	Cigarettes																			
2	tobacco_prod_chw_g2__2	Mini cigars (I.e. double diamonds)																			
3	tobacco_prod_chw_g2__3	loose tobacco (roll your own, rollies)																			
4	tobacco_prod_chw_g2__4	e-cigarettes/vaping																			
5	tobacco_prod_chw_g2__5	Other																			
6	tobacco_prod_chw_g2__6	Quit smoking																			
1212	cpd_chw_g2 Show the field ONLY if: [smoking_chw_g2] = '1'	On average, how many cigarettes (or other tobacco product) per day has the participant smoked in past 7 days?	text (integer), Required																		
1213	cpd_non_daily_chw_g2	COMPLETE ONLY IF PARTICIPANT HASN'T BEEN SMOKING EVERY DAY DURING THE PAST WEEK On average, how many cigarettes (or other tobacco product) per WEEK has the participant smoked in past week?	text																		
1214	last_cigarette_chw_g2 Show the field ONLY if: [smoking_chw_g2] = '1' or [smoking_chw_g2] = '0'	Time of last cigarette (or other tobacco product)	text (datetime_mdy), Required Custom alignment: RH Field Annotation: @HIDEBUTTON																		

1215	pat_co_done_chw_g2 Show the field ONLY if: [visit_modality_chw_g2] = '2'	Section Header: Previous CO measure: Visit 21: [visit_21_arm_2][expired_co_chw_g2] [time_co_chw_g2] Visit 22: [visit_22_arm_2][expired_co_chw_g2][time_co_chw_g2] Visit 23: [visit_23_arm_2][expired_co_chw_g2][time_co_chw_g2] Visit 24: [visit_24_arm_2] [expired_co_chw_g2][time_co_chw_g2] Visit 25: [visit_25_arm_2][expired_co_chw_g2] [time_co_chw_g2] Visit 26: [visit_26_arm_2][expired_co_chw_g2][time_co_chw_g2] Visit 27: [visit_27_arm_2][expired_co_chw_g2][time_co_chw_g2] Visit 28: [visit_28_arm_2] [expired_co_chw_g2][time_co_chw_g2] Visit 29: [visit_29_arm_2][expired_co_chw_g2] [time_co_chw_g2] Visit 30: [visit_30_arm_2][expired_co_chw_g2][time_co_chw_g2] Visit 31: [visit_31_arm_2][expired_co_chw_g2][time_co_chw_g2] Visit 32: [visit_32_arm_2] [expired_co_chw_g2][time_co_chw_g2] Visit 33: [visit_33_arm_2][expired_co_chw_g2] [time_co_chw_g2] Visit 34: [visit_34_arm_2][expired_co_chw_g2][time_co_chw_g2] Visit 35: [visit_35_arm_2][expired_co_chw_g2][time_co_chw_g2] Visit 36: [visit_36_arm_2] [expired_co_chw_g2][time_co_chw_g2] Visit 37: [visit_37_arm_2][expired_co_chw_g2] [time_co_chw_g2] Visit 38: [visit_38_arm_2][expired_co_chw_g2][time_co_chw_g2] Visit 39: [visit_39_arm_2][expired_co_chw_g2][time_co_chw_g2] Was CO testing completed today?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																												
1	Yes																																		
0	No																																		
1216	pat_yes_co_chw_g2 Show the field ONLY if: [pat_co_done_chw_g2] = '1'	Reasons for CO measurement	checkbox, Required <table border="1"> <tr> <td>1</td> <td>pat_yes_co_chw_g2__1</td> <td>Last CO month was done over a month ago</td> </tr> <tr> <td>2</td> <td>pat_yes_co_chw_g2__2</td> <td>Participant changed smoking behavior after last CO measurement (quit or relapsed)</td> </tr> <tr> <td>3</td> <td>pat_yes_co_chw_g2__3</td> <td>Participant asked for it</td> </tr> <tr> <td>4</td> <td>pat_yes_co_chw_g2__4</td> <td>Other</td> </tr> </table>	1	pat_yes_co_chw_g2__1	Last CO month was done over a month ago	2	pat_yes_co_chw_g2__2	Participant changed smoking behavior after last CO measurement (quit or relapsed)	3	pat_yes_co_chw_g2__3	Participant asked for it	4	pat_yes_co_chw_g2__4	Other																				
1	pat_yes_co_chw_g2__1	Last CO month was done over a month ago																																	
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3	pat_yes_co_chw_g2__3	Participant asked for it																																	
4	pat_yes_co_chw_g2__4	Other																																	
1217	pat_other_co_chw_g2 Show the field ONLY if: [pat_yes_co_chw_g2(4)] = '1'	Other	text, Required																																
1218	expired_co_chw_g2 Show the field ONLY if: [pat_co_done_chw_g2] = '1'	Expired CO reading (ppm)	text (integer, Min: 0, Max: 100), Required																																
1219	time_co_chw_g2 Show the field ONLY if: [pat_co_done_chw_g2] = '1'	Date of CO reading	text (date_mdy), Required Field Annotation: @HIDEBUTTON																																
1220	hour_co_chw_g2 Show the field ONLY if: [pat_co_done_chw_g2] = '1'	Time of CO reading	text (time), Required																																
1221	co_monitor_chw_g2 Show the field ONLY if: [pat_co_done_chw_g2] = '1'	CO Monitor ID	radio, Required <table border="1"> <tr><td>1</td><td>A</td></tr> <tr><td>2</td><td>B</td></tr> <tr><td>3</td><td>C</td></tr> <tr><td>4</td><td>D</td></tr> <tr><td>5</td><td>E</td></tr> <tr><td>6</td><td>F</td></tr> <tr><td>7</td><td>G</td></tr> <tr><td>8</td><td>H</td></tr> <tr><td>9</td><td>I</td></tr> <tr><td>10</td><td>J</td></tr> <tr><td>11</td><td>K</td></tr> <tr><td>12</td><td>L</td></tr> <tr><td>13</td><td>M</td></tr> <tr><td>14</td><td>N</td></tr> <tr><td>15</td><td>O</td></tr> <tr><td>16</td><td>P</td></tr> </table> Custom alignment: RH	1	A	2	B	3	C	4	D	5	E	6	F	7	G	8	H	9	I	10	J	11	K	12	L	13	M	14	N	15	O	16	P
1	A																																		
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12	L																																		
13	M																																		
14	N																																		
15	O																																		
16	P																																		
1222	co_exec_chw_g2 Show the field ONLY if: [pat_co_done_chw_g2] = '1'	Was CO measuring executed properly?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																												
1	Yes																																		
0	No																																		

1223	pat_no_co_chw_g2 Show the field ONLY if: [pat_co_done_chw_g2] = '0'	Reasons for NO CO measurement	checkbox, Required <table><tr><td>1</td><td>pat_no_co_chw_g2__1</td><td>CO was done within the past month and there was no change in smoking behavior</td></tr><tr><td>2</td><td>pat_no_co_chw_g2__2</td><td>Participant refused</td></tr><tr><td>3</td><td>pat_no_co_chw_g2__3</td><td>Participant unable (respiratory illness, symptomatic)</td></tr><tr><td>4</td><td>pat_no_co_chw_g2__4</td><td>Other</td></tr></table>	1	pat_no_co_chw_g2__1	CO was done within the past month and there was no change in smoking behavior	2	pat_no_co_chw_g2__2	Participant refused	3	pat_no_co_chw_g2__3	Participant unable (respiratory illness, symptomatic)	4	pat_no_co_chw_g2__4	Other						
1	pat_no_co_chw_g2__1	CO was done within the past month and there was no change in smoking behavior																			
2	pat_no_co_chw_g2__2	Participant refused																			
3	pat_no_co_chw_g2__3	Participant unable (respiratory illness, symptomatic)																			
4	pat_no_co_chw_g2__4	Other																			
1224	other_no_co_chw_g2 Show the field ONLY if: [pat_no_co_chw_g2(4)] = '1'	Other	text, Required																		
1225	notes_co_chw_g2	Notes	notes Custom alignment: RH																		
1226	seen_by_pcp_chw_g2 Show the field ONLY if: [visit_modality_chw_g2] = '2'	Was subject seen by primary care team since last meeting?	radio, Required <table><tr><td>1</td><td>None scheduled</td></tr><tr><td>2</td><td>No, missed visit</td></tr><tr><td>3</td><td>Yes, smoking discussed</td></tr><tr><td>4</td><td>Yes, smoking not discussed</td></tr><tr><td>5</td><td>Unknown</td></tr></table>	1	None scheduled	2	No, missed visit	3	Yes, smoking discussed	4	Yes, smoking not discussed	5	Unknown								
1	None scheduled																				
2	No, missed visit																				
3	Yes, smoking discussed																				
4	Yes, smoking not discussed																				
5	Unknown																				
1227	pcp_recommend_pat_chw_g2 Show the field ONLY if: [seen_by_pcp_chw_g2] = '3'	Did the PCP recommend that the participant quit smoking?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																				
0	No																				
1228	pcp_prescribed_pat_chw_g2 Show the field ONLY if: [seen_by_pcp_chw_g2] = '3'	Did PCP prescribe smoking cessation medication?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																				
0	No																				
1229	pat_what_prescribed_chw_g2 Show the field ONLY if: [pcp_prescribed_pat_chw_g2] = '1' ' or [reason_phone_chw_g2(4)] = '1'	What did the PCP prescribe?	checkbox, Required <table><tr><td>1</td><td>pat_what_prescribed_chw_g2__1</td><td>Varenicline (i.e. Chantix)</td></tr><tr><td>2</td><td>pat_what_prescribed_chw_g2__2</td><td>Nicotine patch</td></tr><tr><td>3</td><td>pat_what_prescribed_chw_g2__3</td><td>Bupropion (i.e. Wellbutrin, Zyban)</td></tr><tr><td>4</td><td>pat_what_prescribed_chw_g2__4</td><td>Nicotine gum</td></tr><tr><td>5</td><td>pat_what_prescribed_chw_g2__5</td><td>Nicotine lozenge</td></tr><tr><td>6</td><td>pat_what_prescribed_chw_g2__6</td><td>Other</td></tr></table>	1	pat_what_prescribed_chw_g2__1	Varenicline (i.e. Chantix)	2	pat_what_prescribed_chw_g2__2	Nicotine patch	3	pat_what_prescribed_chw_g2__3	Bupropion (i.e. Wellbutrin, Zyban)	4	pat_what_prescribed_chw_g2__4	Nicotine gum	5	pat_what_prescribed_chw_g2__5	Nicotine lozenge	6	pat_what_prescribed_chw_g2__6	Other
1	pat_what_prescribed_chw_g2__1	Varenicline (i.e. Chantix)																			
2	pat_what_prescribed_chw_g2__2	Nicotine patch																			
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6	pat_what_prescribed_chw_g2__6	Other																			
1230	other_prescribed_chw_g2 Show the field ONLY if: [pat_what_prescribed_chw_g2(6)] = '1'	Other	text, Required																		
1231	pat_filled_med_chw_g2 Show the field ONLY if: [pcp_prescribed_pat_chw_g2] = '1' ' or [reason_phone_chw_g2(4)] = '1'	Did the participant fill the prescription for the smoking cessation medication?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																				
0	No																				
1232	pat_what_taking_chw_g2 Show the field ONLY if: [pcp_prescribed_pat_chw_g2] = '1' ' or [reason_phone_chw_g2(4)] = '1' ' or [reasons_contact_chw_g2(6)] = '1'	What is the participant taking?	checkbox, Required <table><tr><td>1</td><td>pat_what_taking_chw_g2__1</td><td>Varenicline (i.e. Chantix)</td></tr><tr><td>2</td><td>pat_what_taking_chw_g2__2</td><td>Nicotine patch</td></tr><tr><td>3</td><td>pat_what_taking_chw_g2__3</td><td>Bupropion (i.e. Wellbutrin, Zyban)</td></tr><tr><td>4</td><td>pat_what_taking_chw_g2__4</td><td>Nicotine gum</td></tr><tr><td>5</td><td>pat_what_taking_chw_g2__5</td><td>Nicotine lozenge</td></tr><tr><td>6</td><td>pat_what_taking_chw_g2__6</td><td>Other</td></tr></table>	1	pat_what_taking_chw_g2__1	Varenicline (i.e. Chantix)	2	pat_what_taking_chw_g2__2	Nicotine patch	3	pat_what_taking_chw_g2__3	Bupropion (i.e. Wellbutrin, Zyban)	4	pat_what_taking_chw_g2__4	Nicotine gum	5	pat_what_taking_chw_g2__5	Nicotine lozenge	6	pat_what_taking_chw_g2__6	Other
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2	pat_what_taking_chw_g2__2	Nicotine patch																			
3	pat_what_taking_chw_g2__3	Bupropion (i.e. Wellbutrin, Zyban)																			
4	pat_what_taking_chw_g2__4	Nicotine gum																			
5	pat_what_taking_chw_g2__5	Nicotine lozenge																			
6	pat_what_taking_chw_g2__6	Other																			
1233	pat_other_med_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(6)] = '1'	Other	text, Required																		

1234	pat_var_dose_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(1)] = '1'	Varenicline (Chantix) Dose	radio, Required <table><tr><td>1</td><td>0.5 mg once a day</td></tr><tr><td>2</td><td>0.5 mg twice a day</td></tr><tr><td>3</td><td>1 mg once a day</td></tr><tr><td>4</td><td>1 mg twice a day</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	0.5 mg once a day	2	0.5 mg twice a day	3	1 mg once a day	4	1 mg twice a day	5	Other				
1	0.5 mg once a day																
2	0.5 mg twice a day																
3	1 mg once a day																
4	1 mg twice a day																
5	Other																
1235	pat_var_other_dose_chw_g2 Show the field ONLY if: [pat_var_dose_chw_g2] = '5'	Other Dose	text, Required														
1236	pat_var_start_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(1)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1237	pat_7days_var_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(1)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
3	3																
4	4																
5	5																
6	6																
7	7																
1238	var_still_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(1)] = '1'	Is participant still taking Varenicline?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1239	pat_var_end_chw_g2 Show the field ONLY if: [var_still_chw_g2] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1240	pat_bup_dose_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(3)] = '1'	Bupropion (Wellbutrin, Zyban) dose	radio, Required <table><tr><td>1</td><td>150 mg once a day</td></tr><tr><td>2</td><td>150 mg twice a day</td></tr><tr><td>3</td><td>Other</td></tr></table>	1	150 mg once a day	2	150 mg twice a day	3	Other								
1	150 mg once a day																
2	150 mg twice a day																
3	Other																
1241	pat_bup_other_dose_chw_g2 Show the field ONLY if: [pat_bup_dose_chw_g2] = '3'	Other Dose	text, Required														
1242	pat_bup_start_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(3)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1243	pat_7days_bup_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(3)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
3	3																
4	4																
5	5																
6	6																
7	7																
1244	bup_still_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(3)] = '1'	Is participant still taking Bupropion?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1245	pat_bup_end_chw_g2 Show the field ONLY if: [bup_still_chw_g2] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														

1246	pat_patch_dose_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(2)] = '1'	Nicotine patch dose	radio, Required <table><tr><td>1</td><td>21 mg</td></tr><tr><td>2</td><td>14 mg</td></tr><tr><td>3</td><td>7 mg</td></tr><tr><td>4</td><td>Other</td></tr></table>	1	21 mg	2	14 mg	3	7 mg	4	Other						
1	21 mg																
2	14 mg																
3	7 mg																
4	Other																
1247	pat_patch_other_dose_chw_g2 Show the field ONLY if: [pat_patch_dose_chw_g2] = '4'	Other Dose	text, Required														
1248	pat_patch_start_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(2)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1249	pat_7days_patch_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(2)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
3	3																
4	4																
5	5																
6	6																
7	7																
1250	patch_still_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(2)] = '1'	Is participant still using the patch?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1251	pat_patch_end_chw_g2 Show the field ONLY if: [patch_still_chw_g2] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1252	pat_gum_dose_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(4)] = '1'	Nicotine gum	radio, Required <table><tr><td>1</td><td>4-6 mg per day</td></tr><tr><td>2</td><td>8-10 mg per day</td></tr><tr><td>3</td><td>12-14 mg per day</td></tr><tr><td>4</td><td>16-18 mg per day</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	4-6 mg per day	2	8-10 mg per day	3	12-14 mg per day	4	16-18 mg per day	5	Other				
1	4-6 mg per day																
2	8-10 mg per day																
3	12-14 mg per day																
4	16-18 mg per day																
5	Other																
1253	pat_gum_other_dose_chw_g2 Show the field ONLY if: [pat_gum_dose_chw_g2] = '5'	Other Dose	text, Required														
1254	pat_gum_start_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(4)] = '1'	Start date	text (date_mdy), Required														
1255	pat_7days_gum_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(4)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
3	3																
4	4																
5	5																
6	6																
7	7																
1256	gum_still_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(4)] = '1'	Is participant still using the gum?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1257	pat_gum_end_chw_g2 Show the field ONLY if: [gum_still_chw_g2] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														

1258	pat_loz_dose_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(5)] = '1'	Nicotine lozenges	radio, Required <table border="1"> <tr><td>1</td><td>4-6 mg per day</td></tr> <tr><td>2</td><td>8-10 mg per day</td></tr> <tr><td>3</td><td>12-14 mg per day</td></tr> <tr><td>4</td><td>16-18 mg per day</td></tr> <tr><td>5</td><td>Other</td></tr> </table>	1	4-6 mg per day	2	8-10 mg per day	3	12-14 mg per day	4	16-18 mg per day	5	Other																							
1	4-6 mg per day																																			
2	8-10 mg per day																																			
3	12-14 mg per day																																			
4	16-18 mg per day																																			
5	Other																																			
1259	pat_loz_other_dose_chw_g2 Show the field ONLY if: [pat_loz_dose_chw_g2] = '5'	Other Dose	text, Required																																	
1260	pat_loz_start_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(5)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																																	
1261	pat_7days_loz_chw_g2 Show the field ONLY if: [pat_what_taking_chw_g2(5)] = '1'	Days used as prescribed in past 7 days	radio, Required <table border="1"> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td></tr> <tr><td>3</td><td>3</td></tr> <tr><td>4</td><td>4</td></tr> <tr><td>5</td><td>5</td></tr> <tr><td>6</td><td>6</td></tr> <tr><td>7</td><td>7</td></tr> </table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7																			
1	1																																			
2	2																																			
3	3																																			
4	4																																			
5	5																																			
6	6																																			
7	7																																			
1262	gum_still_chw_2_g2 Show the field ONLY if: [pat_what_taking_chw_g2(5)] = '1'	Is participant still using the lozenges?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																													
1	Yes																																			
0	No																																			
1263	pat_loz_end_chw_g2 Show the field ONLY if: [gum_still_chw_2_g2] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																																	
1264	pat_no_meds_chw_g2 Show the field ONLY if: [pat_filled_med_chw_g2] = '0'	if not taking smoking cessation medication, why not	checkbox, Required <table border="1"> <tr><td>1</td><td>pat_no_meds_chw_g2__1</td><td>I don't need/want to take more medications</td></tr> <tr><td>2</td><td>pat_no_meds_chw_g2__2</td><td>Fear of adverse effects,</td></tr> <tr><td>3</td><td>pat_no_meds_chw_g2__3</td><td>Family/friends/media recommended not taking it</td></tr> <tr><td>4</td><td>pat_no_meds_chw_g2__4</td><td>I took it before and didn't like the effect (their past experiences),</td></tr> <tr><td>5</td><td>pat_no_meds_chw_g2__5</td><td>I didn't understand what the Treatment was about</td></tr> <tr><td>6</td><td>pat_no_meds_chw_g2__6</td><td>I couldn't afford it</td></tr> <tr><td>7</td><td>pat_no_meds_chw_g2__7</td><td>I'd rather go to smoking groups</td></tr> <tr><td>8</td><td>pat_no_meds_chw_g2__8</td><td>I forgot</td></tr> <tr><td>9</td><td>pat_no_meds_chw_g2__9</td><td>Other</td></tr> <tr><td>10</td><td>pat_no_meds_chw_g2__10</td><td>Prefer not to answer</td></tr> <tr><td>11</td><td>pat_no_meds_chw_g2__11</td><td>I didn't want to quit smoking/ambivalent /changed my mind</td></tr> </table>	1	pat_no_meds_chw_g2__1	I don't need/want to take more medications	2	pat_no_meds_chw_g2__2	Fear of adverse effects,	3	pat_no_meds_chw_g2__3	Family/friends/media recommended not taking it	4	pat_no_meds_chw_g2__4	I took it before and didn't like the effect (their past experiences),	5	pat_no_meds_chw_g2__5	I didn't understand what the Treatment was about	6	pat_no_meds_chw_g2__6	I couldn't afford it	7	pat_no_meds_chw_g2__7	I'd rather go to smoking groups	8	pat_no_meds_chw_g2__8	I forgot	9	pat_no_meds_chw_g2__9	Other	10	pat_no_meds_chw_g2__10	Prefer not to answer	11	pat_no_meds_chw_g2__11	I didn't want to quit smoking/ambivalent /changed my mind
1	pat_no_meds_chw_g2__1	I don't need/want to take more medications																																		
2	pat_no_meds_chw_g2__2	Fear of adverse effects,																																		
3	pat_no_meds_chw_g2__3	Family/friends/media recommended not taking it																																		
4	pat_no_meds_chw_g2__4	I took it before and didn't like the effect (their past experiences),																																		
5	pat_no_meds_chw_g2__5	I didn't understand what the Treatment was about																																		
6	pat_no_meds_chw_g2__6	I couldn't afford it																																		
7	pat_no_meds_chw_g2__7	I'd rather go to smoking groups																																		
8	pat_no_meds_chw_g2__8	I forgot																																		
9	pat_no_meds_chw_g2__9	Other																																		
10	pat_no_meds_chw_g2__10	Prefer not to answer																																		
11	pat_no_meds_chw_g2__11	I didn't want to quit smoking/ambivalent /changed my mind																																		
1265	other_pat_no_meds_chw_g2 Show the field ONLY if: [pat_no_meds_chw_g2(9)] = '1'	Other	text, Required																																	
1266	pat_recommend_cbt_chw_g2 Show the field ONLY if: [seen_by_pcp_chw_g2] = '3'	Did the PCP recommend attending a smoking group?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																													
1	Yes																																			
0	No																																			

1267	pat_cbt_chw_g2 Show the field ONLY if: [pat_recommend_cbt_chw_g2] = '1'	Is participant attending a smoking cessation group?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																							
1	Yes																													
0	No																													
1268	pat_cbt_start_chw_g2 Show the field ONLY if: [pat_cbt_chw_g2] = '1'	Date started	text (date_mdy), Required Field Annotation: @HIDEBUTTON																											
1269	pat_att_cbt_chw_g2 Show the field ONLY if: [pat_cbt_chw_g2] = '1'	Attendance in past month	radio <table><tr><td>1</td><td>1 session</td></tr><tr><td>2</td><td>2 sessions</td></tr><tr><td>3</td><td>3 sessions</td></tr><tr><td>4</td><td>4 sessions</td></tr><tr><td>5</td><td>5 sessions or more</td></tr></table>	1	1 session	2	2 sessions	3	3 sessions	4	4 sessions	5	5 sessions or more																	
1	1 session																													
2	2 sessions																													
3	3 sessions																													
4	4 sessions																													
5	5 sessions or more																													
1270	pat_loc_cbt_chw_g2 Show the field ONLY if: [pat_cbt_chw_g2] = '1'	Group location	notes, Required																											
1271	pat_no_cbt_chw_g2 Show the field ONLY if: [pat_cbt_chw_g2] = '0'	If not attending cessation group, why not	checkbox, Required <table><tr><td>1</td><td>pat_no_cbt_chw_g2__1</td><td>I don't have a ride</td></tr><tr><td>2</td><td>pat_no_cbt_chw_g2__2</td><td>Fear of adverse effects,</td></tr><tr><td>3</td><td>pat_no_cbt_chw_g2__3</td><td>Family/friends/media recommended not going</td></tr><tr><td>4</td><td>pat_no_cbt_chw_g2__4</td><td>I did it before and didn't like it (their past experiences),</td></tr><tr><td>5</td><td>pat_no_cbt_chw_g2__5</td><td>I don't understand what the group is about</td></tr><tr><td>6</td><td>pat_no_cbt_chw_g2__6</td><td>I'd rather quit smoking on my own</td></tr><tr><td>7</td><td>pat_no_cbt_chw_g2__7</td><td>I don't want to quit smoking</td></tr><tr><td>8</td><td>pat_no_cbt_chw_g2__8</td><td>Other</td></tr><tr><td>9</td><td>pat_no_cbt_chw_g2__9</td><td>Prefer not to answer</td></tr></table>	1	pat_no_cbt_chw_g2__1	I don't have a ride	2	pat_no_cbt_chw_g2__2	Fear of adverse effects,	3	pat_no_cbt_chw_g2__3	Family/friends/media recommended not going	4	pat_no_cbt_chw_g2__4	I did it before and didn't like it (their past experiences),	5	pat_no_cbt_chw_g2__5	I don't understand what the group is about	6	pat_no_cbt_chw_g2__6	I'd rather quit smoking on my own	7	pat_no_cbt_chw_g2__7	I don't want to quit smoking	8	pat_no_cbt_chw_g2__8	Other	9	pat_no_cbt_chw_g2__9	Prefer not to answer
1	pat_no_cbt_chw_g2__1	I don't have a ride																												
2	pat_no_cbt_chw_g2__2	Fear of adverse effects,																												
3	pat_no_cbt_chw_g2__3	Family/friends/media recommended not going																												
4	pat_no_cbt_chw_g2__4	I did it before and didn't like it (their past experiences),																												
5	pat_no_cbt_chw_g2__5	I don't understand what the group is about																												
6	pat_no_cbt_chw_g2__6	I'd rather quit smoking on my own																												
7	pat_no_cbt_chw_g2__7	I don't want to quit smoking																												
8	pat_no_cbt_chw_g2__8	Other																												
9	pat_no_cbt_chw_g2__9	Prefer not to answer																												
1272	other_pat_no_cbt_chw_g2 Show the field ONLY if: [pat_no_cbt_chw_g2(8)] = '1'	Other	text, Required																											
1273	notes3_chw_g2	Notes	notes Custom alignment: RH																											

1274	<div>session_prev_goals_chw_g2</div> <div>Show the field ONLY if: [seen_by_pcp_chw_g2] = '1' or [seen_by_pcp_chw_g2] = '2' or [seen_by_pcp_chw_g2] = '3' or [seen_by_pcp_chw_g2] = '4' or [seen_by_pcp_chw_g2] = '5'</div>	<div>Plan from previous session</div> <div>Visit 20: [visit_20_arm_2][session_next_goals_chw]</div> <div>Visit 21: [visit_21_arm_2][session_next_goals_chw_g2]</div> <div>Visit 22: [visit_22_arm_2][session_next_goals_chw_g2]</div> <div>Visit 23: [visit_23_arm_2][session_next_goals_chw_g2]</div> <div>Visit 24: [visit_24_arm_2][session_next_goals_chw_g2]</div> <div>Visit 25: [visit_25_arm_2][session_next_goals_chw_g2]</div> <div>Visit 26: [visit_26_arm_2][session_next_goals_chw_g2]</div> <div>Visit 27: [visit_27_arm_2][session_next_goals_chw_g2]</div> <div>Visit 28: [visit_28_arm_2][session_next_goals_chw_g2]</div> <div>Visit 29: [visit_29_arm_2][session_next_goals_chw_g2]</div> <div>Visit 30: [visit_30_arm_2][session_next_goals_chw_g2]</div> <div>Visit 31: [visit_31_arm_2][session_next_goals_chw_g2]</div> <div>Visit 32: [visit_32_arm_2][session_next_goals_chw_g2]</div> <div>Visit 33: [visit_33_arm_2][session_next_goals_chw_g2]</div> <div>Visit 34: [visit_34_arm_2][session_next_goals_chw_g2]</div> <div>Visit 35: [visit_35_arm_2][session_next_goals_chw_g2]</div> <div>Visit 36: [visit_36_arm_2][session_next_goals_chw_g2]</div> <div>Visit 37: [visit_37_arm_2][session_next_goals_chw_g2]</div> <div>Visit 38: [visit_38_arm_2][session_next_goals_chw_g2]</div> <div>Visit 39: [visit_39_arm_2][session_next_goals_chw_g2]</div>	<div>descriptive</div>						
1275	<div>pat_goals_acc_chw_g2</div> <div>Show the field ONLY if: [seen_by_pcp_chw_g2] = '1' or [seen_by_pcp_chw_g2] = '2' or [seen_by_pcp_chw_g2] = '3' or [seen_by_pcp_chw_g2] = '4' or [seen_by_pcp_chw_g2] = '5'</div>	<div>Plan accomplished?</div>	<div>radio, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>3</td><td>Partially</td></tr></table>	1	Yes	2	No	3	Partially
1	Yes								
2	No								
3	Partially								
1276	<div>pat_goal_prog_chw_g2</div> <div>Show the field ONLY if: [seen_by_pcp_chw_g2] = '1' or [seen_by_pcp_chw_g2] = '2' or [seen_by_pcp_chw_g2] = '3' or [seen_by_pcp_chw_g2] = '4' or [seen_by_pcp_chw_g2] = '5'</div>	<div>Describe progress on plan</div>	<div>notes, Required</div>						
1277	<div>pat_goal_partially_chw_g2</div> <div>Show the field ONLY if: [pat_goals_acc_chw_g2] = '2' or [pat_goals_acc_chw_g2] = '3'</div>	<div>If plan was not completed or was only partially completed, identify what got in the way and how to problem-solve in future</div>	<div>notes, Required</div>						

1278	session_content_chw_g2 Show the field ONLY if: [seen_by_pcp_chw_g2] = '1' or [seen_by_pcp_chw_g2] = '2' or [seen_by_pcp_chw_g2] = '3' or [seen_by_pcp_chw_g2] = '4' or [seen_by_pcp_chw_g2] = '5'	Session Content	checkbox, Required	
			1	session_content_chw_g2__1 Engagement and involvement
			2	session_content_chw_g2__2 Motivational interviewing
			3	session_content_chw_g2__3 Motivational tools
			4	session_content_chw_g2__4 Education topic
			5	session_content_chw_g2__5 Medication compliance
			6	session_content_chw_g2__6 Care coordination
			7	session_content_chw_g2__7 Progress
			8	session_content_chw_g2__8 Other
			9	session_content_chw_g2__9 Quit Line
1279	session_engag_chw_g2 Show the field ONLY if: [session_content_chw_g2(1)] = '1'	1, Engagement and involvement	notes, Required Custom alignment: LH	
1280	pat_mi_chw_g2 Show the field ONLY if: [session_content_chw_g2(2)] = '1'	2. Motivational Interviewing	notes, Required Custom alignment: LH	
1281	session_pros_cons_chw_g2 Show the field ONLY if: [session_content_chw_g2(3)] = '1'	3. Motivational tools: (include benefits and barriers-be specific! Use patient's own words when possible)	checkbox, Required	
			1	session_pros_cons_chw_g2__1 Identifying pros of smoking
			2	session_pros_cons_chw_g2__2 Identifying cons of smoking
			3	session_pros_cons_chw_g2__3 Health benefits from quitting smoking
			4	session_pros_cons_chw_g2__4 Cessation medications
			5	session_pros_cons_chw_g2__5 Promoting smoking groups
			6	session_pros_cons_chw_g2__6 Other
			7	session_pros_cons_chw_g2__7 CO and smoking
			8	session_pros_cons_chw_g2__8 Smoking triggers, pack wraps
			9	session_pros_cons_chw_g2__9 Reasons to quit smoking
			10	session_pros_cons_chw_g2__10 Preparing for the quit day
1282	other_motiv_tools_chw_g2 Show the field ONLY if: [session_pros_cons_chw_g2(6)] = '1'	Other	text, Required	
1283	session_education_chw_g2 Show the field ONLY if: [session_content_chw_g2(4)] = '1'	4. Education Topic (check all that apply)	checkbox, Required	
			1	session_education_chw_g2__1 Withdrawal symptoms
			2	session_education_chw_g2__2 Coping with withdrawal
			3	session_education_chw_g2__3 Cessation medication
			4	session_education_chw_g2__4 Things to do instead of smoking, the 4Ds
			5	session_education_chw_g2__5 Other
			6	session_education_chw_g2__6 Dealing with stress
			7	session_education_chw_g2__7 Dealing with weight gain
			8	session_education_chw_g2__8 Dealing with high risk situations
			9	session_education_chw_g2__9 Dealing with slips

1284	other_educ_chw_g2 Show the field ONLY if: [session_education_chw_g2(5)] = '1'	Other	text, Required													
1285	session_check_meds_chw_g2 Show the field ONLY if: [session_content_chw_g2(5)] = '1'	5. Check medication compliance	notes Custom alignment: LH													
1286	session_care_chw_g2 Show the field ONLY if: [session_content_chw_g2(6)] = '1'	6. Care coordination (check all that apply)	checkbox, Required <table><tr><td>1</td><td>session_care_chw_g2__1</td><td>Scheduling PCP visit</td></tr><tr><td>2</td><td>session_care_chw_g2__2</td><td>Smoking cessation group</td></tr><tr><td>3</td><td>session_care_chw_g2__3</td><td>Other</td></tr><tr><td>4</td><td>session_care_chw_g2__4</td><td>Pharmacy and medications</td></tr></table>		1	session_care_chw_g2__1	Scheduling PCP visit	2	session_care_chw_g2__2	Smoking cessation group	3	session_care_chw_g2__3	Other	4	session_care_chw_g2__4	Pharmacy and medications
1	session_care_chw_g2__1	Scheduling PCP visit														
2	session_care_chw_g2__2	Smoking cessation group														
3	session_care_chw_g2__3	Other														
4	session_care_chw_g2__4	Pharmacy and medications														
1287	other_care_chw_g2 Show the field ONLY if: [session_care_chw_g2(3)] = '1'	Other	text, Required													
1288	session_progress_chw_g2 Show the field ONLY if: [session_content_chw_g2(7)] = '1'	7. Reinforcing progress and identifying what has been helpful in achieving gains (e.g., scheduling PCP visit, smoking cessation group)	notes Custom alignment: LH													
1289	session_other_chw_g2 Show the field ONLY if: [session_content_chw_g2(8)] = '1'	8. Other	notes Custom alignment: LH													
1290	session_qline_chw_g2 Show the field ONLY if: [session_content_chw_g2(9)] = '1'	9. QUIT LINE Was QUIT LINE presented/discussed to participant TODAY?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>		1	Yes	0	No								
1	Yes															
0	No															
1291	session_noqline_chw_g2 Show the field ONLY if: [session_qline_chw_g2] = '0'	Why not?	notes, Required													
1292	session_qline_interest_chw_g2 Show the field ONLY if: [session_qline_chw_g2] = '1'	Was participant interested?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>		1	Yes	0	No								
1	Yes															
0	No															
1293	session_qlineatsession_chw_g2 Show the field ONLY if: [session_qline_chw_g2] = '1'	Did the participant call the Quit Line during this session?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>		1	Yes	0	No								
1	Yes															
0	No															
1294	session_qlinenoatsession_chw_g2 Show the field ONLY if: [session_qlineatsession_chw_g2] = '0'	Why not?	notes, Required													
1295	session_qlinesched_chw_g2 Show the field ONLY if: [session_qlineatsession_chw_g2] = '0'	Was a Quit Line call scheduled?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>		1	Yes	0	No								
1	Yes															
0	No															
1296	session_qlinenosched_chw_g2 Show the field ONLY if: [session_qlinesched_chw_g2] = '0'	Why not?	notes, Required													
1297	session_qlinetime_chw_g2 Show the field ONLY if: [session_qlineatsession_chw_g2] = '1'	Date/Time Quit Line call	text (datetime_mdy), Required													
1298	session_qline_chwinvolv_g2 Show the field ONLY if: [session_qlineatsession_chw_g2] = '1'	Was the CHW involved in the first call?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>		1	Yes	0	No								
1	Yes															
0	No															
1299	session_qlinecall_chw_g2 Show the field ONLY if: [session_qlineatsession_chw_g2] = '1'	Describe session/call	notes, Required													

1300	session_qlinenrt_chw_g2 Show the field ONLY if: [session_qlineatsession_chw_g2] = '1'	Did the participant/CHW request NRT? Please explain	notes, Required																										
1301	session_qlinenrtuse_chw_g2 Show the field ONLY if: [session_qlineatsession_chw_g2] = '1'	Did the participant use the NRT? Please explain	notes, Required																										
1302	session_qlineable_chw_g2 Show the field ONLY if: [session_qlineatsession_chw_g2] = '1'	Did the quitline staff seem able to work with people with SMI? Please explain	notes, Required																										
1303	session_qlinefu_chw_g2 Show the field ONLY if: [session_qlineatsession_chw_g2] = '1'	Was a follow up call scheduled? explain	notes, Required																										
1304	session_qlinecom_chw_g2	Quit Line Notes	notes																										
1305	session_descript_chw_g2	Brief description of the session	notes, Required Custom alignment: LH																										
1306	session_next_goals_chw_g2	Goals for next session	notes, Required Custom alignment: LH																										
1307	next_visit_all_chw_g2	Next visit will be	text (datetime_mdy), Required Field Annotation: @HIDEBUTTON																										
1308	name_chw_g2	CHW	radio, Required <table><tr><td>1</td><td>Alexandra Fortune</td></tr><tr><td>2</td><td>Ashley Newman</td></tr><tr><td>3</td><td>Aysha Peralta</td></tr><tr><td>4</td><td>Erin Hanrahan</td></tr><tr><td>5</td><td>John Dowd</td></tr><tr><td>6</td><td>Karlie Marrs</td></tr><tr><td>7</td><td>Leeza Rojas</td></tr><tr><td>8</td><td>Madalyn Davis</td></tr><tr><td>9</td><td>Madeleine Fontaine</td></tr><tr><td>10</td><td>Megan Donnelly</td></tr><tr><td>11</td><td>Morgan Boudreau</td></tr><tr><td>12</td><td>Nina Cherilus</td></tr><tr><td>13</td><td>Carlos Taveras</td></tr></table>	1	Alexandra Fortune	2	Ashley Newman	3	Aysha Peralta	4	Erin Hanrahan	5	John Dowd	6	Karlie Marrs	7	Leeza Rojas	8	Madalyn Davis	9	Madeleine Fontaine	10	Megan Donnelly	11	Morgan Boudreau	12	Nina Cherilus	13	Carlos Taveras
1	Alexandra Fortune																												
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12	Nina Cherilus																												
13	Carlos Taveras																												
1309	contact_sheet_all_visits_chw_11_20_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete																				
0	Incomplete																												
1	Unverified																												
2	Complete																												
Instrument: Contact Sheet All Visits CHW 41_60 (contact_sheet_all_visits_chw_41_60) <div>^ Collapse</div>																													
1310	date_all_visits_chw_g23	Visit Date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																										
1311	start_all_visits_chw_g23	Start time	text (time), Required																										
1312	end_all_visits_chw_g23	End time	text (time), Required																										
1313	visit_modality_chw_g23	Visit modality	radio, Required <table><tr><td>1</td><td>Phone visit</td></tr><tr><td>2</td><td>In person visit</td></tr></table>	1	Phone visit	2	In person visit																						
1	Phone visit																												
2	In person visit																												

1314	reason_phone_chw_g23 Show the field ONLY if: [visit_modality_chw_g23] = '1'	Reasons for the phone visit (select all that apply)	checkbox, Required <table><tr><td>1</td><td>reason_phone_chw_g23__1</td><td>Help preparing for quit day</td></tr><tr><td>2</td><td>reason_phone_chw_g23__2</td><td>Quit day</td></tr><tr><td>3</td><td>reason_phone_chw_g23__3</td><td>Check for withdrawal symptoms</td></tr><tr><td>4</td><td>reason_phone_chw_g23__4</td><td>Medication compliance/side effects</td></tr><tr><td>5</td><td>reason_phone_chw_g23__5</td><td>Other</td></tr></table>	1	reason_phone_chw_g23__1	Help preparing for quit day	2	reason_phone_chw_g23__2	Quit day	3	reason_phone_chw_g23__3	Check for withdrawal symptoms	4	reason_phone_chw_g23__4	Medication compliance/side effects	5	reason_phone_chw_g23__5	Other			
1	reason_phone_chw_g23__1	Help preparing for quit day																			
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3	reason_phone_chw_g23__3	Check for withdrawal symptoms																			
4	reason_phone_chw_g23__4	Medication compliance/side effects																			
5	reason_phone_chw_g23__5	Other																			
1315	other_reason_phone_chw_g23 Show the field ONLY if: [reason_phone_chw_g23(5)] = '1'	Other reason for a phone visit	text, Required																		
1316	reasons_contact_chw_g23 Show the field ONLY if: [visit_modality_chw_g23] = '2'	Reasons for In Person meeting (select all that apply)	checkbox, Required <table><tr><td>1</td><td>reasons_contact_chw_g23__1</td><td>Initial visit/obtain consent</td></tr><tr><td>2</td><td>reasons_contact_chw_g23__2</td><td>Intervention visit</td></tr><tr><td>3</td><td>reasons_contact_chw_g23__3</td><td>Taking participant to smoking group</td></tr><tr><td>4</td><td>reasons_contact_chw_g23__4</td><td>Taking participant to PCP</td></tr><tr><td>5</td><td>reasons_contact_chw_g23__5</td><td>Other</td></tr><tr><td>6</td><td>reasons_contact_chw_g23__6</td><td>Medication compliance/side effects</td></tr></table>	1	reasons_contact_chw_g23__1	Initial visit/obtain consent	2	reasons_contact_chw_g23__2	Intervention visit	3	reasons_contact_chw_g23__3	Taking participant to smoking group	4	reasons_contact_chw_g23__4	Taking participant to PCP	5	reasons_contact_chw_g23__5	Other	6	reasons_contact_chw_g23__6	Medication compliance/side effects
1	reasons_contact_chw_g23__1	Initial visit/obtain consent																			
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3	reasons_contact_chw_g23__3	Taking participant to smoking group																			
4	reasons_contact_chw_g23__4	Taking participant to PCP																			
5	reasons_contact_chw_g23__5	Other																			
6	reasons_contact_chw_g23__6	Medication compliance/side effects																			
1317	other_reason_contact_chw_g23 Show the field ONLY if: [reasons_contact_chw_g23(5)] = '1'	Other reason for an In Person Meeting	text, Required																		
1318	smoking_chw_g23	Section Header: <i>Smoking Behavior</i> Has the participant smoked in the past 7 days?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																				
0	No																				
1319	notes1_chw_g23	Notes	notes Custom alignment: RH																		
1320	tobacco_prod_chw_g23	Which tobacco products does the participant currently smoke? (I.e. Cigarettes, Cigars, Cigarillos, Rolliies, Mini Cigars, Pipe) Select all that apply	checkbox <table><tr><td>1</td><td>tobacco_prod_chw_g23__1</td><td>Cigarettes</td></tr><tr><td>2</td><td>tobacco_prod_chw_g23__2</td><td>Mini cigars (i.e. double diamonds)</td></tr><tr><td>3</td><td>tobacco_prod_chw_g23__3</td><td>loose tobacco (roll your own, rollicies)</td></tr><tr><td>4</td><td>tobacco_prod_chw_g23__4</td><td>e-cigarettes/vaping</td></tr><tr><td>5</td><td>tobacco_prod_chw_g23__5</td><td>Other</td></tr><tr><td>6</td><td>tobacco_prod_chw_g23__6</td><td>Quit smoking</td></tr></table>	1	tobacco_prod_chw_g23__1	Cigarettes	2	tobacco_prod_chw_g23__2	Mini cigars (i.e. double diamonds)	3	tobacco_prod_chw_g23__3	loose tobacco (roll your own, rollicies)	4	tobacco_prod_chw_g23__4	e-cigarettes/vaping	5	tobacco_prod_chw_g23__5	Other	6	tobacco_prod_chw_g23__6	Quit smoking
1	tobacco_prod_chw_g23__1	Cigarettes																			
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3	tobacco_prod_chw_g23__3	loose tobacco (roll your own, rollicies)																			
4	tobacco_prod_chw_g23__4	e-cigarettes/vaping																			
5	tobacco_prod_chw_g23__5	Other																			
6	tobacco_prod_chw_g23__6	Quit smoking																			
1321	cpd_chw_g23 Show the field ONLY if: [smoking_chw_g23] = '1'	On average, how many cigarettes (or other tobacco product) per day has the participant smoked in past 7 days?	text (integer), Required																		
1322	cpd_non_daily_chw_g23	COMPLETE ONLY IF PARTICIPANT HASN'T BEEN SMOKING EVERY DAY DURING THE PAST WEEK On average, how many cigarettes (or other tobacco product) per WEEK has the participant smoked in past week?	text																		
1323	last_cigarette_chw_g23 Show the field ONLY if: [smoking_chw_g23] = '1' or [smoking_chw_g23] = '0'	Time of last cigarette (or other tobacco product)	text (datetime_mdy), Required Custom alignment: RH Field Annotation: @HIDEBUTTON																		

1324	pat_co_done_chw_g23 Show the field ONLY if: [visit_modality_chw_g23] = '2'	Section Header: Previous CO measure: Visit 41: [visit_41_arm_2][expired_co_chw_g23][time_co_chw_g23] Visit 42: [visit_42_arm_2][expired_co_chw_g23][time_co_chw_g23] Visit 43: [visit_43_arm_2][expired_co_chw_g23][time_co_chw_g23] Visit 44: [visit_44_arm_2][expired_co_chw_g23][time_co_chw_g23] Visit 45: [visit_45_arm_2][expired_co_chw_g23][time_co_chw_g23] Visit 46: [visit_46_arm_2][expired_co_chw_g23][time_co_chw_g23] Visit 47: [visit_47_arm_2][expired_co_chw_g23][time_co_chw_g23] Visit 48: [visit_48_arm_2][expired_co_chw_g23][time_co_chw_g23] Visit 49: [visit_49_arm_2][expired_co_chw_g23][time_co_chw_g23] Visit 50: [visit_50_arm_2][expired_co_chw_g23][time_co_chw_g23] Visit 51: [visit_51_arm_2][expired_co_chw_g23][time_co_chw_g23] Visit 52: [visit_52_arm_2][expired_co_chw_g23][time_co_chw_g23] Visit 53: [visit_53_arm_2][expired_co_chw_g23][time_co_chw_g23] Visit 54: [visit_54_arm_2][expired_co_chw_g23][time_co_chw_g23] Visit 55: [visit_55_arm_2][expired_co_chw_g23][time_co_chw_g23] Visit 56: [visit_56_arm_2][expired_co_chw_g23][time_co_chw_g23] Visit 57: [visit_57_arm_2][expired_co_chw_g23][time_co_chw_g23] Visit 58: [visit_58_arm_2][expired_co_chw_g23][time_co_chw_g23] Visit 59: [visit_59_arm_2][expired_co_chw_g23][time_co_chw_g23] Was CO testing completed today?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No																												
1	Yes																																		
0	No																																		
1325	pat_yes_co_chw_g23 Show the field ONLY if: [pat_co_done_chw_g23] = '1'	Reasons for CO measurement	checkbox, Required <table border="1"> <tr> <td>1</td> <td>pat_yes_co_chw_g23__1</td> <td>Last CO month was done over a month ago</td> </tr> <tr> <td>2</td> <td>pat_yes_co_chw_g23__2</td> <td>Participant changed smoking behavior after last CO measurement (quit or relapsed)</td> </tr> <tr> <td>3</td> <td>pat_yes_co_chw_g23__3</td> <td>Participant asked for it</td> </tr> <tr> <td>4</td> <td>pat_yes_co_chw_g23__4</td> <td>Other</td> </tr> </table>	1	pat_yes_co_chw_g23__1	Last CO month was done over a month ago	2	pat_yes_co_chw_g23__2	Participant changed smoking behavior after last CO measurement (quit or relapsed)	3	pat_yes_co_chw_g23__3	Participant asked for it	4	pat_yes_co_chw_g23__4	Other																				
1	pat_yes_co_chw_g23__1	Last CO month was done over a month ago																																	
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3	pat_yes_co_chw_g23__3	Participant asked for it																																	
4	pat_yes_co_chw_g23__4	Other																																	
1326	pat_other_co_chw_g23 Show the field ONLY if: [pat_yes_co_chw_g23(4)] = '1'	Other	text, Required																																
1327	expired_co_chw_g23 Show the field ONLY if: [pat_co_done_chw_g23] = '1'	Expired CO reading (ppm)	text (integer, Min: 0, Max: 100), Required																																
1328	time_co_chw_g23 Show the field ONLY if: [pat_co_done_chw_g23] = '1'	Date of CO reading	text (date_mdy), Required Field Annotation: @HIDEBUTTON																																
1329	hour_co_chw_g23 Show the field ONLY if: [pat_co_done_chw_g23] = '1'	Time of CO reading	text (time), Required																																
1330	co_monitor_chw_g23 Show the field ONLY if: [pat_co_done_chw_g23] = '1'	CO Monitor ID	radio, Required <table border="1"> <tr><td>1</td><td>A</td></tr> <tr><td>2</td><td>B</td></tr> <tr><td>3</td><td>C</td></tr> <tr><td>4</td><td>D</td></tr> <tr><td>5</td><td>E</td></tr> <tr><td>6</td><td>F</td></tr> <tr><td>7</td><td>G</td></tr> <tr><td>8</td><td>H</td></tr> <tr><td>9</td><td>I</td></tr> <tr><td>10</td><td>J</td></tr> <tr><td>11</td><td>K</td></tr> <tr><td>12</td><td>L</td></tr> <tr><td>13</td><td>M</td></tr> <tr><td>14</td><td>N</td></tr> <tr><td>15</td><td>O</td></tr> <tr><td>16</td><td>P</td></tr> </table> Custom alignment: RH	1	A	2	B	3	C	4	D	5	E	6	F	7	G	8	H	9	I	10	J	11	K	12	L	13	M	14	N	15	O	16	P
1	A																																		
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15	O																																		
16	P																																		
1331	co_exec_chw_g23 Show the field ONLY if: [pat_co_done_chw_g23] = '1'	Was CO measuring executed properly?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No																												
1	Yes																																		
0	No																																		

1332	pat_no_co_chw_g23 Show the field ONLY if: [pat_co_done_chw_g23] = '0'	Reasons for NO CO measurement	checkbox, Required <table border="1"> <tr> <td>1</td> <td>pat_no_co_chw_g23__1</td> <td>CO was done within the past month and there was no change in smoking behavior</td> </tr> <tr> <td>2</td> <td>pat_no_co_chw_g23__2</td> <td>Participant refused</td> </tr> <tr> <td>3</td> <td>pat_no_co_chw_g23__3</td> <td>Participant unable (respiratory illness, symptomatic)</td> </tr> <tr> <td>4</td> <td>pat_no_co_chw_g23__4</td> <td>Other</td> </tr> </table>	1	pat_no_co_chw_g23__1	CO was done within the past month and there was no change in smoking behavior	2	pat_no_co_chw_g23__2	Participant refused	3	pat_no_co_chw_g23__3	Participant unable (respiratory illness, symptomatic)	4	pat_no_co_chw_g23__4	Other						
1	pat_no_co_chw_g23__1	CO was done within the past month and there was no change in smoking behavior																			
2	pat_no_co_chw_g23__2	Participant refused																			
3	pat_no_co_chw_g23__3	Participant unable (respiratory illness, symptomatic)																			
4	pat_no_co_chw_g23__4	Other																			
1333	other_no_co_chw_g23 Show the field ONLY if: [pat_no_co_chw_g23(4)] = '1'	Other	text, Required																		
1334	notes_co_chw_g23	Notes	notes Custom alignment: RH																		
1335	seen_by_pcp_chw_g23 Show the field ONLY if: [visit_modality_chw_g23] = '2'	Was subject seen by primary care team since last meeting?	radio, Required <table border="1"> <tr> <td>1</td> <td>None scheduled</td> </tr> <tr> <td>2</td> <td>No, missed visit</td> </tr> <tr> <td>3</td> <td>Yes, smoking discussed</td> </tr> <tr> <td>4</td> <td>Yes, smoking not discussed</td> </tr> <tr> <td>5</td> <td>Unknown</td> </tr> </table>	1	None scheduled	2	No, missed visit	3	Yes, smoking discussed	4	Yes, smoking not discussed	5	Unknown								
1	None scheduled																				
2	No, missed visit																				
3	Yes, smoking discussed																				
4	Yes, smoking not discussed																				
5	Unknown																				
1336	pcp_recommend_pat_chw_g23 Show the field ONLY if: [seen_by_pcp_chw_g23] = '3'	Did the PCP recommend that the participant quit smoking?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
1337	pcp_prescribed_pat_chw_g23 Show the field ONLY if: [seen_by_pcp_chw_g23] = '3'	Did PCP prescribe smoking cessation medication?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
1338	pat_what_prescribed_chw_g23 Show the field ONLY if: [pcp_prescribed_pat_chw_g23] = '1' or [reason_phone_chw_g23(4)] = '1'	What did the PCP prescribe?	checkbox, Required <table border="1"> <tr> <td>1</td> <td>pat_what_prescribed_chw_g23__1</td> <td>Varenicline (i.e. Chantix)</td> </tr> <tr> <td>2</td> <td>pat_what_prescribed_chw_g23__2</td> <td>Nicotine patch</td> </tr> <tr> <td>3</td> <td>pat_what_prescribed_chw_g23__3</td> <td>Bupropion (i.e. Wellbutrin, Zyban)</td> </tr> <tr> <td>4</td> <td>pat_what_prescribed_chw_g23__4</td> <td>Nicotine gum</td> </tr> <tr> <td>5</td> <td>pat_what_prescribed_chw_g23__5</td> <td>Nicotine lozenge</td> </tr> <tr> <td>6</td> <td>pat_what_prescribed_chw_g23__6</td> <td>Other</td> </tr> </table>	1	pat_what_prescribed_chw_g23__1	Varenicline (i.e. Chantix)	2	pat_what_prescribed_chw_g23__2	Nicotine patch	3	pat_what_prescribed_chw_g23__3	Bupropion (i.e. Wellbutrin, Zyban)	4	pat_what_prescribed_chw_g23__4	Nicotine gum	5	pat_what_prescribed_chw_g23__5	Nicotine lozenge	6	pat_what_prescribed_chw_g23__6	Other
1	pat_what_prescribed_chw_g23__1	Varenicline (i.e. Chantix)																			
2	pat_what_prescribed_chw_g23__2	Nicotine patch																			
3	pat_what_prescribed_chw_g23__3	Bupropion (i.e. Wellbutrin, Zyban)																			
4	pat_what_prescribed_chw_g23__4	Nicotine gum																			
5	pat_what_prescribed_chw_g23__5	Nicotine lozenge																			
6	pat_what_prescribed_chw_g23__6	Other																			
1339	other_prescribed_chw_g23 Show the field ONLY if: [pat_what_prescribed_chw_g23(6)] = '1'	Other	text, Required																		
1340	pat_filled_med_chw_g23 Show the field ONLY if: [pcp_prescribed_pat_chw_g23] = '1' or [reason_phone_chw_g23(4)] = '1'	Did the participant fill the prescription for the smoking cessation medication?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
1341	pat_what_taking_chw_g23 Show the field ONLY if: [pcp_prescribed_pat_chw_g23] = '1' or [reason_phone_chw_g23(4)] = '1' or [reasons_contact_chw_g23(6)] = '1'	What is the participant taking?	checkbox, Required <table border="1"> <tr> <td>1</td> <td>pat_what_taking_chw_g23__1</td> <td>Varenicline (i.e. Chantix)</td> </tr> <tr> <td>2</td> <td>pat_what_taking_chw_g23__2</td> <td>Nicotine patch</td> </tr> <tr> <td>3</td> <td>pat_what_taking_chw_g23__3</td> <td>Bupropion (i.e. Wellbutrin, Zyban)</td> </tr> <tr> <td>4</td> <td>pat_what_taking_chw_g23__4</td> <td>Nicotine gum</td> </tr> <tr> <td>5</td> <td>pat_what_taking_chw_g23__5</td> <td>Nicotine lozenge</td> </tr> <tr> <td>6</td> <td>pat_what_taking_chw_g23__6</td> <td>Other</td> </tr> </table>	1	pat_what_taking_chw_g23__1	Varenicline (i.e. Chantix)	2	pat_what_taking_chw_g23__2	Nicotine patch	3	pat_what_taking_chw_g23__3	Bupropion (i.e. Wellbutrin, Zyban)	4	pat_what_taking_chw_g23__4	Nicotine gum	5	pat_what_taking_chw_g23__5	Nicotine lozenge	6	pat_what_taking_chw_g23__6	Other
1	pat_what_taking_chw_g23__1	Varenicline (i.e. Chantix)																			
2	pat_what_taking_chw_g23__2	Nicotine patch																			
3	pat_what_taking_chw_g23__3	Bupropion (i.e. Wellbutrin, Zyban)																			
4	pat_what_taking_chw_g23__4	Nicotine gum																			
5	pat_what_taking_chw_g23__5	Nicotine lozenge																			
6	pat_what_taking_chw_g23__6	Other																			
1342	pat_other_med_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(6)] = '1'	Other	text, Required																		

1343	pat_var_dose_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(1)] = '1'	Varenicline (Chantix) Dose	radio, Required <table><tr><td>1</td><td>0.5 mg once a day</td></tr><tr><td>2</td><td>0.5 mg twice a day</td></tr><tr><td>3</td><td>1 mg once a day</td></tr><tr><td>4</td><td>1 mg twice a day</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	0.5 mg once a day	2	0.5 mg twice a day	3	1 mg once a day	4	1 mg twice a day	5	Other				
1	0.5 mg once a day																
2	0.5 mg twice a day																
3	1 mg once a day																
4	1 mg twice a day																
5	Other																
1344	pat_var_other_dose_chw_g23 Show the field ONLY if: [pat_var_dose_chw_g23] = '5'	Other Dose	text, Required														
1345	pat_var_start_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(1)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1346	pat_7days_var_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(1)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
3	3																
4	4																
5	5																
6	6																
7	7																
1347	var_still_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(1)] = '1'	Is participant still taking Varenicline?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1348	pat_var_end_chw_g23 Show the field ONLY if: [var_still_chw_g23] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1349	pat_bup_dose_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(3)] = '1'	Bupropion (Wellbutrin, Zyban) dose	radio, Required <table><tr><td>1</td><td>150 mg once a day</td></tr><tr><td>2</td><td>150 mg twice a day</td></tr><tr><td>3</td><td>Other</td></tr></table>	1	150 mg once a day	2	150 mg twice a day	3	Other								
1	150 mg once a day																
2	150 mg twice a day																
3	Other																
1350	pat_bup_other_dose_chw_g23 Show the field ONLY if: [pat_bup_dose_chw_g23] = '3'	Other Dose	text, Required														
1351	pat_bup_start_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(3)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1352	pat_7days_bup_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(3)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
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4	4																
5	5																
6	6																
7	7																
1353	bup_still_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(3)] = '1'	Is participant still taking Bupropion?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1354	pat_bup_end_chw_g23 Show the field ONLY if: [bup_still_chw_g23] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														

1355	pat_patch_dose_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(2)] = '1'	Nicotine patch dose	radio, Required <table><tr><td>1</td><td>21 mg</td></tr><tr><td>2</td><td>14 mg</td></tr><tr><td>3</td><td>7 mg</td></tr><tr><td>4</td><td>Other</td></tr></table>	1	21 mg	2	14 mg	3	7 mg	4	Other						
1	21 mg																
2	14 mg																
3	7 mg																
4	Other																
1356	pat_patch_other_dose_chw_g23 Show the field ONLY if: [pat_patch_dose_chw_g23] = '4'	Other Dose	text, Required														
1357	pat_patch_start_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(2)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1358	pat_7days_patch_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(2)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
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3	3																
4	4																
5	5																
6	6																
7	7																
1359	patch_still_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(2)] = '1'	Is participant still using the patch?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1360	pat_patch_end_chw_g23 Show the field ONLY if: [patch_still_chw_g23] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1361	pat_gum_dose_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(4)] = '1'	Nicotine gum	radio, Required <table><tr><td>1</td><td>4-6 mg per day</td></tr><tr><td>2</td><td>8-10 mg per day</td></tr><tr><td>3</td><td>12-14 mg per day</td></tr><tr><td>4</td><td>16-18 mg per day</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	4-6 mg per day	2	8-10 mg per day	3	12-14 mg per day	4	16-18 mg per day	5	Other				
1	4-6 mg per day																
2	8-10 mg per day																
3	12-14 mg per day																
4	16-18 mg per day																
5	Other																
1362	pat_gum_other_dose_chw_g23 Show the field ONLY if: [pat_gum_dose_chw_g23] = '5'	Other Dose	text, Required														
1363	pat_gum_start_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(4)] = '1'	Start date	text (date_mdy), Required														
1364	pat_7days_gum_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(4)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
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4	4																
5	5																
6	6																
7	7																
1365	gum_still_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(4)] = '1'	Is participant still using the gum?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1366	pat_gum_end_chw_g23 Show the field ONLY if: [gum_still_chw_g23] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														

1367	pat_loz_dose_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(5)] = '1'	Nicotine lozenges	radio, Required <table><tr><td>1</td><td>4-6 mg per day</td></tr><tr><td>2</td><td>8-10 mg per day</td></tr><tr><td>3</td><td>12-14 mg per day</td></tr><tr><td>4</td><td>16-18 mg per day</td></tr><tr><td>5</td><td>Other</td></tr></table>		1	4-6 mg per day	2	8-10 mg per day	3	12-14 mg per day	4	16-18 mg per day	5	Other																							
1	4-6 mg per day																																				
2	8-10 mg per day																																				
3	12-14 mg per day																																				
4	16-18 mg per day																																				
5	Other																																				
1368	pat_loz_other_dose_chw_g23 Show the field ONLY if: [pat_loz_dose_chw_g23] = '5'	Other Dose	text, Required																																		
1369	pat_loz_start_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(5)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																																		
1370	pat_7days_loz_chw_g23 Show the field ONLY if: [pat_what_taking_chw_g23(5)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>		1	1	2	2	3	3	4	4	5	5	6	6	7	7																			
1	1																																				
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3	3																																				
4	4																																				
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6	6																																				
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1371	gum_still_chw_2_g23 Show the field ONLY if: [pat_what_taking_chw_g23(5)] = '1'	Is participant still using the lozenges?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>		1	Yes	0	No																													
1	Yes																																				
0	No																																				
1372	pat_loz_end_chw_g23 Show the field ONLY if: [gum_still_chw_2_g23] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																																		
1373	pat_no_meds_chw_g23 Show the field ONLY if: [pat_filled_med_chw_g23] = '0'	if not taking smoking cessation medication, why not	checkbox, Required <table><tr><td>1</td><td>pat_no_meds_chw_g23__1</td><td>I don't need/want to take more medications</td></tr><tr><td>2</td><td>pat_no_meds_chw_g23__2</td><td>Fear of adverse effects,</td></tr><tr><td>3</td><td>pat_no_meds_chw_g23__3</td><td>Family/friends/media recommended not taking it</td></tr><tr><td>4</td><td>pat_no_meds_chw_g23__4</td><td>I took it before and didn't like the effect (their past experiences),</td></tr><tr><td>5</td><td>pat_no_meds_chw_g23__5</td><td>I didn't understand what the Treatment was about</td></tr><tr><td>6</td><td>pat_no_meds_chw_g23__6</td><td>I couldn't afford it</td></tr><tr><td>7</td><td>pat_no_meds_chw_g23__7</td><td>I'd rather go to smoking groups</td></tr><tr><td>8</td><td>pat_no_meds_chw_g23__8</td><td>I forgot</td></tr><tr><td>9</td><td>pat_no_meds_chw_g23__9</td><td>Other</td></tr><tr><td>10</td><td>pat_no_meds_chw_g23__10</td><td>Prefer not to answer</td></tr><tr><td>11</td><td>pat_no_meds_chw_g23__11</td><td>I didn't want to quit smoking/ambivalent /changed my mind</td></tr></table>		1	pat_no_meds_chw_g23__1	I don't need/want to take more medications	2	pat_no_meds_chw_g23__2	Fear of adverse effects,	3	pat_no_meds_chw_g23__3	Family/friends/media recommended not taking it	4	pat_no_meds_chw_g23__4	I took it before and didn't like the effect (their past experiences),	5	pat_no_meds_chw_g23__5	I didn't understand what the Treatment was about	6	pat_no_meds_chw_g23__6	I couldn't afford it	7	pat_no_meds_chw_g23__7	I'd rather go to smoking groups	8	pat_no_meds_chw_g23__8	I forgot	9	pat_no_meds_chw_g23__9	Other	10	pat_no_meds_chw_g23__10	Prefer not to answer	11	pat_no_meds_chw_g23__11	I didn't want to quit smoking/ambivalent /changed my mind
1	pat_no_meds_chw_g23__1	I don't need/want to take more medications																																			
2	pat_no_meds_chw_g23__2	Fear of adverse effects,																																			
3	pat_no_meds_chw_g23__3	Family/friends/media recommended not taking it																																			
4	pat_no_meds_chw_g23__4	I took it before and didn't like the effect (their past experiences),																																			
5	pat_no_meds_chw_g23__5	I didn't understand what the Treatment was about																																			
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7	pat_no_meds_chw_g23__7	I'd rather go to smoking groups																																			
8	pat_no_meds_chw_g23__8	I forgot																																			
9	pat_no_meds_chw_g23__9	Other																																			
10	pat_no_meds_chw_g23__10	Prefer not to answer																																			
11	pat_no_meds_chw_g23__11	I didn't want to quit smoking/ambivalent /changed my mind																																			
1374	other_pat_no_meds_chw_g23 Show the field ONLY if: [pat_no_meds_chw_g23(9)] = '1'	Other	text, Required																																		
1375	pat_recommend_cbt_chw_g23 Show the field ONLY if: [seen_by_pcp_chw_g23] = '3'	Did the PCP recommend attending a smoking group?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>		1	Yes	0	No																													
1	Yes																																				
0	No																																				

1376	pat_cbt_chw_g23 Show the field ONLY if: [pat_recommend_cbt_chw_g23] = '1'	Is participant attending a smoking cessation group?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																							
1	Yes																													
0	No																													
1377	pat_cbt_start_chw_g23 Show the field ONLY if: [pat_cbt_chw_g23] = '1'	Date started	text (date_mdy), Required Field Annotation: @HIDEBUTTON																											
1378	pat_att_cbt_chw_g23 Show the field ONLY if: [pat_cbt_chw_g23] = '1'	Attendance in past month	radio <table><tr><td>1</td><td>1 session</td></tr><tr><td>2</td><td>2 sessions</td></tr><tr><td>3</td><td>3 sessions</td></tr><tr><td>4</td><td>4 sessions</td></tr><tr><td>5</td><td>5 sessions or more</td></tr></table>	1	1 session	2	2 sessions	3	3 sessions	4	4 sessions	5	5 sessions or more																	
1	1 session																													
2	2 sessions																													
3	3 sessions																													
4	4 sessions																													
5	5 sessions or more																													
1379	pat_loc_cbt_chw_g23 Show the field ONLY if: [pat_cbt_chw_g23] = '1'	Group location	notes, Required																											
1380	pat_no_cbt_chw_g23 Show the field ONLY if: [pat_cbt_chw_g23] = '0'	If not attending cessation group, why not	checkbox, Required <table><tr><td>1</td><td>pat_no_cbt_chw_g23__1</td><td>I don't have a ride</td></tr><tr><td>2</td><td>pat_no_cbt_chw_g23__2</td><td>Fear of adverse effects,</td></tr><tr><td>3</td><td>pat_no_cbt_chw_g23__3</td><td>Family/friends/media recommended not going</td></tr><tr><td>4</td><td>pat_no_cbt_chw_g23__4</td><td>I did it before and didn't like it (their past experiences),</td></tr><tr><td>5</td><td>pat_no_cbt_chw_g23__5</td><td>I don't understand what the group is about</td></tr><tr><td>6</td><td>pat_no_cbt_chw_g23__6</td><td>I'd rather quit smoking on my own</td></tr><tr><td>7</td><td>pat_no_cbt_chw_g23__7</td><td>I don't want to quit smoking</td></tr><tr><td>8</td><td>pat_no_cbt_chw_g23__8</td><td>Other</td></tr><tr><td>9</td><td>pat_no_cbt_chw_g23__9</td><td>Prefer not to answer</td></tr></table>	1	pat_no_cbt_chw_g23__1	I don't have a ride	2	pat_no_cbt_chw_g23__2	Fear of adverse effects,	3	pat_no_cbt_chw_g23__3	Family/friends/media recommended not going	4	pat_no_cbt_chw_g23__4	I did it before and didn't like it (their past experiences),	5	pat_no_cbt_chw_g23__5	I don't understand what the group is about	6	pat_no_cbt_chw_g23__6	I'd rather quit smoking on my own	7	pat_no_cbt_chw_g23__7	I don't want to quit smoking	8	pat_no_cbt_chw_g23__8	Other	9	pat_no_cbt_chw_g23__9	Prefer not to answer
1	pat_no_cbt_chw_g23__1	I don't have a ride																												
2	pat_no_cbt_chw_g23__2	Fear of adverse effects,																												
3	pat_no_cbt_chw_g23__3	Family/friends/media recommended not going																												
4	pat_no_cbt_chw_g23__4	I did it before and didn't like it (their past experiences),																												
5	pat_no_cbt_chw_g23__5	I don't understand what the group is about																												
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8	pat_no_cbt_chw_g23__8	Other																												
9	pat_no_cbt_chw_g23__9	Prefer not to answer																												
1381	other_pat_no_cbt_chw_g23 Show the field ONLY if: [pat_no_cbt_chw_g23(8)] = '1'	Other	text, Required																											
1382	notes3_chw_g23	Notes	notes Custom alignment: RH																											

1383	<div>session_prev_goals_chw_g23</div> <div>Show the field ONLY if: [seen_by_pcp_chw_g23] = '1' or [seen_by_pcp_chw_g23] = '2' or [seen_by_pcp_chw_g23] = '3' or [seen_by_pcp_chw_g23] = '4' or [seen_by_pcp_chw_g23] = '5'</div>	<div>Plan from previous session</div> <div>Visit 40: [visit_40_arm_2][session_next_goals_chw_g2] Visit 41: [visit_41_arm_2][session_next_goals_chw_g23] Visit 42: [visit_42_arm_2][session_next_goals_chw_g23] Visit 43: [visit_43_arm_2][session_next_goals_chw_g23] Visit 44: [visit_44_arm_2][session_next_goals_chw_g23] Visit 45: [visit_45_arm_2][session_next_goals_chw_g23] Visit 46: [visit_46_arm_2][session_next_goals_chw_g23] Visit 47: [visit_47_arm_2][session_next_goals_chw_g23] Visit 48: [visit_48_arm_2][session_next_goals_chw_g23] Visit 49: [visit_49_arm_2][session_next_goals_chw_g23] Visit 50: [visit_50_arm_2][session_next_goals_chw_g23] Visit 51: [visit_51_arm_2][session_next_goals_chw_g23] Visit 52: [visit_52_arm_2][session_next_goals_chw_g23] Visit 53: [visit_53_arm_2][session_next_goals_chw_g23] Visit 54: [visit_54_arm_2][session_next_goals_chw_g23] Visit 55: [visit_55_arm_2][session_next_goals_chw_g23] Visit 56: [visit_56_arm_2][session_next_goals_chw_g23] Visit 57: [visit_57_arm_2][session_next_goals_chw_g23] Visit 58: [visit_58_arm_2][session_next_goals_chw_g23] Visit 59: [visit_59_arm_2][session_next_goals_chw_g23]</div>	<div>descriptive</div>						
1384	<div>pat_goals_acc_chw_g23</div> <div>Show the field ONLY if: [seen_by_pcp_chw_g23] = '1' or [seen_by_pcp_chw_g23] = '2' or [seen_by_pcp_chw_g23] = '3' or [seen_by_pcp_chw_g23] = '4' or [seen_by_pcp_chw_g23] = '5'</div>	<div>Plan accomplished?</div>	<div>radio, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>3</td><td>Partially</td></tr></table>	1	Yes	2	No	3	Partially
1	Yes								
2	No								
3	Partially								
1385	<div>pat_goal_prog_chw_g23</div> <div>Show the field ONLY if: [seen_by_pcp_chw_g23] = '1' or [seen_by_pcp_chw_g23] = '2' or [seen_by_pcp_chw_g23] = '3' or [seen_by_pcp_chw_g23] = '4' or [seen_by_pcp_chw_g23] = '5'</div>	<div>Describe progress on plan</div>	<div>notes, Required</div>						
1386	<div>pat_goal_partially_chw_g23</div> <div>Show the field ONLY if: [pat_goals_acc_chw_g23] = '2' or [pat_goals_acc_chw_g23] = '3'</div>	<div>If plan was not completed or was only partially completed, identify what got in the way and how to problem-solve in future</div>	<div>notes, Required</div>						

1387	session_content_chw_g23 Show the field ONLY if: [seen_by_pcp_chw_g23] = '1' or [seen_by_pcp_chw_g23] = '2' or [seen_by_pcp_chw_g23] = '3' or [seen_by_pcp_chw_g23] = '4' or [seen_by_pcp_chw_g23] = '5'	Session Content	checkbox, Required		
			1	session_content_chw_g23__1	Engagement and involvement
			2	session_content_chw_g23__2	Motivational interviewing
			3	session_content_chw_g23__3	Motivational tools
			4	session_content_chw_g23__4	Education topic
			5	session_content_chw_g23__5	Medication compliance
			6	session_content_chw_g23__6	Care coordination
			7	session_content_chw_g23__7	Progress
			8	session_content_chw_g23__8	Other
			9	session_content_chw_g23__9	Quit Line
1388	session_engag_chw_g23 Show the field ONLY if: [session_content_chw_g23(1)] = '1'	1, Engagement and involvement	notes, Required Custom alignment: LH		
1389	pat_mi_chw_g23 Show the field ONLY if: [session_content_chw_g23(2)] = '1'	2. Motivational Interviewing	notes, Required Custom alignment: LH		
1390	session_pros_cons_chw_g23 Show the field ONLY if: [session_content_chw_g23(3)] = '1'	3. Motivational tools: (include benefits and barriers-be specific! Use patient's own words when possible)	checkbox, Required		
			1	session_pros_cons_chw_g23__1	Identifying pros of smoking
			2	session_pros_cons_chw_g23__2	Identifying cons of smoking
			3	session_pros_cons_chw_g23__3	Health benefits from quitting smoking
			4	session_pros_cons_chw_g23__4	Cessation medications
			5	session_pros_cons_chw_g23__5	Promoting smoking groups
			6	session_pros_cons_chw_g23__6	Other
			7	session_pros_cons_chw_g23__7	CO and smoking
			8	session_pros_cons_chw_g23__8	Smoking triggers, pack wraps
			9	session_pros_cons_chw_g23__9	Reasons to quit smoking
			10	session_pros_cons_chw_g23__10	Preparing for the quit day
1391	other_motiv_tools_chw_g23 Show the field ONLY if: [session_pros_cons_chw_g23(6)] = '1'	Other	text, Required		

1392	session_education_chw_g23 Show the field ONLY if: [session_content_chw_g23(4)] = '1'	4. Education Topic (check all that apply)	checkbox, Required <table><tr><td>1</td><td>session_education_chw_g23__1</td><td>Withdrawal symptoms</td></tr><tr><td>2</td><td>session_education_chw_g23__2</td><td>Coping with withdrawal</td></tr><tr><td>3</td><td>session_education_chw_g23__3</td><td>Cessation medication</td></tr><tr><td>4</td><td>session_education_chw_g23__4</td><td>Things to do instead of smoking, the 4Ds</td></tr><tr><td>5</td><td>session_education_chw_g23__5</td><td>Other</td></tr><tr><td>6</td><td>session_education_chw_g23__6</td><td>Dealing with stress</td></tr><tr><td>7</td><td>session_education_chw_g23__7</td><td>Dealing with weight gain</td></tr><tr><td>8</td><td>session_education_chw_g23__8</td><td>Dealing with high risk situations</td></tr><tr><td>9</td><td>session_education_chw_g23__9</td><td>Dealing with slips</td></tr></table>	1	session_education_chw_g23__1	Withdrawal symptoms	2	session_education_chw_g23__2	Coping with withdrawal	3	session_education_chw_g23__3	Cessation medication	4	session_education_chw_g23__4	Things to do instead of smoking, the 4Ds	5	session_education_chw_g23__5	Other	6	session_education_chw_g23__6	Dealing with stress	7	session_education_chw_g23__7	Dealing with weight gain	8	session_education_chw_g23__8	Dealing with high risk situations	9	session_education_chw_g23__9	Dealing with slips
1	session_education_chw_g23__1	Withdrawal symptoms																												
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8	session_education_chw_g23__8	Dealing with high risk situations																												
9	session_education_chw_g23__9	Dealing with slips																												
1393	other_educ_chw_g23 Show the field ONLY if: [session_education_chw_g23(5)] = '1'	Other	text, Required																											
1394	session_check_meds_chw_g23 Show the field ONLY if: [session_content_chw_g23(5)] = '1'	5. Check medication compliance	notes Custom alignment: LH																											
1395	session_care_chw_g23 Show the field ONLY if: [session_content_chw_g23(6)] = '1'	6. Care coordination (check all that apply)	checkbox, Required <table><tr><td>1</td><td>session_care_chw_g23__1</td><td>Scheduling PCP visit</td></tr><tr><td>2</td><td>session_care_chw_g23__2</td><td>Smoking cessation group</td></tr><tr><td>3</td><td>session_care_chw_g23__3</td><td>Other</td></tr><tr><td>4</td><td>session_care_chw_g23__4</td><td>Pharmacy and medications</td></tr></table>	1	session_care_chw_g23__1	Scheduling PCP visit	2	session_care_chw_g23__2	Smoking cessation group	3	session_care_chw_g23__3	Other	4	session_care_chw_g23__4	Pharmacy and medications															
1	session_care_chw_g23__1	Scheduling PCP visit																												
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3	session_care_chw_g23__3	Other																												
4	session_care_chw_g23__4	Pharmacy and medications																												
1396	other_care_chw_g23 Show the field ONLY if: [session_care_chw_g23(3)] = '1'	Other	text, Required																											
1397	session_progress_chw_g23 Show the field ONLY if: [session_content_chw_g23(7)] = '1'	7. Reinforcing progress and identifying what has been helpful in achieving gains (e.g., scheduling PCP visit, smoking cessation group)	notes Custom alignment: LH																											
1398	session_other_chw_g23 Show the field ONLY if: [session_content_chw_g23(8)] = '1'	8. Other	notes Custom alignment: LH																											
1399	session_qline_chw_g24 Show the field ONLY if: [session_content_chw_g23(9)] = '1'	9. QUIT LINE Was QUIT LINE presented/discussed to participant TODAY?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH	1	Yes	0	No																							
1	Yes																													
0	No																													
1400	session_noqline_chw_g24 Show the field ONLY if: [session_qline_chw_g24] = '0'	Why not?	notes, Required Custom alignment: LH																											
1401	session_qlineinterest_chw_g24 Show the field ONLY if: [session_qline_chw_g24] = '1'	Was participant interested?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																							
1	Yes																													
0	No																													
1402	session_qlineatsession_chw_g24 Show the field ONLY if: [session_qline_chw_g24] = '1'	Did the participant call the Quit Line during this session?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																							
1	Yes																													
0	No																													

1403	session_qlineoat ^{session_chw_g24} Show the field ONLY if: [session_qlineat ^{session_chw_g24}] = '0'	Why not?	notes, Required Custom alignment: LH				
1404	session_qlinesched ^{chw_g24} Show the field ONLY if: [session_qlineat ^{session_chw_g24}] = '0'	Was a Quit Line call scheduled?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No
1	Yes						
0	No						
1405	session_qlinenosched ^{chw_g24} Show the field ONLY if: [session_qlinesched ^{chw_g24}] = '0'	Why not?	notes, Required Custom alignment: LH				
1406	session_qlinetime ^{chw_g24} Show the field ONLY if: [session_qlineat ^{session_chw_g24}] = '1'	Date/time Quit Line call	text (datetime_mdy), Required Custom alignment: LH				
1407	session_qline ^{chw} invol ^{g24} Show the field ONLY if: [session_qlineat ^{session_chw_g24}] = '1'	Was the CHW involved in the Quit Line call?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH	1	Yes	0	No
1	Yes						
0	No						
1408	session_qlinecall ^{chw_g24} Show the field ONLY if: [session_qlineat ^{session_chw_g24}] = '1'	Describe session/call	notes, Required Custom alignment: LH				
1409	session_qlinenrt ^{chw_g24} Show the field ONLY if: [session_qlineat ^{session_chw_g24}] = '1'	Did the participant/CHW request NRT? Please explain	notes, Required Custom alignment: LH				
1410	session_qlinenrtuse ^{chw_g24} Show the field ONLY if: [session_qlineat ^{session_chw_g24}] = '1'	Did the participant use the NRT? Please explain	notes, Required Custom alignment: LH				
1411	session_qlineable ^{chw_g24} Show the field ONLY if: [session_qlineat ^{session_chw_g24}] = '1'	Did the quitline staff seem able to work with people with SMI? Please explain	notes, Required Custom alignment: LH				
1412	session_qlinefu ^{chw_g24} Show the field ONLY if: [session_qlineat ^{session_chw_g24}] = '1'	Was a follow up call scheduled? Explain	notes, Required Custom alignment: LH				
1413	session_qlinecom ^{chw_g24}	Quit Line Notes	notes Custom alignment: LH				
1414	session_descript ^{chw_g23}	Brief description of the session	notes, Required Custom alignment: LH				
1415	session_next_goals ^{chw_g23}	Goals for next session	notes, Required Custom alignment: LH				
1416	next_visit_all ^{chw_g23}	Next visit will be	text (datetime_mdy), Required Field Annotation: @HIDEBUTTON				

1417	name_chw_g23	CHW	radio, Required <table border="1"> <tr><td>1</td><td>Alexandra Fortune</td></tr> <tr><td>2</td><td>Ashley Newman</td></tr> <tr><td>3</td><td>Aysha Peralta</td></tr> <tr><td>4</td><td>Erin Hanrahan</td></tr> <tr><td>5</td><td>John Dowd</td></tr> <tr><td>6</td><td>Karlie Marrs</td></tr> <tr><td>7</td><td>Leeza Rojas</td></tr> <tr><td>8</td><td>Madalyn Davis</td></tr> <tr><td>9</td><td>Madeleine Fontaine</td></tr> <tr><td>10</td><td>Megan Donnelly</td></tr> <tr><td>11</td><td>Morgan Boudreau</td></tr> <tr><td>12</td><td>Nina Cherilus</td></tr> <tr><td>13</td><td>Carlos Taveras</td></tr> </table>	1	Alexandra Fortune	2	Ashley Newman	3	Aysha Peralta	4	Erin Hanrahan	5	John Dowd	6	Karlie Marrs	7	Leeza Rojas	8	Madalyn Davis	9	Madeleine Fontaine	10	Megan Donnelly	11	Morgan Boudreau	12	Nina Cherilus	13	Carlos Taveras
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12	Nina Cherilus																												
13	Carlos Taveras																												
1418	contact_sheet_all_visits_chw_41_60_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																				
0	Incomplete																												
1	Unverified																												
2	Complete																												
Instrument: Contact Sheet All Visits CHW 61_80 (contact_sheet_all_visits_chw_61_80)			^ Collapse																										
1419	date_all_visits_chw_g234	Visit Date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																										
1420	start_all_visits_chw_g234	Start time	text (time), Required																										
1421	end_all_visits_chw_g234	End time	text (time), Required																										
1422	visit_modality_chw_g234	Visit modality	radio, Required <table border="1"> <tr><td>1</td><td>Phone visit</td></tr> <tr><td>2</td><td>In person visit</td></tr> </table>	1	Phone visit	2	In person visit																						
1	Phone visit																												
2	In person visit																												
1423	reason_phone_chw_g234 Show the field ONLY if: [visit_modality_chw_g234] = '1'	Reasons for the phone visit (select all that apply)	checkbox, Required <table border="1"> <tr><td>1</td><td>reason_phone_chw_g234__1</td><td>Help preparing for quit day</td></tr> <tr><td>2</td><td>reason_phone_chw_g234__2</td><td>Quit day</td></tr> <tr><td>3</td><td>reason_phone_chw_g234__3</td><td>Check for withdrawal symptoms</td></tr> <tr><td>4</td><td>reason_phone_chw_g234__4</td><td>Medication compliance/side effects</td></tr> <tr><td>5</td><td>reason_phone_chw_g234__5</td><td>Other</td></tr> </table>	1	reason_phone_chw_g234__1	Help preparing for quit day	2	reason_phone_chw_g234__2	Quit day	3	reason_phone_chw_g234__3	Check for withdrawal symptoms	4	reason_phone_chw_g234__4	Medication compliance/side effects	5	reason_phone_chw_g234__5	Other											
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5	reason_phone_chw_g234__5	Other																											
1424	other_reason_phone_chw_g234 Show the field ONLY if: [reason_phone_chw_g234(5)] = '1'	Other reason for a phone visit	text, Required																										
1425	reasons_contact_chw_g234 Show the field ONLY if: [visit_modality_chw_g234] = '2'	Reasons for In Person meeting (select all that apply)	checkbox, Required <table border="1"> <tr><td>1</td><td>reasons_contact_chw_g234__1</td><td>Initial visit/obtain consent</td></tr> <tr><td>2</td><td>reasons_contact_chw_g234__2</td><td>Intervention visit</td></tr> <tr><td>3</td><td>reasons_contact_chw_g234__3</td><td>Taking participant to smoking group</td></tr> <tr><td>4</td><td>reasons_contact_chw_g234__4</td><td>Taking participant to PCP</td></tr> <tr><td>5</td><td>reasons_contact_chw_g234__5</td><td>Other</td></tr> <tr><td>6</td><td>reasons_contact_chw_g234__6</td><td>Medication compliance/side effects</td></tr> </table>	1	reasons_contact_chw_g234__1	Initial visit/obtain consent	2	reasons_contact_chw_g234__2	Intervention visit	3	reasons_contact_chw_g234__3	Taking participant to smoking group	4	reasons_contact_chw_g234__4	Taking participant to PCP	5	reasons_contact_chw_g234__5	Other	6	reasons_contact_chw_g234__6	Medication compliance/side effects								
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6	reasons_contact_chw_g234__6	Medication compliance/side effects																											
1426	other_reason_contact_chw_g234 Show the field ONLY if: [reasons_contact_chw_g234(5)] = '1'	Other reason for an In Person Meeting	text, Required																										

1427	smoking_chw_g234	Section Header: <i>Smoking Behavior</i> Has the participant smoked in the past 7 days?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
1428	notes1_chw_g234	Notes	notes Custom alignment: RH																		
1429	tobacco_prod_chw_g234	Which tobacco products does the participant currently smoke? (I.e. Cigarettes, Cigars, Cigarillos, Rollicies, Mini Cigars, Pipe) Select all that apply	checkbox <table border="1"> <tr><td>1</td><td>tobacco_prod_chw_g234__1</td><td>Cigarettes</td></tr> <tr><td>2</td><td>tobacco_prod_chw_g234__2</td><td>Mini cigars (i.e. double diamonds)</td></tr> <tr><td>3</td><td>tobacco_prod_chw_g234__3</td><td>loose tobacco (roll your own, rollicies)</td></tr> <tr><td>4</td><td>tobacco_prod_chw_g234__4</td><td>e-cigarettes/vaping</td></tr> <tr><td>5</td><td>tobacco_prod_chw_g234__5</td><td>Other</td></tr> <tr><td>6</td><td>tobacco_prod_chw_g234__6</td><td>Quit smoking</td></tr> </table>	1	tobacco_prod_chw_g234__1	Cigarettes	2	tobacco_prod_chw_g234__2	Mini cigars (i.e. double diamonds)	3	tobacco_prod_chw_g234__3	loose tobacco (roll your own, rollicies)	4	tobacco_prod_chw_g234__4	e-cigarettes/vaping	5	tobacco_prod_chw_g234__5	Other	6	tobacco_prod_chw_g234__6	Quit smoking
1	tobacco_prod_chw_g234__1	Cigarettes																			
2	tobacco_prod_chw_g234__2	Mini cigars (i.e. double diamonds)																			
3	tobacco_prod_chw_g234__3	loose tobacco (roll your own, rollicies)																			
4	tobacco_prod_chw_g234__4	e-cigarettes/vaping																			
5	tobacco_prod_chw_g234__5	Other																			
6	tobacco_prod_chw_g234__6	Quit smoking																			
1430	cpd_chw_g234 Show the field ONLY if: [smoking_chw_g234] = '1'	On average, how many cigarettes (or other tobacco product) per day has the participant smoked in past 7 days?	text (integer), Required																		
1431	cpd_non_daily_chw_g234	COMPLETE ONLY IF PARTICIPANT HASN'T BEEN SMOKING EVERY DAY DURING THE PAST WEEK On average, how many cigarettes (or other tobacco product) per WEEK has the participant smoked in past week?	text																		
1432	last_cigarette_chw_g234 Show the field ONLY if: [smoking_chw_g234] = '1' or [smoking_chw_g234] = '0'	Time of last cigarette (or other tobacco product)	text (datetime_mdy), Required Custom alignment: RH Field Annotation: @HIDEBUTTON																		
1433	pat_co_done_chw_g234 Show the field ONLY if: [visit_modality_chw_g234] = '2'	Section Header: <i>Previous CO measure: Visit 61: [visit_61_arm_2][expired_co_chw_g234][time_co_chw_g234] Visit 62: [visit_62_arm_2][expired_co_chw_g234][time_co_chw_g234] Visit 63: [visit_63_arm_2][expired_co_chw_g234][time_co_chw_g234] Visit 64: [visit_64_arm_2][expired_co_chw_g234][time_co_chw_g234] Visit 65: [visit_65_arm_2][expired_co_chw_g234][time_co_chw_g234] Visit 66: [visit_66_arm_2][expired_co_chw_g234][time_co_chw_g234] Visit 67: [visit_67_arm_2][expired_co_chw_g234][time_co_chw_g234] Visit 68: [visit_68_arm_2][expired_co_chw_g234][time_co_chw_g234] Visit 69: [visit_69_arm_2][expired_co_chw_g234][time_co_chw_g234] Visit 70: [visit_70_arm_2][expired_co_chw_g234][time_co_chw_g234] Visit 71: [visit_71_arm_2][expired_co_chw_g234][time_co_chw_g234] Visit 72: [visit_72_arm_2][expired_co_chw_g234][time_co_chw_g234] Visit 73: [visit_73_arm_2][expired_co_chw_g234][time_co_chw_g234] Visit 74: [visit_74_arm_2][expired_co_chw_g234][time_co_chw_g234] Visit 75: [visit_75_arm_2][expired_co_chw_g234][time_co_chw_g234] Visit 76: [visit_76_arm_2][expired_co_chw_g234][time_co_chw_g234] Visit 77: [visit_77_arm_2][expired_co_chw_g234][time_co_chw_g234] Visit 78: [visit_78_arm_2][expired_co_chw_g234][time_co_chw_g234] Visit 79: [visit_79_arm_2][expired_co_chw_g234][time_co_chw_g234]</i> Was CO testing completed today?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
1434	pat_yes_co_chw_g234 Show the field ONLY if: [pat_co_done_chw_g234] = '1'	Reasons for CO measurement	checkbox, Required <table border="1"> <tr><td>1</td><td>pat_yes_co_chw_g234__1</td><td>Last CO month was done over a month ago</td></tr> <tr><td>2</td><td>pat_yes_co_chw_g234__2</td><td>Participant changed smoking behavior after last CO measurement (quit or relapsed)</td></tr> <tr><td>3</td><td>pat_yes_co_chw_g234__3</td><td>Participant asked for it</td></tr> <tr><td>4</td><td>pat_yes_co_chw_g234__4</td><td>Other</td></tr> </table>	1	pat_yes_co_chw_g234__1	Last CO month was done over a month ago	2	pat_yes_co_chw_g234__2	Participant changed smoking behavior after last CO measurement (quit or relapsed)	3	pat_yes_co_chw_g234__3	Participant asked for it	4	pat_yes_co_chw_g234__4	Other						
1	pat_yes_co_chw_g234__1	Last CO month was done over a month ago																			
2	pat_yes_co_chw_g234__2	Participant changed smoking behavior after last CO measurement (quit or relapsed)																			
3	pat_yes_co_chw_g234__3	Participant asked for it																			
4	pat_yes_co_chw_g234__4	Other																			
1435	pat_other_co_chw_g234 Show the field ONLY if: [pat_yes_co_chw_g234(4)] = '1'	Other	text, Required																		
1436	expired_co_chw_g234 Show the field ONLY if: [pat_co_done_chw_g234] = '1'	Expired CO reading (ppm)	text (integer, Min: 0, Max: 100), Required																		
1437	time_co_chw_g234 Show the field ONLY if: [pat_co_done_chw_g234] = '1'	Date of CO reading	text (date_mdy), Required Field Annotation: @HIDEBUTTON																		
1438	hour_co_chw_g234 Show the field ONLY if: [pat_co_done_chw_g234] = '1'	Time of CO reading	text (time), Required																		

1439	co_monitor_chw_g234 Show the field ONLY if: [pat_co_done_chw_g234] = '1'	CO Monitor ID	radio, Required <table><tr><td>1</td><td>A</td></tr><tr><td>2</td><td>B</td></tr><tr><td>3</td><td>C</td></tr><tr><td>4</td><td>D</td></tr><tr><td>5</td><td>E</td></tr><tr><td>6</td><td>F</td></tr><tr><td>7</td><td>G</td></tr><tr><td>8</td><td>H</td></tr><tr><td>9</td><td>I</td></tr><tr><td>10</td><td>J</td></tr><tr><td>11</td><td>K</td></tr><tr><td>12</td><td>L</td></tr><tr><td>13</td><td>M</td></tr><tr><td>14</td><td>N</td></tr><tr><td>15</td><td>O</td></tr><tr><td>16</td><td>P</td></tr></table> Custom alignment: RH	1	A	2	B	3	C	4	D	5	E	6	F	7	G	8	H	9	I	10	J	11	K	12	L	13	M	14	N	15	O	16	P
1	A																																		
2	B																																		
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12	L																																		
13	M																																		
14	N																																		
15	O																																		
16	P																																		
1440	co_exec_chw_g234 Show the field ONLY if: [pat_co_done_chw_g234] = '1'	Was CO measuring executed properly?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																												
1	Yes																																		
0	No																																		
1441	pat_no_co_chw_g234 Show the field ONLY if: [pat_co_done_chw_g234] = '0'	Reasons for NO CO measurement	checkbox, Required <table><tr><td>1</td><td>pat_no_co_chw_g234__1</td><td>CO was done within the past month and there was no change in smoking behavior</td></tr><tr><td>2</td><td>pat_no_co_chw_g234__2</td><td>Participant refused</td></tr><tr><td>3</td><td>pat_no_co_chw_g234__3</td><td>Participant unable (respiratory illness, symptomatic)</td></tr><tr><td>4</td><td>pat_no_co_chw_g234__4</td><td>Other</td></tr></table>	1	pat_no_co_chw_g234__1	CO was done within the past month and there was no change in smoking behavior	2	pat_no_co_chw_g234__2	Participant refused	3	pat_no_co_chw_g234__3	Participant unable (respiratory illness, symptomatic)	4	pat_no_co_chw_g234__4	Other																				
1	pat_no_co_chw_g234__1	CO was done within the past month and there was no change in smoking behavior																																	
2	pat_no_co_chw_g234__2	Participant refused																																	
3	pat_no_co_chw_g234__3	Participant unable (respiratory illness, symptomatic)																																	
4	pat_no_co_chw_g234__4	Other																																	
1442	other_no_co_chw_g234 Show the field ONLY if: [pat_no_co_chw_g234(4)] = '1'	Other	text, Required																																
1443	notes_co_chw_g234	Notes	notes Custom alignment: RH																																
1444	seen_by_pcp_chw_g234 Show the field ONLY if: [visit_modality_chw_g234] = '2'	Was subject seen by primary care team since last meeting?	radio, Required <table><tr><td>1</td><td>None scheduled</td></tr><tr><td>2</td><td>No, missed visit</td></tr><tr><td>3</td><td>Yes, smoking discussed</td></tr><tr><td>4</td><td>Yes, smoking not discussed</td></tr><tr><td>5</td><td>Unknown</td></tr></table>	1	None scheduled	2	No, missed visit	3	Yes, smoking discussed	4	Yes, smoking not discussed	5	Unknown																						
1	None scheduled																																		
2	No, missed visit																																		
3	Yes, smoking discussed																																		
4	Yes, smoking not discussed																																		
5	Unknown																																		
1445	pcp_recommend_pat_chw_g234 Show the field ONLY if: [seen_by_pcp_chw_g234] = '3'	Did the PCP recommend that the participant quit smoking?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																												
1	Yes																																		
0	No																																		
1446	pcp_prescribed_pat_chw_g234 Show the field ONLY if: [seen_by_pcp_chw_g234] = '3'	Did PCP prescribe smoking cessation medication?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																												
1	Yes																																		
0	No																																		

1447	pat_what_prescribed_chw_g234 Show the field ONLY if: [pcp_prescribed_pat_chw_g234] = '1' or [reason_phone_chw_g234(4)] = '1'	What did the PCP prescribe?	checkbox, Required <table border="1"> <tr> <td>1</td> <td>pat_what_prescribed_chw_g234__1</td> <td>Varenicline (i.e. Chantix)</td> </tr> <tr> <td>2</td> <td>pat_what_prescribed_chw_g234__2</td> <td>Nicotine patch</td> </tr> <tr> <td>3</td> <td>pat_what_prescribed_chw_g234__3</td> <td>Bupropion (i.e. Wellbutrin, Zyban)</td> </tr> <tr> <td>4</td> <td>pat_what_prescribed_chw_g234__4</td> <td>Nicotine gum</td> </tr> <tr> <td>5</td> <td>pat_what_prescribed_chw_g234__5</td> <td>Nicotine lozenge</td> </tr> <tr> <td>6</td> <td>pat_what_prescribed_chw_g234__6</td> <td>Other</td> </tr> </table>	1	pat_what_prescribed_chw_g234__1	Varenicline (i.e. Chantix)	2	pat_what_prescribed_chw_g234__2	Nicotine patch	3	pat_what_prescribed_chw_g234__3	Bupropion (i.e. Wellbutrin, Zyban)	4	pat_what_prescribed_chw_g234__4	Nicotine gum	5	pat_what_prescribed_chw_g234__5	Nicotine lozenge	6	pat_what_prescribed_chw_g234__6	Other
1	pat_what_prescribed_chw_g234__1	Varenicline (i.e. Chantix)																			
2	pat_what_prescribed_chw_g234__2	Nicotine patch																			
3	pat_what_prescribed_chw_g234__3	Bupropion (i.e. Wellbutrin, Zyban)																			
4	pat_what_prescribed_chw_g234__4	Nicotine gum																			
5	pat_what_prescribed_chw_g234__5	Nicotine lozenge																			
6	pat_what_prescribed_chw_g234__6	Other																			
1448	other_prescribed_chw_g234 Show the field ONLY if: [pat_what_prescribed_chw_g234(6)] = '1'	Other	text, Required																		
1449	pat_filled_med_chw_g234 Show the field ONLY if: [pcp_prescribed_pat_chw_g234] = '1' or [reason_phone_chw_g234(4)] = '1'	Did the participant fill the prescription for the smoking cessation medication?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
1450	pat_what_taking_chw_g234 Show the field ONLY if: [pcp_prescribed_pat_chw_g234] = '1' or [reason_phone_chw_g234(4)] = '1' or [reasons_contact_chw_g234(6)] = '1'	What is the participant taking?	checkbox, Required <table border="1"> <tr> <td>1</td> <td>pat_what_taking_chw_g234__1</td> <td>Varenicline (i.e. Chantix)</td> </tr> <tr> <td>2</td> <td>pat_what_taking_chw_g234__2</td> <td>Nicotine patch</td> </tr> <tr> <td>3</td> <td>pat_what_taking_chw_g234__3</td> <td>Bupropion (i.e. Wellbutrin, Zyban)</td> </tr> <tr> <td>4</td> <td>pat_what_taking_chw_g234__4</td> <td>Nicotine gum</td> </tr> <tr> <td>5</td> <td>pat_what_taking_chw_g234__5</td> <td>Nicotine lozenge</td> </tr> <tr> <td>6</td> <td>pat_what_taking_chw_g234__6</td> <td>Other</td> </tr> </table>	1	pat_what_taking_chw_g234__1	Varenicline (i.e. Chantix)	2	pat_what_taking_chw_g234__2	Nicotine patch	3	pat_what_taking_chw_g234__3	Bupropion (i.e. Wellbutrin, Zyban)	4	pat_what_taking_chw_g234__4	Nicotine gum	5	pat_what_taking_chw_g234__5	Nicotine lozenge	6	pat_what_taking_chw_g234__6	Other
1	pat_what_taking_chw_g234__1	Varenicline (i.e. Chantix)																			
2	pat_what_taking_chw_g234__2	Nicotine patch																			
3	pat_what_taking_chw_g234__3	Bupropion (i.e. Wellbutrin, Zyban)																			
4	pat_what_taking_chw_g234__4	Nicotine gum																			
5	pat_what_taking_chw_g234__5	Nicotine lozenge																			
6	pat_what_taking_chw_g234__6	Other																			
1451	pat_other_med_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(6)] = '1'	Other	text, Required																		
1452	pat_var_dose_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(1)] = '1'	Varenicline (Chantix) Dose	radio, Required <table border="1"> <tr> <td>1</td> <td>0.5 mg once a day</td> </tr> <tr> <td>2</td> <td>0.5 mg twice a day</td> </tr> <tr> <td>3</td> <td>1 mg once a day</td> </tr> <tr> <td>4</td> <td>1 mg twice a day</td> </tr> <tr> <td>5</td> <td>Other</td> </tr> </table>	1	0.5 mg once a day	2	0.5 mg twice a day	3	1 mg once a day	4	1 mg twice a day	5	Other								
1	0.5 mg once a day																				
2	0.5 mg twice a day																				
3	1 mg once a day																				
4	1 mg twice a day																				
5	Other																				
1453	pat_var_other_dose_chw_g234 Show the field ONLY if: [pat_var_dose_chw_g234] = '5'	Other Dose	text, Required																		
1454	pat_var_start_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(1)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																		
1455	pat_7days_var_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(1)] = '1'	Days used as prescribed in past 7 days	radio, Required <table border="1"> <tr> <td>1</td> <td>1</td> </tr> <tr> <td>2</td> <td>2</td> </tr> <tr> <td>3</td> <td>3</td> </tr> <tr> <td>4</td> <td>4</td> </tr> <tr> <td>5</td> <td>5</td> </tr> <tr> <td>6</td> <td>6</td> </tr> <tr> <td>7</td> <td>7</td> </tr> </table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7				
1	1																				
2	2																				
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5	5																				
6	6																				
7	7																				
1456	var_still_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(1)] = '1'	Is participant still taking Varenicline?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				

1457	pat_var_end_chw_g234 Show the field ONLY if: [var_still_chw_g234] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1458	pat_bup_dose_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(3)] = '1'	Bupropion (Wellbutrin, Zyban) dose	radio, Required <table><tr><td>1</td><td>150 mg once a day</td></tr><tr><td>2</td><td>150 mg twice a day</td></tr><tr><td>3</td><td>Other</td></tr></table>	1	150 mg once a day	2	150 mg twice a day	3	Other								
1	150 mg once a day																
2	150 mg twice a day																
3	Other																
1459	pat_bup_other_dose_chw_g234 Show the field ONLY if: [pat_bup_dose_chw_g234] = '3'	Other Dose	text, Required														
1460	pat_bup_start_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(3)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1461	pat_7days_bup_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(3)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
3	3																
4	4																
5	5																
6	6																
7	7																
1462	bup_still_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(3)] = '1'	Is participant still taking Bupropion?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1463	pat_bup_end_chw_g234 Show the field ONLY if: [bup_still_chw_g234] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1464	pat_patch_dose_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(2)] = '1'	Nicotine patch dose	radio, Required <table><tr><td>1</td><td>21 mg</td></tr><tr><td>2</td><td>14 mg</td></tr><tr><td>3</td><td>7 mg</td></tr><tr><td>4</td><td>Other</td></tr></table>	1	21 mg	2	14 mg	3	7 mg	4	Other						
1	21 mg																
2	14 mg																
3	7 mg																
4	Other																
1465	pat_patch_other_dose_chw_g234 Show the field ONLY if: [pat_patch_dose_chw_g234] = '4'	Other Dose	text, Required														
1466	pat_patch_start_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(2)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1467	pat_7days_patch_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(2)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
3	3																
4	4																
5	5																
6	6																
7	7																
1468	patch_still_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(2)] = '1'	Is participant still using the patch?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1469	pat_patch_end_chw_g234 Show the field ONLY if: [patch_still_chw_g234] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														

1470	pat_gum_dose_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(4)] = '1'	Nicotine gum	radio, Required <table><tr><td>1</td><td>4-6 mg per day</td></tr><tr><td>2</td><td>8-10 mg per day</td></tr><tr><td>3</td><td>12-14 mg per day</td></tr><tr><td>4</td><td>16-18 mg per day</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	4-6 mg per day	2	8-10 mg per day	3	12-14 mg per day	4	16-18 mg per day	5	Other				
1	4-6 mg per day																
2	8-10 mg per day																
3	12-14 mg per day																
4	16-18 mg per day																
5	Other																
1471	pat_gum_other_dose_chw_g234 Show the field ONLY if: [pat_gum_dose_chw_g234] = '5'	Other Dose	text, Required														
1472	pat_gum_start_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(4)] = '1'	Start date	text (date_mdy), Required														
1473	pat_7days_gum_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(4)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
3	3																
4	4																
5	5																
6	6																
7	7																
1474	gum_still_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(4)] = '1'	Is participant still using the gum?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1475	pat_gum_end_chw_g234 Show the field ONLY if: [gum_still_chw_g234] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1476	pat_loz_dose_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(5)] = '1'	Nicotine lozenges	radio, Required <table><tr><td>1</td><td>4-6 mg per day</td></tr><tr><td>2</td><td>8-10 mg per day</td></tr><tr><td>3</td><td>12-14 mg per day</td></tr><tr><td>4</td><td>16-18 mg per day</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	4-6 mg per day	2	8-10 mg per day	3	12-14 mg per day	4	16-18 mg per day	5	Other				
1	4-6 mg per day																
2	8-10 mg per day																
3	12-14 mg per day																
4	16-18 mg per day																
5	Other																
1477	pat_loz_other_dose_chw_g234 Show the field ONLY if: [pat_loz_dose_chw_g234] = '5'	Other Dose	text, Required														
1478	pat_loz_start_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(5)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1479	pat_7days_loz_chw_g234 Show the field ONLY if: [pat_what_taking_chw_g234(5)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
3	3																
4	4																
5	5																
6	6																
7	7																
1480	gum_still_chw_2_g234 Show the field ONLY if: [pat_what_taking_chw_g234(5)] = '1'	Is participant still using the lozenges?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1481	pat_loz_end_chw_g234 Show the field ONLY if: [gum_still_chw_2_g234] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														

1482	pat_no_meds_chw_g234 Show the field ONLY if: [pat_filled_med_chw_g234] = '0'	if not taking smoking cessation medication, why not	checkbox, Required <table><tr><td>1</td><td>pat_no_meds_chw_g234__1</td><td>I don't need/want to take more medications</td></tr><tr><td>2</td><td>pat_no_meds_chw_g234__2</td><td>Fear of adverse effects,</td></tr><tr><td>3</td><td>pat_no_meds_chw_g234__3</td><td>Family/friends/media recommended not taking it</td></tr><tr><td>4</td><td>pat_no_meds_chw_g234__4</td><td>I took it before and didn't like the effect (their past experiences),</td></tr><tr><td>5</td><td>pat_no_meds_chw_g234__5</td><td>I didn't understand what the Treatment was about</td></tr><tr><td>6</td><td>pat_no_meds_chw_g234__6</td><td>I couldn't afford it</td></tr><tr><td>7</td><td>pat_no_meds_chw_g234__7</td><td>I'd rather go to smoking groups</td></tr><tr><td>8</td><td>pat_no_meds_chw_g234__8</td><td>I forgot</td></tr><tr><td>9</td><td>pat_no_meds_chw_g234__9</td><td>Other</td></tr><tr><td>10</td><td>pat_no_meds_chw_g234__10</td><td>Prefer not to answer</td></tr><tr><td>11</td><td>pat_no_meds_chw_g234__11</td><td>I didn't want to quit smoking/ambivalent /changed my mind</td></tr></table>	1	pat_no_meds_chw_g234__1	I don't need/want to take more medications	2	pat_no_meds_chw_g234__2	Fear of adverse effects,	3	pat_no_meds_chw_g234__3	Family/friends/media recommended not taking it	4	pat_no_meds_chw_g234__4	I took it before and didn't like the effect (their past experiences),	5	pat_no_meds_chw_g234__5	I didn't understand what the Treatment was about	6	pat_no_meds_chw_g234__6	I couldn't afford it	7	pat_no_meds_chw_g234__7	I'd rather go to smoking groups	8	pat_no_meds_chw_g234__8	I forgot	9	pat_no_meds_chw_g234__9	Other	10	pat_no_meds_chw_g234__10	Prefer not to answer	11	pat_no_meds_chw_g234__11	I didn't want to quit smoking/ambivalent /changed my mind
1	pat_no_meds_chw_g234__1	I don't need/want to take more medications																																		
2	pat_no_meds_chw_g234__2	Fear of adverse effects,																																		
3	pat_no_meds_chw_g234__3	Family/friends/media recommended not taking it																																		
4	pat_no_meds_chw_g234__4	I took it before and didn't like the effect (their past experiences),																																		
5	pat_no_meds_chw_g234__5	I didn't understand what the Treatment was about																																		
6	pat_no_meds_chw_g234__6	I couldn't afford it																																		
7	pat_no_meds_chw_g234__7	I'd rather go to smoking groups																																		
8	pat_no_meds_chw_g234__8	I forgot																																		
9	pat_no_meds_chw_g234__9	Other																																		
10	pat_no_meds_chw_g234__10	Prefer not to answer																																		
11	pat_no_meds_chw_g234__11	I didn't want to quit smoking/ambivalent /changed my mind																																		
1483	other_pat_no_meds_chw_g234 Show the field ONLY if: [pat_no_meds_chw_g234(9)] = '1'	Other	text, Required																																	
1484	pat_recommend_cbt_chw_g234 Show the field ONLY if: [seen_by_pcp_chw_g234] = '3'	Did the PCP recommend attending a smoking group?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																													
1	Yes																																			
0	No																																			
1485	pat_cbt_chw_g234 Show the field ONLY if: [pat_recommend_cbt_chw_g234] = '1'	Is participant attending a smoking cessation group?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																													
1	Yes																																			
0	No																																			
1486	pat_cbt_start_chw_g234 Show the field ONLY if: [pat_cbt_chw_g234] = '1'	Date started	text (date_mdy), Required Field Annotation: @HIDEBUTTON																																	
1487	pat_att_cbt_chw_g234 Show the field ONLY if: [pat_cbt_chw_g234] = '1'	Attendance in past month	radio <table><tr><td>1</td><td>1 session</td></tr><tr><td>2</td><td>2 sessions</td></tr><tr><td>3</td><td>3 sessions</td></tr><tr><td>4</td><td>4 sessions</td></tr><tr><td>5</td><td>5 sessions or more</td></tr></table>	1	1 session	2	2 sessions	3	3 sessions	4	4 sessions	5	5 sessions or more																							
1	1 session																																			
2	2 sessions																																			
3	3 sessions																																			
4	4 sessions																																			
5	5 sessions or more																																			
1488	pat_loc_cbt_chw_g234 Show the field ONLY if: [pat_cbt_chw_g234] = '1'	Group location	notes, Required																																	

1489	pat_no_cbt_chw_g234 Show the field ONLY if: [pat_cbt_chw_g234] = '0'	If not attending cessation group, why not	checkbox, Required							
			1	pat_no_cbt_chw_g234__1 I don't have a ride						
			2	pat_no_cbt_chw_g234__2 Fear of adverse effects,						
			3	pat_no_cbt_chw_g234__3 Family/friends/media recommended not going						
			4	pat_no_cbt_chw_g234__4 I did it before and didn't like it (their past experiences),						
			5	pat_no_cbt_chw_g234__5 I don't understand what the group is about						
			6	pat_no_cbt_chw_g234__6 I'd rather quit smoking on my own						
			7	pat_no_cbt_chw_g234__7 I don't want to quit smoking						
			8	pat_no_cbt_chw_g234__8 Other						
9	pat_no_cbt_chw_g234__9 Prefer not to answer									
1490	other_pat_no_cbt_chw_g234 Show the field ONLY if: [pat_no_cbt_chw_g234(8)] = '1'	Other	text, Required							
1491	notes3_chw_g234	Notes	notes Custom alignment: RH							
1492	session_prev_goals_chw_g234 Show the field ONLY if: [seen_by_pcp_chw_g234] = '1' or [seen_by_pcp_chw_g234] = '2' or [seen_by_pcp_chw_g234] = '3' or [seen_by_pcp_chw_g234] = '4' or [seen_by_pcp_chw_g234] = '5'	Plan from previous session Visit 60: [visit_60_arm_2][session_next_goals_chw_g234] Visit 61: [visit_61_arm_2][session_next_goals_chw_g234] Visit 62: [visit_62_arm_2][session_next_goals_chw_g234] Visit 63: [visit_63_arm_2][session_next_goals_chw_g234] Visit 64: [visit_64_arm_2][session_next_goals_chw_g234] Visit 65: [visit_65_arm_2][session_next_goals_chw_g234] Visit 66: [visit_66_arm_2][session_next_goals_chw_g234] Visit 67: [visit_67_arm_2][session_next_goals_chw_g234] Visit 68: [visit_68_arm_2][session_next_goals_chw_g234] Visit 69: [visit_69_arm_2][session_next_goals_chw_g234] Visit 70: [visit_70_arm_2][session_next_goals_chw_g234] Visit 71: [visit_71_arm_2][session_next_goals_chw_g234] Visit 72: [visit_72_arm_2][session_next_goals_chw_g234] Visit 73: [visit_73_arm_2][session_next_goals_chw_g234] Visit 74: [visit_74_arm_2][session_next_goals_chw_g234] Visit 75: [visit_75_arm_2][session_next_goals_chw_g234] Visit 76: [visit_76_arm_2][session_next_goals_chw_g234] Visit 77: [visit_77_arm_2][session_next_goals_chw_g234] Visit 78: [visit_78_arm_2][session_next_goals_chw_g234] Visit 79: [visit_79_arm_2][session_next_goals_chw_g234]	descriptive							
1493	pat_goals_acc_chw_g234 Show the field ONLY if: [seen_by_pcp_chw_g234] = '1' or [seen_by_pcp_chw_g234] = '2' or [seen_by_pcp_chw_g234] = '3' or [seen_by_pcp_chw_g234] = '4' or [seen_by_pcp_chw_g234] = '5'	Plan accomplished?	radio, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>3</td><td>Partially</td></tr></table>		1	Yes	2	No	3	Partially
1	Yes									
2	No									
3	Partially									

1494	pat_goal_prog_chw_g234 Show the field ONLY if: [seen_by_pcp_chw_g234] = '1' or [seen_by_pcp_chw_g234] = '2' or [seen_by_pcp_chw_g234] = '3' or [seen_by_pcp_chw_g234] = '4' or [seen_by_pcp_chw_g234] = '5'	Describe progress on plan	notes, Required		
1495	pat_goal_partially_chw_g234 Show the field ONLY if: [pat_goals_acc_chw_g234] = '2' or [pat_goals_acc_chw_g234] = '3'	If plan was not completed or was only partially completed, identify what got in the way and how to problem-solve in future	notes, Required		
1496	session_content_chw_g234 Show the field ONLY if: [seen_by_pcp_chw_g234] = '1' or [seen_by_pcp_chw_g234] = '2' or [seen_by_pcp_chw_g234] = '3' or [seen_by_pcp_chw_g234] = '4' or [seen_by_pcp_chw_g234] = '5'	Session Content	checkbox, Required		
			1	session_content_chw_g234__1	Engagement and involvement
			2	session_content_chw_g234__2	Motivational interviewing
			3	session_content_chw_g234__3	Motivational tools
			4	session_content_chw_g234__4	Education topic
			5	session_content_chw_g234__5	Medication compliance
			6	session_content_chw_g234__6	Care coordination
			7	session_content_chw_g234__7	Progress
			8	session_content_chw_g234__8	Other
			9	session_content_chw_g234__9	Quit Line
1497	session_engag_chw_g234 Show the field ONLY if: [session_content_chw_g234(1)] = '1'	1, Engagement and involvement	notes, Required Custom alignment: LH		
1498	pat_mi_chw_g234 Show the field ONLY if: [session_content_chw_g234(2)] = '1'	2, Motivational Interviewing	notes, Required Custom alignment: LH		
1499	session_pros_cons_chw_g234 Show the field ONLY if: [session_content_chw_g234(3)] = '1'	3, Motivational tools: (include benefits and barriers-be specific! Use patient's own words when possible)	checkbox, Required		
			1	session_pros_cons_chw_g234__1	Identifying pros of smoking
			2	session_pros_cons_chw_g234__2	Identifying cons of smoking
			3	session_pros_cons_chw_g234__3	Health benefits from quitting smoking
			4	session_pros_cons_chw_g234__4	Cessation medications
			5	session_pros_cons_chw_g234__5	Promoting smoking groups
			6	session_pros_cons_chw_g234__6	Other
			7	session_pros_cons_chw_g234__7	CO and smoking
			8	session_pros_cons_chw_g234__8	Smoking triggers, pack wraps
			9	session_pros_cons_chw_g234__9	Reasons to quit smoking
			10	session_pros_cons_chw_g234__10	Preparing for the quit day
1500	other_motiv_tools_chw_g234 Show the field ONLY if: [session_pros_cons_chw_g234(6)] = '1'	Other	text, Required		

1501	session_education_chw_g234 Show the field ONLY if: [session_content_chw_g234(4)] = '1'	4. Education Topic (check all that apply)	checkbox, Required <table><tr><td>1</td><td>session_education_chw_g234__1</td><td>Withdrawal symptoms</td></tr><tr><td>2</td><td>session_education_chw_g234__2</td><td>Coping with withdrawal</td></tr><tr><td>3</td><td>session_education_chw_g234__3</td><td>Cessation medication</td></tr><tr><td>4</td><td>session_education_chw_g234__4</td><td>Things to do instead of smoking, the 4Ds</td></tr><tr><td>5</td><td>session_education_chw_g234__5</td><td>Other</td></tr><tr><td>6</td><td>session_education_chw_g234__6</td><td>Dealing with stress</td></tr><tr><td>7</td><td>session_education_chw_g234__7</td><td>Dealing with weight gain</td></tr><tr><td>8</td><td>session_education_chw_g234__8</td><td>Dealing with high risk situations</td></tr><tr><td>9</td><td>session_education_chw_g234__9</td><td>Dealing with slips</td></tr></table>		1	session_education_chw_g234__1	Withdrawal symptoms	2	session_education_chw_g234__2	Coping with withdrawal	3	session_education_chw_g234__3	Cessation medication	4	session_education_chw_g234__4	Things to do instead of smoking, the 4Ds	5	session_education_chw_g234__5	Other	6	session_education_chw_g234__6	Dealing with stress	7	session_education_chw_g234__7	Dealing with weight gain	8	session_education_chw_g234__8	Dealing with high risk situations	9	session_education_chw_g234__9	Dealing with slips
1	session_education_chw_g234__1	Withdrawal symptoms																													
2	session_education_chw_g234__2	Coping with withdrawal																													
3	session_education_chw_g234__3	Cessation medication																													
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8	session_education_chw_g234__8	Dealing with high risk situations																													
9	session_education_chw_g234__9	Dealing with slips																													
1502	other_educ_chw_g234 Show the field ONLY if: [session_education_chw_g234(5)] = '1'	Other	text, Required																												
1503	session_check_meds_chw_g234 Show the field ONLY if: [session_content_chw_g234(5)] = '1'	5. Check medication compliance	notes Custom alignment: LH																												
1504	session_care_chw_g234 Show the field ONLY if: [session_content_chw_g234(6)] = '1'	6. Care coordination (check all that apply)	checkbox, Required <table><tr><td>1</td><td>session_care_chw_g234__1</td><td>Scheduling PCP visit</td></tr><tr><td>2</td><td>session_care_chw_g234__2</td><td>Smoking cessation group</td></tr><tr><td>3</td><td>session_care_chw_g234__3</td><td>Other</td></tr><tr><td>4</td><td>session_care_chw_g234__4</td><td>Pharmacy and medications</td></tr></table>		1	session_care_chw_g234__1	Scheduling PCP visit	2	session_care_chw_g234__2	Smoking cessation group	3	session_care_chw_g234__3	Other	4	session_care_chw_g234__4	Pharmacy and medications															
1	session_care_chw_g234__1	Scheduling PCP visit																													
2	session_care_chw_g234__2	Smoking cessation group																													
3	session_care_chw_g234__3	Other																													
4	session_care_chw_g234__4	Pharmacy and medications																													
1505	other_care_chw_g234 Show the field ONLY if: [session_care_chw_g234(3)] = '1'	Other	text, Required																												
1506	session_progress_chw_g234 Show the field ONLY if: [session_content_chw_g234(7)] = '1'	7. Reinforcing progress and identifying what has been helpful in achieving gains (e.g., scheduling PCP visit, smoking cessation group)	notes Custom alignment: LH																												
1507	session_other_chw_g234 Show the field ONLY if: [session_content_chw_g234(8)] = '1'	8. Other	notes Custom alignment: LH																												
1508	session_qline_chw_g234 Show the field ONLY if: [session_content_chw_g234(9)] = '1'	9. QUIT LINE Was QUIT LINE presented/discussed to participant TODAY?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH		1	Yes	0	No																							
1	Yes																														
0	No																														
1509	session_noqline_chw_g234 Show the field ONLY if: [session_qline_chw_g234] = '0'	Why not?	notes, Required Custom alignment: LH																												
1510	session_qlineinterest_chw_g234 Show the field ONLY if: [session_qline_chw_g234] = '1'	Was participant interested?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH		1	Yes	0	No																							
1	Yes																														
0	No																														
1511	session_qlineatsession_chw_g234 Show the field ONLY if: [session_qline_chw_g234] = '1'	Did the participant call the Quit Line during this session?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH		1	Yes	0	No																							
1	Yes																														
0	No																														

1512	session_qlineoat ^{session_chw_g234} Show the field ONLY if: [session_qlineat ^{session_chw_g234}] = '0'	Why not?	notes, Required Custom alignment: LH				
1513	session_qlinesched ^{chw_g234} Show the field ONLY if: [session_qlineat ^{session_chw_g234}] = '0'	Was a Quit line call scheduled?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No
1	Yes						
0	No						
1514	session_qlinenosched ^{chw_g234} Show the field ONLY if: [session_qlinesched ^{chw_g234}] = '0'	Why not?	notes, Required Custom alignment: LH				
1515	session_qlinetime ^{chw_g234} Show the field ONLY if: [session_qlineat ^{session_chw_g234}] = '1'	Date/time Quit Line call	text (datetime_mdy), Required				
1516	session_qline ^{chwinvolv_g234} Show the field ONLY if: [session_qlineat ^{session_chw_g234}] = '1'	Was the CHW involved in the Quit line call?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No
1	Yes						
0	No						
1517	session_qlinecall ^{chw_g234} Show the field ONLY if: [session_qlineat ^{session_chw_g234}] = '1'	Describe session/call	notes, Required Custom alignment: LH				
1518	session_qlinenrt ^{chw_g234} Show the field ONLY if: [session_qlineat ^{session_chw_g234}] = '1'	Did the participant/CHW request NRT? Please explain	notes, Required Custom alignment: LH				
1519	session_qlinenrtuse ^{chw_g234} Show the field ONLY if: [session_qlineat ^{session_chw_g234}] = '1'	Did the participant use the NRT? Please explain	notes, Required Custom alignment: LH				
1520	session_qlineable ^{chw_g234} Show the field ONLY if: [session_qlineat ^{session_chw_g234}] = '1'	Did the quitline staff seem able to work with people with SMI? Please explain	notes, Required Custom alignment: LH				
1521	session_qlinefu ^{chw_g234} Show the field ONLY if: [session_qlineat ^{session_chw_g234}] = '1'	Was a follow up scheduled? explain	notes, Required Custom alignment: LH				
1522	session_qlinecom ^{chw_g234}	Quit Line Notes	notes Custom alignment: LH				
1523	session_descript ^{chw_g234}	Brief description of the session	notes, Required Custom alignment: LH				
1524	session_next_goals ^{chw_g234}	Goals for next session	notes, Required Custom alignment: LH				
1525	next_visit_all ^{chw_g234}	Next visit will be	text (datetime_mdy), Required Field Annotation: @HIDEBUTTON				

1526	name_chw_g234	CHW	radio, Required <table border="1"> <tr><td>1</td><td>Alexandra Fortune</td></tr> <tr><td>2</td><td>Ashley Newman</td></tr> <tr><td>3</td><td>Aysha Peralta</td></tr> <tr><td>4</td><td>Erin Hanrahan</td></tr> <tr><td>5</td><td>John Dowd</td></tr> <tr><td>6</td><td>Karlie Marrs</td></tr> <tr><td>7</td><td>Leeza Rojas</td></tr> <tr><td>8</td><td>Madalyn Davis</td></tr> <tr><td>9</td><td>Madeleine Fontaine</td></tr> <tr><td>10</td><td>Megan Donnelly</td></tr> <tr><td>11</td><td>Morgan Boudreau</td></tr> <tr><td>12</td><td>Nina Cherilus</td></tr> <tr><td>13</td><td>Carlos Taveras</td></tr> </table>	1	Alexandra Fortune	2	Ashley Newman	3	Aysha Peralta	4	Erin Hanrahan	5	John Dowd	6	Karlie Marrs	7	Leeza Rojas	8	Madalyn Davis	9	Madeleine Fontaine	10	Megan Donnelly	11	Morgan Boudreau	12	Nina Cherilus	13	Carlos Taveras
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12	Nina Cherilus																												
13	Carlos Taveras																												
1527	contact_sheet_all_visits_chw_61_80_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																				
0	Incomplete																												
1	Unverified																												
2	Complete																												
Instrument: Groups Level 2 (groups_round_2)			^ Collapse																										
1528	date_1_chw_cbt_v2	Date	text (date_mdyy), Required Field Annotation: @HIDEBUTTON																										
1529	location_cbt_v2	Location of Meeting	radio, Required <table border="1"> <tr><td>1</td><td>Group home</td></tr> <tr><td>2</td><td>MGH</td></tr> <tr><td>3</td><td>Library</td></tr> <tr><td>4</td><td>Church</td></tr> <tr><td>5</td><td>Agency</td></tr> <tr><td>6</td><td>Other</td></tr> </table>	1	Group home	2	MGH	3	Library	4	Church	5	Agency	6	Other														
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4	Church																												
5	Agency																												
6	Other																												
1530	other_location_chw_v1_cbt_v2 Show the field ONLY if: [location_cbt_v2] = '6'	Other location	text, Required																										
1531	location_name_cbt_chw_v2	Name of the location	radio, Required <table border="1"> <tr><td>1</td><td>MMH</td></tr> <tr><td>2</td><td>153 South Street</td></tr> <tr><td>3</td><td>Paul Sullivan Housing (151 Geneva)</td></tr> <tr><td>4</td><td>TOB (1500 Dorchester)</td></tr> <tr><td>5</td><td>DMH Lowell</td></tr> <tr><td>6</td><td>Gill Wellness Center</td></tr> <tr><td>7</td><td>DMH Lawrence</td></tr> <tr><td>8</td><td>Pentucket Medical-Haverhill</td></tr> <tr><td>9</td><td>Other</td></tr> </table>	1	MMH	2	153 South Street	3	Paul Sullivan Housing (151 Geneva)	4	TOB (1500 Dorchester)	5	DMH Lowell	6	Gill Wellness Center	7	DMH Lawrence	8	Pentucket Medical-Haverhill	9	Other								
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1532	other_location_cbt_chw_v2 Show the field ONLY if: [location_name_cbt_chw_v2] = '9'	Other location	text, Required																										
1533	group_track_cbt_v2	Group Track	radio, Required <table border="1"> <tr><td>1</td><td>Motivational Enhancement</td></tr> <tr><td>2</td><td>Cessation</td></tr> <tr><td>3</td><td>Relapse prevention</td></tr> </table>	1	Motivational Enhancement	2	Cessation	3	Relapse prevention																				
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1534	group_number_cbt_v2	Group Number	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr><tr><td>12</td><td>12</td></tr><tr><td>13</td><td>13</td></tr><tr><td>14</td><td>14</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14
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1535	start_time_chw_v1_cbt_v2	Meeting Start Time	text (time), Required																												
1536	end_time_chw_2_v1_cbt_v2	Meeting End Time	text (time), Required																												
1537	cigs_today_chw_cbt_v2	Total number of cigarettes smoked today	text, Required																												
1538	cigs_yesterday_chw_cbt_v2	Total number cigarettes smoked yesterday	text, Required																												
1539	cpd_last_week_cbt_v2	Total number of cigarettes smoked in the last week	text, Required																												
1540	date_last_group_cbt_v2	If participant didn't attend group last week, enter the date of last group	text (date_mdy) Field Annotation: @HIDEBUTTON																												
1541	cigs_since_last_chw_cbt_v2	If participant didn't attend group last week, enter the total number of cigarettes smoked since the last group. (for example, if last group attended was 21 days ago and participant smoked 10 cpd, the amount to be enter here should be 210)	text																												
1542	last_cig_chw_cbt_v2	Time since last cigarette	text, Required																												
1543	time_last_cig_units_cbt_v2		radio, Required <table><tr><td>1</td><td>minutes</td></tr><tr><td>2</td><td>hours</td></tr><tr><td>3</td><td>days</td></tr><tr><td>4</td><td>weeks</td></tr><tr><td>5</td><td>months</td></tr></table> Custom alignment: LH	1	minutes	2	hours	3	days	4	weeks	5	months																		
1	minutes																														
2	hours																														
3	days																														
4	weeks																														
5	months																														
1544	co_chw_cbt_v2	Was CO testing completed today?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																								
1	Yes																														
0	No																														
1545	co_number_chw_cbt_v2 Show the field ONLY if: [co_chw_cbt_v2] = '1'	Expired CO reading (ppm)	text, Required																												
1546	time_co_chw_cbt_v2 Show the field ONLY if: [co_chw_cbt_v2] = '1'	Date of CO reading	text (date_mdy), Required Field Annotation: @HIDEBUTTON																												
1547	hour_co_chw_cbt_v2 Show the field ONLY if: [co_chw_cbt_v2] = '1'	Time of CO reading	text (time), Required Field Annotation: @HIDEBUTTON																												

1548	co_monitor_chw_cbt_v2 Show the field ONLY if: [co_chw_cbt_v2] = '1'	CO Monitor ID	radio, Required <table><tr><td>1</td><td>A</td></tr><tr><td>2</td><td>B</td></tr><tr><td>3</td><td>C</td></tr><tr><td>4</td><td>D</td></tr><tr><td>5</td><td>E</td></tr><tr><td>6</td><td>F</td></tr><tr><td>7</td><td>G</td></tr><tr><td>8</td><td>H</td></tr><tr><td>9</td><td>I</td></tr><tr><td>10</td><td>J</td></tr><tr><td>11</td><td>K</td></tr><tr><td>12</td><td>L</td></tr><tr><td>13</td><td>M</td></tr><tr><td>14</td><td>N</td></tr><tr><td>15</td><td>O</td></tr><tr><td>16</td><td>P</td></tr></table>		1	A	2	B	3	C	4	D	5	E	6	F	7	G	8	H	9	I	10	J	11	K	12	L	13	M	14	N	15	O	16	P										
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16	P																																													
1549	topics_cbt_v2	Groups main topics	checkbox, Required <table><tr><td>1</td><td>topics_cbt_v2__1</td><td>CO and smoking</td></tr><tr><td>2</td><td>topics_cbt_v2__2</td><td>Smoking triggers, pack wraps</td></tr><tr><td>3</td><td>topics_cbt_v2__3</td><td>Reasons to quit smoking</td></tr><tr><td>4</td><td>topics_cbt_v2__4</td><td>Withdrawal symptoms</td></tr><tr><td>5</td><td>topics_cbt_v2__5</td><td>Things to do instead of smoking, the 4Ds</td></tr><tr><td>6</td><td>topics_cbt_v2__6</td><td>Preparing for the Quit day</td></tr><tr><td>7</td><td>topics_cbt_v2__7</td><td>Pros and cons of quitting smoking</td></tr><tr><td>8</td><td>topics_cbt_v2__8</td><td>High risk situations</td></tr><tr><td>9</td><td>topics_cbt_v2__9</td><td>Problem solving</td></tr><tr><td>10</td><td>topics_cbt_v2__10</td><td>Dealing with stress, boredom</td></tr><tr><td>11</td><td>topics_cbt_v2__11</td><td>Dealing with weight gain</td></tr><tr><td>12</td><td>topics_cbt_v2__12</td><td>Dealing with slips</td></tr><tr><td>13</td><td>topics_cbt_v2__13</td><td>Mini Quit</td></tr><tr><td>14</td><td>topics_cbt_v2__14</td><td>Smoking Cessation Medications</td></tr></table>		1	topics_cbt_v2__1	CO and smoking	2	topics_cbt_v2__2	Smoking triggers, pack wraps	3	topics_cbt_v2__3	Reasons to quit smoking	4	topics_cbt_v2__4	Withdrawal symptoms	5	topics_cbt_v2__5	Things to do instead of smoking, the 4Ds	6	topics_cbt_v2__6	Preparing for the Quit day	7	topics_cbt_v2__7	Pros and cons of quitting smoking	8	topics_cbt_v2__8	High risk situations	9	topics_cbt_v2__9	Problem solving	10	topics_cbt_v2__10	Dealing with stress, boredom	11	topics_cbt_v2__11	Dealing with weight gain	12	topics_cbt_v2__12	Dealing with slips	13	topics_cbt_v2__13	Mini Quit	14	topics_cbt_v2__14	Smoking Cessation Medications
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1550	homework_cbt_v2	Homework (Completed/partially completed/did not complete)	notes Custom alignment: LH																																											
1551	notes_cbt_v2	Notes	notes Custom alignment: LH																																											

1552	smoking_status_chw_cby_v2	<p>Section Header: SMOKING STATUS Group 1: [visit_1_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_1_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_1_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_1_arm_2][co_number_chw_cbt] ppm CO Group 2: [visit_2_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_2_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_2_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_2_arm_2][co_number_chw_cbt] ppm CO Group 3: [visit_3_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_3_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_3_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_3_arm_2][co_number_chw_cbt] ppm CO Group 4: [visit_4_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_4_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_4_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_4_arm_2][co_number_chw_cbt] ppm CO Group 5: [visit_5_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_5_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_5_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_5_arm_2][co_number_chw_cbt] ppm CO Group 6: [visit_6_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_6_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_6_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_6_arm_2][co_number_chw_cbt] ppm CO Group 7: [visit_7_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_7_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_7_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_7_arm_2][co_number_chw_cbt] ppm CO Group 8: [visit_8_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_8_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_8_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_8_arm_2][co_number_chw_cbt] ppm CO Group 9: [visit_9_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_9_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_9_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_9_arm_2][co_number_chw_cbt] ppm CO Group 10: [visit_10_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_10_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_10_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_10_arm_2][co_number_chw_cbt] ppm CO Group 11: [visit_11_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_11_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_11_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_11_arm_2][co_number_chw_cbt] ppm CO Group 12: [visit_12_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_12_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_12_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_12_arm_2][co_number_chw_cbt] ppm CO Group 13: [visit_13_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_13_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_13_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_13_arm_2][co_number_chw_cbt] ppm CO Group 14: [visit_14_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_14_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_14_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_14_arm_2][co_number_chw_cbt] ppm CO Group 15: [visit_15_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_15_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_15_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_15_arm_2][co_number_chw_cbt] ppm CO Group 16: [visit_16_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_16_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_16_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_16_arm_2][co_number_chw_cbt] ppm CO Group 17: [visit_17_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_17_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_17_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_17_arm_2][co_number_chw_cbt] ppm CO Group 18: [visit_18_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_18_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_18_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_18_arm_2][co_number_chw_cbt] ppm CO Group 19: [visit_19_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_19_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_19_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_19_arm_2][co_number_chw_cbt] ppm CO Group 20: [visit_20_arm_2][cigs_today_chw_cbt] Tobacco products today [visit_20_arm_2][cigs_yesterday_chw_cbt] Tobacco products yesterday [visit_20_arm_2][cpd_last_week_cbt] Tobacco products last week [visit_20_arm_2][co_number_chw_cbt] ppm CO</p> <p>Today, participant is (refer to most recent prior report to make this determination)</p>	<div>radio, Required</div> <table><tr><td>1</td><td>smoking</td></tr><tr><td>2</td><td>Quit for at least 24 hours</td></tr><tr><td>3</td><td>Quit for 7 days (but less than 14 days)</td></tr><tr><td>4</td><td>Quit for 14 days (but less than 4 weeks)</td></tr><tr><td>5</td><td>Quit for 4 weeks or more</td></tr></table>	1	smoking	2	Quit for at least 24 hours	3	Quit for 7 days (but less than 14 days)	4	Quit for 14 days (but less than 4 weeks)	5	Quit for 4 weeks or more
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4	Quit for 14 days (but less than 4 weeks)												
5	Quit for 4 weeks or more												
1553	reasons_quit_chw_cbt_v2	REASONS TO QUIT (for example: "Client wants to quit because her daughter is expecting twins in August")	notes Custom alignment: LH										
1554	barriers_quit_chw_cbt_v2	Barriers to Quitting Smoking (for example: "worried about irritability at work")	notes Custom alignment: LH										
1555	session_info_chw_cbt_v2	Information relevant to today's session (for example "Client related to boredom as a trigger; notes he does not think about smoking while at day program")	notes Custom alignment: LH										
1556	session_plans_chw_cbt_v2	Plans made in session (for example: "Client will do a jigsaw puzzle to keep her mind off of smoking")	notes Custom alignment: LH										

1557	treatment_pat_chw_cbt_v2	Pharmacotherapy: is the participant on any smoking cessation treatment?	checkbox <table border="1"> <tr> <td>1</td> <td>treatment_pat_chw_cbt_v2__1</td> <td>Varenicline (i.e. Chantix)</td> </tr> <tr> <td>2</td> <td>treatment_pat_chw_cbt_v2__2</td> <td>Nicotine patch</td> </tr> <tr> <td>3</td> <td>treatment_pat_chw_cbt_v2__3</td> <td>Bupropion (i.e. Wellbutrin, Zyban)</td> </tr> <tr> <td>4</td> <td>treatment_pat_chw_cbt_v2__4</td> <td>Nicotine gum</td> </tr> <tr> <td>5</td> <td>treatment_pat_chw_cbt_v2__5</td> <td>Nicotine lozenge</td> </tr> <tr> <td>6</td> <td>treatment_pat_chw_cbt_v2__6</td> <td>Other</td> </tr> <tr> <td>7</td> <td>treatment_pat_chw_cbt_v2__7</td> <td>No treatment</td> </tr> </table>	1	treatment_pat_chw_cbt_v2__1	Varenicline (i.e. Chantix)	2	treatment_pat_chw_cbt_v2__2	Nicotine patch	3	treatment_pat_chw_cbt_v2__3	Bupropion (i.e. Wellbutrin, Zyban)	4	treatment_pat_chw_cbt_v2__4	Nicotine gum	5	treatment_pat_chw_cbt_v2__5	Nicotine lozenge	6	treatment_pat_chw_cbt_v2__6	Other	7	treatment_pat_chw_cbt_v2__7	No treatment					
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6	treatment_pat_chw_cbt_v2__6	Other																											
7	treatment_pat_chw_cbt_v2__7	No treatment																											
1558	other_treatment_pat_chw_cbt_v2 Show the field ONLY if: [treatment_pat_chw_cbt_v2(6)] = '1'	Other treatment	text, Required																										
1559	dose_treatment_pat_chw_cbt_v2	Dose(s)	text																										
1560	treatment_start_pat_chw_cbt_v2	start date	text (date_mdy)																										
1561	reimb_cbt_chw_v2	Did the participant receive \$5 for his/her participation in the smoking group?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No																						
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1562	notes_cbt_chw_v2	Notes	notes Custom alignment: LH																										
1563	names_chw_v1_cbt_v2	CHW	radio, Required <table border="1"> <tr><td>1</td><td>Alexandra Fortune</td></tr> <tr><td>2</td><td>Ashley Newman</td></tr> <tr><td>3</td><td>Aysha Peralta</td></tr> <tr><td>4</td><td>Erin Hanrahan</td></tr> <tr><td>5</td><td>John Dowd</td></tr> <tr><td>6</td><td>Karlie Marrs</td></tr> <tr><td>7</td><td>Leeza Rojas</td></tr> <tr><td>8</td><td>Madalyn Davis</td></tr> <tr><td>9</td><td>Madeleine Fontaine</td></tr> <tr><td>10</td><td>Megan Donnelly</td></tr> <tr><td>11</td><td>Morgan Boudreau</td></tr> <tr><td>12</td><td>Nina Cherilus</td></tr> <tr><td>13</td><td>Carlos Taveras</td></tr> </table>	1	Alexandra Fortune	2	Ashley Newman	3	Aysha Peralta	4	Erin Hanrahan	5	John Dowd	6	Karlie Marrs	7	Leeza Rojas	8	Madalyn Davis	9	Madeleine Fontaine	10	Megan Donnelly	11	Morgan Boudreau	12	Nina Cherilus	13	Carlos Taveras
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1564	phone_comments_chw_v1_cbt_v2	Comments	notes																										
1565	groups_round_2_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																				
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1568	other_location_chw_cbt_gl3 Show the field ONLY if: [location_chw_cbt_gl3] = '6'	Other location	text, Required																										

1569	location_name_chw_cbt_gl3	Name of the location	radio, Required <table border="1"> <tr><td>1</td><td>MMH</td></tr> <tr><td>2</td><td>153 South Street</td></tr> <tr><td>3</td><td>Paul Sullivan Housing (151 Geneva)</td></tr> <tr><td>4</td><td>TOB (1500 Dorchester)</td></tr> <tr><td>5</td><td>DMH Lowell</td></tr> <tr><td>6</td><td>Gill Wellness Center</td></tr> <tr><td>7</td><td>DMH Lawrence</td></tr> <tr><td>8</td><td>Pentucket Medical-Haverhill</td></tr> <tr><td>9</td><td>Other</td></tr> <tr><td>10</td><td>CAM</td></tr> </table>	1	MMH	2	153 South Street	3	Paul Sullivan Housing (151 Geneva)	4	TOB (1500 Dorchester)	5	DMH Lowell	6	Gill Wellness Center	7	DMH Lawrence	8	Pentucket Medical-Haverhill	9	Other	10	CAM								
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1571	group_track_cbt_gl3	Group Track	radio, Required <table border="1"> <tr><td>1</td><td>Motivational Enhancement</td></tr> <tr><td>2</td><td>Cessation</td></tr> <tr><td>3</td><td>Relapse prevention</td></tr> </table>	1	Motivational Enhancement	2	Cessation	3	Relapse prevention																						
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1572	group_number_cbt_gl3	Group Number	radio, Required <table border="1"> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td></tr> <tr><td>3</td><td>3</td></tr> <tr><td>4</td><td>4</td></tr> <tr><td>5</td><td>5</td></tr> <tr><td>6</td><td>6</td></tr> <tr><td>7</td><td>7</td></tr> <tr><td>8</td><td>8</td></tr> <tr><td>9</td><td>9</td></tr> <tr><td>10</td><td>10</td></tr> <tr><td>11</td><td>11</td></tr> <tr><td>12</td><td>12</td></tr> <tr><td>13</td><td>13</td></tr> <tr><td>14</td><td>14</td></tr> </table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14
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1573	start_time_chw_cbt_gl3	Meeting Start Time	text (time), Required																												
1574	end_time_chw_cbt_gl3	Meeting End Time	text (time), Required																												
1575	cigs_today_chw_cbt_gl3	Total number of cigarettes smoked today	text, Required																												
1576	cigs_yesterday_chw_cbt_gl3	Total number cigarettes smoked yesterday	text, Required																												
1577	cpd_last_week_cbt_gl3	Total number of cigarettes smoked in the last week	text, Required																												
1578	date_last_group_cbt_gl3	If participant didn't attend group last week, enter the date of last group	text (date_mdy) Field Annotation: @HIDEBUTTON																												
1579	cigs_since_last_chw_cbt_gl3	If participant didn't attend group last week, enter the total number of cigarettes smoked since the last group. (for example, if last group attended was 21 days ago and participant smoked 10 cpd, the amount to be enter here should be 210)	text																												
1580	last_cig_chw_cbt_gl3	Time since last cigarette	text, Required																												
1581	time_last_cig_units_cbt_gl3		radio, Required <table border="1"> <tr><td>1</td><td>minutes</td></tr> <tr><td>2</td><td>hours</td></tr> <tr><td>3</td><td>days</td></tr> <tr><td>4</td><td>weeks</td></tr> <tr><td>5</td><td>months</td></tr> </table> Custom alignment: LH	1	minutes	2	hours	3	days	4	weeks	5	months																		
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1582	co_chw_cbt_gl3	Was CO testing completed today?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																																						
1	Yes																																												
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1583	co_number_chw_cbt_gl3 Show the field ONLY if: [co_chw_cbt_gl3] = '1'	Expired CO reading (ppm)	text, Required																																										
1584	time_co_chw_cbt_gl3 Show the field ONLY if: [co_chw_cbt_gl3] = '1'	Date of CO reading	text (date_mdy), Required Field Annotation: @HIDEBUTTON																																										
1585	hour_co_chw_cbt_gl3 Show the field ONLY if: [co_chw_cbt_gl3] = '1'	Time of CO reading	text (time), Required Field Annotation: @HIDEBUTTON																																										
1586	co_monitor_chw_cbt_gl3 Show the field ONLY if: [co_chw_cbt_gl3] = '1'	CO Monitor ID	radio, Required <table><tr><td>1</td><td>A</td></tr><tr><td>2</td><td>B</td></tr><tr><td>3</td><td>C</td></tr><tr><td>4</td><td>D</td></tr><tr><td>5</td><td>E</td></tr><tr><td>6</td><td>F</td></tr><tr><td>7</td><td>G</td></tr><tr><td>8</td><td>H</td></tr><tr><td>9</td><td>I</td></tr><tr><td>10</td><td>J</td></tr><tr><td>11</td><td>K</td></tr><tr><td>12</td><td>L</td></tr><tr><td>13</td><td>M</td></tr><tr><td>14</td><td>N</td></tr><tr><td>15</td><td>O</td></tr><tr><td>16</td><td>P</td></tr></table>	1	A	2	B	3	C	4	D	5	E	6	F	7	G	8	H	9	I	10	J	11	K	12	L	13	M	14	N	15	O	16	P										
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1587	topics_cbt_gl3	Groups main topics	checkbox, Required <table><tr><td>1</td><td>topics_cbt_gl3__1</td><td>CO and smoking</td></tr><tr><td>2</td><td>topics_cbt_gl3__2</td><td>Smoking triggers, pack wraps</td></tr><tr><td>3</td><td>topics_cbt_gl3__3</td><td>Reasons to quit smoking</td></tr><tr><td>4</td><td>topics_cbt_gl3__4</td><td>Withdrawal symptoms</td></tr><tr><td>5</td><td>topics_cbt_gl3__5</td><td>Things to do instead of smoking, the 4Ds</td></tr><tr><td>6</td><td>topics_cbt_gl3__6</td><td>Preparing for the Quit day</td></tr><tr><td>7</td><td>topics_cbt_gl3__7</td><td>Pros and cons of quitting smoking</td></tr><tr><td>8</td><td>topics_cbt_gl3__8</td><td>High risk situations</td></tr><tr><td>9</td><td>topics_cbt_gl3__9</td><td>Problem solving</td></tr><tr><td>10</td><td>topics_cbt_gl3__10</td><td>Dealing with stress, boredom</td></tr><tr><td>11</td><td>topics_cbt_gl3__11</td><td>Dealing with weight gain</td></tr><tr><td>12</td><td>topics_cbt_gl3__12</td><td>Dealing with slips</td></tr><tr><td>13</td><td>topics_cbt_gl3__13</td><td>Mini Quit</td></tr><tr><td>14</td><td>topics_cbt_gl3__14</td><td>Smoking Cessation Medications</td></tr></table>	1	topics_cbt_gl3__1	CO and smoking	2	topics_cbt_gl3__2	Smoking triggers, pack wraps	3	topics_cbt_gl3__3	Reasons to quit smoking	4	topics_cbt_gl3__4	Withdrawal symptoms	5	topics_cbt_gl3__5	Things to do instead of smoking, the 4Ds	6	topics_cbt_gl3__6	Preparing for the Quit day	7	topics_cbt_gl3__7	Pros and cons of quitting smoking	8	topics_cbt_gl3__8	High risk situations	9	topics_cbt_gl3__9	Problem solving	10	topics_cbt_gl3__10	Dealing with stress, boredom	11	topics_cbt_gl3__11	Dealing with weight gain	12	topics_cbt_gl3__12	Dealing with slips	13	topics_cbt_gl3__13	Mini Quit	14	topics_cbt_gl3__14	Smoking Cessation Medications
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1588	homework_cbt_gl3	Homework (Completed/partially completed/did not complete)	notes Custom alignment: LH																																										
1589	notes_cbt_gl3	Notes	notes Custom alignment: LH																																										

1590	smoking_status_chw_cbt_gl3	Today, participant is (refer to most recent prior report to make this determination)	radio, Required <table><tr><td>1</td><td>smoking</td></tr><tr><td>2</td><td>Quit for at least 24 hours</td></tr><tr><td>3</td><td>Quit for 7 days (but less than 14 days)</td></tr><tr><td>4</td><td>Quit for 14 days (but less than 4 weeks)</td></tr><tr><td>5</td><td>Quit for 4 weeks or more</td></tr></table>		1	smoking	2	Quit for at least 24 hours	3	Quit for 7 days (but less than 14 days)	4	Quit for 14 days (but less than 4 weeks)	5	Quit for 4 weeks or more																
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1591	reasons_quit_chw_cbt_gl3	REASONS TO QUIT (for example: "Client wants to quit because her daughter is expecting twins in August")	notes Custom alignment: LH																											
1592	barriers_quit_chw_cbt_gl3	Barriers to Quitting Smoking (for example: "worried about irritability at work")	notes Custom alignment: LH																											
1593	session_info_chw_cbt_gl3	Information relevant to today's session (for example "Client related to boredom as a trigger; notes he does not think about smoking while at day program")	notes Custom alignment: LH																											
1594	session_plans_chw_cbt_gl3	Plans made in session (for example: "Client will do a jigsaw puzzle to keep her mind off of smoking")	notes Custom alignment: LH																											
1595	treatment_pat_chw_cbt_gl3	Pharmacotherapy: is the participant on any smoking cessation treatment?	checkbox <table><tr><td>1</td><td>treatment_pat_chw_cbt_gl3__1</td><td>Varenicline (i.e. Chantix)</td></tr><tr><td>2</td><td>treatment_pat_chw_cbt_gl3__2</td><td>Nicotine patch</td></tr><tr><td>3</td><td>treatment_pat_chw_cbt_gl3__3</td><td>Bupropion (i.e. Wellbutrin, Zyban)</td></tr><tr><td>4</td><td>treatment_pat_chw_cbt_gl3__4</td><td>Nicotine gum</td></tr><tr><td>5</td><td>treatment_pat_chw_cbt_gl3__5</td><td>Nicotine lozenge</td></tr><tr><td>6</td><td>treatment_pat_chw_cbt_gl3__6</td><td>Other</td></tr><tr><td>7</td><td>treatment_pat_chw_cbt_gl3__7</td><td>No treatment</td></tr></table>		1	treatment_pat_chw_cbt_gl3__1	Varenicline (i.e. Chantix)	2	treatment_pat_chw_cbt_gl3__2	Nicotine patch	3	treatment_pat_chw_cbt_gl3__3	Bupropion (i.e. Wellbutrin, Zyban)	4	treatment_pat_chw_cbt_gl3__4	Nicotine gum	5	treatment_pat_chw_cbt_gl3__5	Nicotine lozenge	6	treatment_pat_chw_cbt_gl3__6	Other	7	treatment_pat_chw_cbt_gl3__7	No treatment					
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1607	location_name_chw_cbt_gl4	Name of the location	radio, Required <table border="1"> <tr><td>1</td><td>MMH</td></tr> <tr><td>2</td><td>153 South Street</td></tr> <tr><td>3</td><td>Paul Sullivan Housing (151 Geneva)</td></tr> <tr><td>4</td><td>TOB (1500 Dorchester)</td></tr> <tr><td>5</td><td>DMH Lowell</td></tr> <tr><td>6</td><td>Gill Wellness Center</td></tr> <tr><td>7</td><td>DMH Lawrence</td></tr> <tr><td>8</td><td>Pentucket Medical-Haverhill</td></tr> <tr><td>9</td><td>Other</td></tr> <tr><td>10</td><td>CAM</td></tr> </table>	1	MMH	2	153 South Street	3	Paul Sullivan Housing (151 Geneva)	4	TOB (1500 Dorchester)	5	DMH Lowell	6	Gill Wellness Center	7	DMH Lawrence	8	Pentucket Medical-Haverhill	9	Other	10	CAM								
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1610	group_number_cbt_gl4	Group Number	radio, Required <table border="1"> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td></tr> <tr><td>3</td><td>3</td></tr> <tr><td>4</td><td>4</td></tr> <tr><td>5</td><td>5</td></tr> <tr><td>6</td><td>6</td></tr> <tr><td>7</td><td>7</td></tr> <tr><td>8</td><td>8</td></tr> <tr><td>9</td><td>9</td></tr> <tr><td>10</td><td>10</td></tr> <tr><td>11</td><td>11</td></tr> <tr><td>12</td><td>12</td></tr> <tr><td>13</td><td>13</td></tr> <tr><td>14</td><td>14</td></tr> </table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14
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1611	start_time_chw_cbt_gl4	Meeting Start Time	text (time), Required																												
1612	end_time_chw_cbt_gl4	Meeting End Time	text (time), Required																												
1613	cigs_today_chw_cbt_gl4	Total number of cigarettes smoked today	text, Required																												
1614	cigs_yesterday_chw_cbt_gl4	Total number cigarettes smoked yesterday	text, Required																												
1615	cpd_last_week_cbt_gl4	Total number of cigarettes smoked in the last week	text, Required																												

1616	date_last_group_cbt_gl4	If participant didn't attend group last week, enter the date of last group	text (date_mdy) Field Annotation: @HIDEBUTTON																																
1617	cigs_since_last_chw_cbt_gl4	If participant didn't attend group last week, enter the total number of cigarettes smoked since the last group. (for example, if last group attended was 21 days ago and participant smoked 10 cpd, the amount to be enter here should be 210)	text																																
1618	last_cig_chw_cbt_gl4	Time since last cigarette	text, Required																																
1619	time_last_cig_units_cbt_gl4		radio, Required <table><tr><td>1</td><td>minutes</td></tr><tr><td>2</td><td>hours</td></tr><tr><td>3</td><td>days</td></tr><tr><td>4</td><td>weeks</td></tr><tr><td>5</td><td>months</td></tr></table> Custom alignment: LH	1	minutes	2	hours	3	days	4	weeks	5	months																						
1	minutes																																		
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1620	co_chw_cbt_gl4	Was CO testing completed today?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																												
1	Yes																																		
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1621	co_number_chw_cbt_gl4 Show the field ONLY if: [co_chw_cbt_gl4] = '1'	Expired CO reading (ppm)	text, Required																																
1622	time_co_chw_cbt_gl4 Show the field ONLY if: [co_chw_cbt_gl4] = '1'	Date of CO reading	text (date_mdy), Required Field Annotation: @HIDEBUTTON																																
1623	hour_co_chw_cbt_gl4 Show the field ONLY if: [co_chw_cbt_gl4] = '1'	Time of CO reading	text (time), Required Field Annotation: @HIDEBUTTON																																
1624	co_monitor_chw_cbt_gl4 Show the field ONLY if: [co_chw_cbt_gl4] = '1'	CO Monitor ID	radio, Required <table><tr><td>1</td><td>A</td></tr><tr><td>2</td><td>B</td></tr><tr><td>3</td><td>C</td></tr><tr><td>4</td><td>D</td></tr><tr><td>5</td><td>E</td></tr><tr><td>6</td><td>F</td></tr><tr><td>7</td><td>G</td></tr><tr><td>8</td><td>H</td></tr><tr><td>9</td><td>I</td></tr><tr><td>10</td><td>J</td></tr><tr><td>11</td><td>K</td></tr><tr><td>12</td><td>L</td></tr><tr><td>13</td><td>M</td></tr><tr><td>14</td><td>N</td></tr><tr><td>15</td><td>O</td></tr><tr><td>16</td><td>P</td></tr></table>	1	A	2	B	3	C	4	D	5	E	6	F	7	G	8	H	9	I	10	J	11	K	12	L	13	M	14	N	15	O	16	P
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16	P																																		

1625	topics_cbt_gl4	Groups main topics	checkbox, Required <table border="1"> <tr><td>1</td><td>topics_cbt_gl4__1</td><td>CO and smoking</td></tr> <tr><td>2</td><td>topics_cbt_gl4__2</td><td>Smoking triggers, pack wraps</td></tr> <tr><td>3</td><td>topics_cbt_gl4__3</td><td>Reasons to quit smoking</td></tr> <tr><td>4</td><td>topics_cbt_gl4__4</td><td>Withdrawal symptoms</td></tr> <tr><td>5</td><td>topics_cbt_gl4__5</td><td>Things to do instead of smoking, the 4Ds</td></tr> <tr><td>6</td><td>topics_cbt_gl4__6</td><td>Preparing for the Quit day</td></tr> <tr><td>7</td><td>topics_cbt_gl4__7</td><td>Pros and cons of quitting smoking</td></tr> <tr><td>8</td><td>topics_cbt_gl4__8</td><td>High risk situations</td></tr> <tr><td>9</td><td>topics_cbt_gl4__9</td><td>Problem solving</td></tr> <tr><td>10</td><td>topics_cbt_gl4__10</td><td>Dealing with stress, boredom</td></tr> <tr><td>11</td><td>topics_cbt_gl4__11</td><td>Dealing with weight gain</td></tr> <tr><td>12</td><td>topics_cbt_gl4__12</td><td>Dealing with slips</td></tr> <tr><td>13</td><td>topics_cbt_gl4__13</td><td>Mini Quit</td></tr> <tr><td>14</td><td>topics_cbt_gl4__14</td><td>Smoking Cessation Medications</td></tr> </table>	1	topics_cbt_gl4__1	CO and smoking	2	topics_cbt_gl4__2	Smoking triggers, pack wraps	3	topics_cbt_gl4__3	Reasons to quit smoking	4	topics_cbt_gl4__4	Withdrawal symptoms	5	topics_cbt_gl4__5	Things to do instead of smoking, the 4Ds	6	topics_cbt_gl4__6	Preparing for the Quit day	7	topics_cbt_gl4__7	Pros and cons of quitting smoking	8	topics_cbt_gl4__8	High risk situations	9	topics_cbt_gl4__9	Problem solving	10	topics_cbt_gl4__10	Dealing with stress, boredom	11	topics_cbt_gl4__11	Dealing with weight gain	12	topics_cbt_gl4__12	Dealing with slips	13	topics_cbt_gl4__13	Mini Quit	14	topics_cbt_gl4__14	Smoking Cessation Medications
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1626	homework_cbt_gl4	Homework (Completed/partially completed/did not complete)	notes Custom alignment: LH																																										
1627	notes_cbt_gl4	Notes	notes Custom alignment: LH																																										
1628	smoking_status_chw_cbt_gl4	Today, participant is (refer to most recent prior report to make this determination)	radio, Required <table border="1"> <tr><td>1</td><td>smoking</td></tr> <tr><td>2</td><td>Quit for at least 24 hours</td></tr> <tr><td>3</td><td>Quit for 7 days (but less than 14 days)</td></tr> <tr><td>4</td><td>Quit for 14 days (but less than 4 weeks)</td></tr> <tr><td>5</td><td>Quit for 4 weeks or more</td></tr> </table>	1	smoking	2	Quit for at least 24 hours	3	Quit for 7 days (but less than 14 days)	4	Quit for 14 days (but less than 4 weeks)	5	Quit for 4 weeks or more																																
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1629	reasons_quit_chw_cbt_gl4	REASONS TO QUIT (for example: "Client wants to quit because her daughter is expecting twins in August")	notes Custom alignment: LH																																										
1630	barriers_quit_chw_cbt_gl4	Barriers to Quitting Smoking (for example: "worried about irritability at work")	notes Custom alignment: LH																																										
1631	session_info_chw_cbt_gl4	Information relevant to today's session (for example "Client related to boredom as a trigger; notes he does not think about smoking while at day program")	notes Custom alignment: LH																																										
1632	session_plans_chw_cbt_gl4	Plans made in session (for example: "Client will do a jigsaw puzzle to keep her mind off of smoking")	notes Custom alignment: LH																																										
1633	treatment_pat_chw_cbt_gl4	Pharmacotherapy: is the participant on any smoking cessation treatment?	checkbox <table border="1"> <tr><td>1</td><td>treatment_pat_chw_cbt_gl4__1</td><td>Varenicline (i.e. Chantix)</td></tr> <tr><td>2</td><td>treatment_pat_chw_cbt_gl4__2</td><td>Nicotine patch</td></tr> <tr><td>3</td><td>treatment_pat_chw_cbt_gl4__3</td><td>Bupropion (i.e. Wellbutrin, Zyban)</td></tr> <tr><td>4</td><td>treatment_pat_chw_cbt_gl4__4</td><td>Nicotine gum</td></tr> <tr><td>5</td><td>treatment_pat_chw_cbt_gl4__5</td><td>Nicotine lozenge</td></tr> <tr><td>6</td><td>treatment_pat_chw_cbt_gl4__6</td><td>Other</td></tr> <tr><td>7</td><td>treatment_pat_chw_cbt_gl4__7</td><td>No treatment</td></tr> </table>	1	treatment_pat_chw_cbt_gl4__1	Varenicline (i.e. Chantix)	2	treatment_pat_chw_cbt_gl4__2	Nicotine patch	3	treatment_pat_chw_cbt_gl4__3	Bupropion (i.e. Wellbutrin, Zyban)	4	treatment_pat_chw_cbt_gl4__4	Nicotine gum	5	treatment_pat_chw_cbt_gl4__5	Nicotine lozenge	6	treatment_pat_chw_cbt_gl4__6	Other	7	treatment_pat_chw_cbt_gl4__7	No treatment																					
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7	treatment_pat_chw_cbt_gl4__7	No treatment																																											
1634	other_treat_pat_chw_cbt_gl4 Show the field ONLY if: [treatment_pat_chw_cbt_gl4(6)] = '1'	Other treatment	text, Required																																										
1635	dose_treat_pat_chw_cbt_gl4	Dose(s)	notes																																										
1636	treat_start_pat_chw_cbt_gl4	start date	text (date_mdy)																																										
1637	reimb_cbt_chw_gl4	Did the participant receive \$5 for his/her participation in the smoking group?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																																						
1	Yes																																												
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1638	notes_cbt_chw_gl4	Notes	notes Custom alignment: LH																																										

1639	names_chw_cbt_gl4	CHW	radio, Required <table border="1"> <tr><td>1</td><td>Alexandra Fortune</td></tr> <tr><td>2</td><td>Ashley Newman</td></tr> <tr><td>3</td><td>Aysha Peralta</td></tr> <tr><td>4</td><td>Erin Hanrahan</td></tr> <tr><td>5</td><td>John Dowd</td></tr> <tr><td>6</td><td>Karlie Marrs</td></tr> <tr><td>7</td><td>Leeza Rojas</td></tr> <tr><td>8</td><td>Madalyn Davis</td></tr> <tr><td>9</td><td>Madeleine Fontaine</td></tr> <tr><td>10</td><td>Megan Donnelly</td></tr> <tr><td>11</td><td>Morgan Boudreau</td></tr> <tr><td>12</td><td>Nina Cherilus</td></tr> <tr><td>13</td><td>Carlos Taveras</td></tr> </table>	1	Alexandra Fortune	2	Ashley Newman	3	Aysha Peralta	4	Erin Hanrahan	5	John Dowd	6	Karlie Marrs	7	Leeza Rojas	8	Madalyn Davis	9	Madeleine Fontaine	10	Megan Donnelly	11	Morgan Boudreau	12	Nina Cherilus	13	Carlos Taveras
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1640	comments_chw_cbt_gl4	Comments	notes																										
1641	groups_level_4_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																				
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Instrument: Groups Level 5 (groups_level_5)			^ Collapse																										
1642	date_1_chw_cbt_gl5	Date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																										
1643	location_chw_cbt_gl5	Location of Meeting	radio, Required <table border="1"> <tr><td>1</td><td>Group home</td></tr> <tr><td>2</td><td>MGH</td></tr> <tr><td>3</td><td>Library</td></tr> <tr><td>4</td><td>Church</td></tr> <tr><td>5</td><td>Agency</td></tr> <tr><td>6</td><td>Other</td></tr> </table>	1	Group home	2	MGH	3	Library	4	Church	5	Agency	6	Other														
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1644	other_location_chw_cbt_gl5 Show the field ONLY if: [location_chw_cbt_gl5] = '6'	Other location	text, Required																										
1645	location_name_chw_cbt_gl5	Name of the location	radio, Required <table border="1"> <tr><td>1</td><td>MMH</td></tr> <tr><td>2</td><td>153 South Street</td></tr> <tr><td>3</td><td>Paul Sullivan Housing (151 Geneva)</td></tr> <tr><td>4</td><td>TOB (1500 Dorchester)</td></tr> <tr><td>5</td><td>DMH Lowell</td></tr> <tr><td>6</td><td>Gill Wellness Center</td></tr> <tr><td>7</td><td>DMH Lawrence</td></tr> <tr><td>8</td><td>Pentucket Medical-Haverhill</td></tr> <tr><td>9</td><td>Other</td></tr> <tr><td>10</td><td>CAM</td></tr> </table>	1	MMH	2	153 South Street	3	Paul Sullivan Housing (151 Geneva)	4	TOB (1500 Dorchester)	5	DMH Lowell	6	Gill Wellness Center	7	DMH Lawrence	8	Pentucket Medical-Haverhill	9	Other	10	CAM						
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1646	other_name_loc_chw_cbt_gl5 Show the field ONLY if: [location_name_chw_cbt_gl5] = '9'	Other location	text, Required																										
1647	group_track_cbt_gl5	Group Track	radio, Required <table border="1"> <tr><td>1</td><td>Motivational Enhancement</td></tr> <tr><td>2</td><td>Cessation</td></tr> <tr><td>3</td><td>Relapse prevention</td></tr> </table>	1	Motivational Enhancement	2	Cessation	3	Relapse prevention																				
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1648	group_number_cbt_gl5	Group Number	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr><tr><td>12</td><td>12</td></tr><tr><td>13</td><td>13</td></tr><tr><td>14</td><td>14</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14
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1649	start_time_chw_cbt_gl5	Meeting Start Time	text (time), Required																												
1650	end_time_chw_cbt_gl5	Meeting End Time	text (time), Required																												
1651	cigs_today_chw_cbt_gl5	Total number of cigarettes smoked today	text, Required																												
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1653	cpd_last_week_cbt_gl5	Total number of cigarettes smoked in the last week	text, Required																												
1654	date_last_group_cbt_gl5	If participant didn't attend group last week, enter the date of last group	text (date_mdy) Field Annotation: @HIDEBUTTON																												
1655	cigs_since_last_chw_cbt_gl5	If participant didn't attend group last week, enter the total number of cigarettes smoked since the last group. (for example, if last group attended was 21 days ago and participant smoked 10 cpd, the amount to be enter here should be 210)	text																												
1656	last_cig_chw_cbt_gl5	Time since last cigarette	text, Required																												
1657	time_last_cig_units_cbt_gl5		radio, Required <table><tr><td>1</td><td>minutes</td></tr><tr><td>2</td><td>hours</td></tr><tr><td>3</td><td>days</td></tr><tr><td>4</td><td>weeks</td></tr><tr><td>5</td><td>months</td></tr></table> Custom alignment: LH	1	minutes	2	hours	3	days	4	weeks	5	months																		
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1658	co_chw_cbt_gl5	Was CO testing completed today?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																								
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1659	co_number_chw_cbt_gl5 Show the field ONLY if: [co_chw_cbt_gl5] = '1'	Expired CO reading (ppm)	text, Required																												
1660	time_co_chw_cbt_gl5 Show the field ONLY if: [co_chw_cbt_gl5] = '1'	Date of CO reading	text (date_mdy), Required Field Annotation: @HIDEBUTTON																												
1661	hour_co_chw_cbt_gl5 Show the field ONLY if: [co_chw_cbt_gl5] = '1'	Time of CO reading	text (time), Required Field Annotation: @HIDEBUTTON																												

1662	co_monitor_chw_cbt_gl5 Show the field ONLY if: [co_chw_cbt_gl5] = '1'	CO Monitor ID	radio, Required <table><tr><td>1</td><td>A</td></tr><tr><td>2</td><td>B</td></tr><tr><td>3</td><td>C</td></tr><tr><td>4</td><td>D</td></tr><tr><td>5</td><td>E</td></tr><tr><td>6</td><td>F</td></tr><tr><td>7</td><td>G</td></tr><tr><td>8</td><td>H</td></tr><tr><td>9</td><td>I</td></tr><tr><td>10</td><td>J</td></tr><tr><td>11</td><td>K</td></tr><tr><td>12</td><td>L</td></tr><tr><td>13</td><td>M</td></tr><tr><td>14</td><td>N</td></tr><tr><td>15</td><td>O</td></tr><tr><td>16</td><td>P</td></tr></table>	1	A	2	B	3	C	4	D	5	E	6	F	7	G	8	H	9	I	10	J	11	K	12	L	13	M	14	N	15	O	16	P										
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1663	topics_cbt_gl5	Groups main topics	checkbox, Required <table><tr><td>1</td><td>topics_cbt_gl5__1</td><td>CO and smoking</td></tr><tr><td>2</td><td>topics_cbt_gl5__2</td><td>Smoking triggers, pack wraps</td></tr><tr><td>3</td><td>topics_cbt_gl5__3</td><td>Reasons to quit smoking</td></tr><tr><td>4</td><td>topics_cbt_gl5__4</td><td>Withdrawal symptoms</td></tr><tr><td>5</td><td>topics_cbt_gl5__5</td><td>Things to do instead of smoking, the 4Ds</td></tr><tr><td>6</td><td>topics_cbt_gl5__6</td><td>Preparing for the Quit day</td></tr><tr><td>7</td><td>topics_cbt_gl5__7</td><td>Pros and cons of quitting smoking</td></tr><tr><td>8</td><td>topics_cbt_gl5__8</td><td>High risk situations</td></tr><tr><td>9</td><td>topics_cbt_gl5__9</td><td>Problem solving</td></tr><tr><td>10</td><td>topics_cbt_gl5__10</td><td>Dealing with stress, boredom</td></tr><tr><td>11</td><td>topics_cbt_gl5__11</td><td>Dealing with weight gain</td></tr><tr><td>12</td><td>topics_cbt_gl5__12</td><td>Dealing with slips</td></tr><tr><td>13</td><td>topics_cbt_gl5__13</td><td>Mini Quit</td></tr><tr><td>14</td><td>topics_cbt_gl5__14</td><td>Smoking Cessation Medications</td></tr></table>	1	topics_cbt_gl5__1	CO and smoking	2	topics_cbt_gl5__2	Smoking triggers, pack wraps	3	topics_cbt_gl5__3	Reasons to quit smoking	4	topics_cbt_gl5__4	Withdrawal symptoms	5	topics_cbt_gl5__5	Things to do instead of smoking, the 4Ds	6	topics_cbt_gl5__6	Preparing for the Quit day	7	topics_cbt_gl5__7	Pros and cons of quitting smoking	8	topics_cbt_gl5__8	High risk situations	9	topics_cbt_gl5__9	Problem solving	10	topics_cbt_gl5__10	Dealing with stress, boredom	11	topics_cbt_gl5__11	Dealing with weight gain	12	topics_cbt_gl5__12	Dealing with slips	13	topics_cbt_gl5__13	Mini Quit	14	topics_cbt_gl5__14	Smoking Cessation Medications
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1665	notes_cbt_gl5	Notes	notes Custom alignment: LH																																										
1666	smoking_status_chw_cbt_gl5	Today, participant is (refer to most recent prior report to make this determination)	radio, Required <table><tr><td>1</td><td>smoking</td></tr><tr><td>2</td><td>Quit for at least 24 hours</td></tr><tr><td>3</td><td>Quit for 7 days (but less than 14 days)</td></tr><tr><td>4</td><td>Quit for 14 days (but less than 4 weeks)</td></tr><tr><td>5</td><td>Quit for 4 weeks or more</td></tr></table>	1	smoking	2	Quit for at least 24 hours	3	Quit for 7 days (but less than 14 days)	4	Quit for 14 days (but less than 4 weeks)	5	Quit for 4 weeks or more																																
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1667	reasons_quit_chw_cbt_gl5	REASONS TO QUIT (for example: "Client wants to quit because her daughter is expecting twins in August")	notes Custom alignment: LH																																										
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1670	session_plans_chw_cbt_gl5	Plans made in session (for example: "Client will do a jigsaw puzzle to keep her mind off of smoking")	notes Custom alignment: LH																																										

1671	treatment_pat_chw_cbt_gl5	Pharmacotherapy: is the participant on any smoking cessation treatment?	checkbox <table border="1"> <tr> <td>1</td> <td>treatment_pat_chw_cbt_gl5__1</td> <td>Varenicline (i.e. Chantix)</td> </tr> <tr> <td>2</td> <td>treatment_pat_chw_cbt_gl5__2</td> <td>Nicotine patch</td> </tr> <tr> <td>3</td> <td>treatment_pat_chw_cbt_gl5__3</td> <td>Bupropion (i.e. Wellbutrin, Zyban)</td> </tr> <tr> <td>4</td> <td>treatment_pat_chw_cbt_gl5__4</td> <td>Nicotine gum</td> </tr> <tr> <td>5</td> <td>treatment_pat_chw_cbt_gl5__5</td> <td>Nicotine lozenge</td> </tr> <tr> <td>6</td> <td>treatment_pat_chw_cbt_gl5__6</td> <td>Other</td> </tr> <tr> <td>7</td> <td>treatment_pat_chw_cbt_gl5__7</td> <td>No treatment</td> </tr> </table>	1	treatment_pat_chw_cbt_gl5__1	Varenicline (i.e. Chantix)	2	treatment_pat_chw_cbt_gl5__2	Nicotine patch	3	treatment_pat_chw_cbt_gl5__3	Bupropion (i.e. Wellbutrin, Zyban)	4	treatment_pat_chw_cbt_gl5__4	Nicotine gum	5	treatment_pat_chw_cbt_gl5__5	Nicotine lozenge	6	treatment_pat_chw_cbt_gl5__6	Other	7	treatment_pat_chw_cbt_gl5__7	No treatment					
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1672	other_treat_pat_chw_cbt_gl5 Show the field ONLY if: [treatment_pat_chw_cbt_gl5(6)] = '1'	Other treatment	text, Required																										
1673	dose_treat_pat_chw_cbt_gl5	Dose(s)	notes																										
1674	treat_start_pat_chw_cbt_gl5	start date	text (date_mdy)																										
1675	reimb_cbt_chw_gl5	Did the participant receive \$5 for his/her participation in the smoking group?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No																						
1	Yes																												
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1676	notes_cbt_chw_gl5	Notes	notes Custom alignment: LH																										
1677	names_chw_cbt_gl5	CHW	radio, Required <table border="1"> <tr><td>1</td><td>Alexandra Fortune</td></tr> <tr><td>2</td><td>Ashley Newman</td></tr> <tr><td>3</td><td>Aysha Peralta</td></tr> <tr><td>4</td><td>Erin Hanrahan</td></tr> <tr><td>5</td><td>John Dowd</td></tr> <tr><td>6</td><td>Karlie Marrs</td></tr> <tr><td>7</td><td>Leeza Rojas</td></tr> <tr><td>8</td><td>Madalyn Davis</td></tr> <tr><td>9</td><td>Madeleine Fontaine</td></tr> <tr><td>10</td><td>Megan Donnelly</td></tr> <tr><td>11</td><td>Morgan Boudreau</td></tr> <tr><td>12</td><td>Nina Cherilus</td></tr> <tr><td>13</td><td>Carlos Taveras</td></tr> </table>	1	Alexandra Fortune	2	Ashley Newman	3	Aysha Peralta	4	Erin Hanrahan	5	John Dowd	6	Karlie Marrs	7	Leeza Rojas	8	Madalyn Davis	9	Madeleine Fontaine	10	Megan Donnelly	11	Morgan Boudreau	12	Nina Cherilus	13	Carlos Taveras
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1678	comments_chw_cbt_gl5	Comments	notes																										
1679	groups_level_5_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																				
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Instrument: Groups Level 6 (groups_level_6)			^ Collapse																										
1680	date_1_chw_cbt_gl6	Date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																										
1681	location_chw_cbt_gl6	Location of Meeting	radio, Required <table border="1"> <tr><td>1</td><td>Group home</td></tr> <tr><td>2</td><td>MGH</td></tr> <tr><td>3</td><td>Library</td></tr> <tr><td>4</td><td>Church</td></tr> <tr><td>5</td><td>Agency</td></tr> <tr><td>6</td><td>Other</td></tr> </table>	1	Group home	2	MGH	3	Library	4	Church	5	Agency	6	Other														
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1682	other_location_chw_cbt_gl6 Show the field ONLY if: [location_chw_cbt_gl6] = '6'	Other location	text, Required																										

1683	location_name_chw_cbt_gl6	Name of the location	radio, Required <table border="1"> <tr><td>1</td><td>MMH</td></tr> <tr><td>2</td><td>153 South Street</td></tr> <tr><td>3</td><td>Paul Sullivan Housing (151 Geneva)</td></tr> <tr><td>4</td><td>TOB (1500 Dorchester)</td></tr> <tr><td>5</td><td>DMH Lowell</td></tr> <tr><td>6</td><td>Gill Wellness Center</td></tr> <tr><td>7</td><td>DMH Lawrence</td></tr> <tr><td>8</td><td>Pentucket Medical-Haverhill</td></tr> <tr><td>9</td><td>Other</td></tr> <tr><td>10</td><td>CAM</td></tr> </table>	1	MMH	2	153 South Street	3	Paul Sullivan Housing (151 Geneva)	4	TOB (1500 Dorchester)	5	DMH Lowell	6	Gill Wellness Center	7	DMH Lawrence	8	Pentucket Medical-Haverhill	9	Other	10	CAM								
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1684	other_name_loc_chw_cbt_gl6 Show the field ONLY if: [location_name_chw_cbt_gl6] = '9	Other location	text, Required																												
1685	group_track_cbt_gl6	Group Track	radio, Required <table border="1"> <tr><td>1</td><td>Motivational Enhancement</td></tr> <tr><td>2</td><td>Cessation</td></tr> <tr><td>3</td><td>Relapse prevention</td></tr> </table>	1	Motivational Enhancement	2	Cessation	3	Relapse prevention																						
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1686	group_number_cbt_gl6	Group Number	radio, Required <table border="1"> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td></tr> <tr><td>3</td><td>3</td></tr> <tr><td>4</td><td>4</td></tr> <tr><td>5</td><td>5</td></tr> <tr><td>6</td><td>6</td></tr> <tr><td>7</td><td>7</td></tr> <tr><td>8</td><td>8</td></tr> <tr><td>9</td><td>9</td></tr> <tr><td>10</td><td>10</td></tr> <tr><td>11</td><td>11</td></tr> <tr><td>12</td><td>12</td></tr> <tr><td>13</td><td>13</td></tr> <tr><td>14</td><td>14</td></tr> </table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14
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1687	start_time_chw_cbt_gl6	Meeting Start Time	text (time), Required																												
1688	end_time_chw_cbt_gl6	Meeting End Time	text (time), Required																												
1689	cigs_today_chw_cbt_gl6	Total number of cigarettes smoked today	text, Required																												
1690	cigs_yesterday_chw_cbt_gl6	Total number cigarettes smoked yesterday	text, Required																												
1691	cpd_last_week_cbt_gl6	Total number of cigarettes smoked in the last week	text, Required																												
1692	date_last_group_cbt_gl6	If participant didn't attend group last week, enter the date of last group	text (date_mdy) Field Annotation: @HIDEBUTTON																												
1693	cigs_since_last_chw_cbt_gl6	If participant didn't attend group last week, enter the total number of cigarettes smoked since the last group. (for example, if last group attended was 21 days ago and participant smoked 10 cpd, the amount to be enter here should be 210)	text																												
1694	last_cig_chw_cbt_gl6	Time since last cigarette	text, Required																												
1695	time_last_cig_units_cbt_gl6		radio, Required <table border="1"> <tr><td>1</td><td>minutes</td></tr> <tr><td>2</td><td>hours</td></tr> <tr><td>3</td><td>days</td></tr> <tr><td>4</td><td>weeks</td></tr> <tr><td>5</td><td>months</td></tr> </table> Custom alignment: LH	1	minutes	2	hours	3	days	4	weeks	5	months																		
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1696	co_chw_cbt_gl6	Was CO testing completed today?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																																						
1	Yes																																												
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1697	co_number_chw_cbt_gl6 Show the field ONLY if: [co_chw_cbt_gl6] = '1'	Expired CO reading (ppm)	text, Required																																										
1698	time_co_chw_cbt_gl6 Show the field ONLY if: [co_chw_cbt_gl6] = '1'	Date of CO reading	text (date_mdy), Required Field Annotation: @HIDEBUTTON																																										
1699	hour_co_chw_cbt_gl6 Show the field ONLY if: [co_chw_cbt_gl6] = '1'	Time of CO reading	text (time), Required Field Annotation: @HIDEBUTTON																																										
1700	co_monitor_chw_cbt_gl6 Show the field ONLY if: [co_chw_cbt_gl6] = '1'	CO Monitor ID	radio, Required <table><tr><td>1</td><td>A</td></tr><tr><td>2</td><td>B</td></tr><tr><td>3</td><td>C</td></tr><tr><td>4</td><td>D</td></tr><tr><td>5</td><td>E</td></tr><tr><td>6</td><td>F</td></tr><tr><td>7</td><td>G</td></tr><tr><td>8</td><td>H</td></tr><tr><td>9</td><td>I</td></tr><tr><td>10</td><td>J</td></tr><tr><td>11</td><td>K</td></tr><tr><td>12</td><td>L</td></tr><tr><td>13</td><td>M</td></tr><tr><td>14</td><td>N</td></tr><tr><td>15</td><td>O</td></tr><tr><td>16</td><td>P</td></tr></table>	1	A	2	B	3	C	4	D	5	E	6	F	7	G	8	H	9	I	10	J	11	K	12	L	13	M	14	N	15	O	16	P										
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1703	notes_cbt_gl6	Notes	notes Custom alignment: LH																																										

1704	smoking_status_chw_cbt_gl6	Today, participant is (refer to most recent prior report to make this determination)	radio, Required <table border="1"> <tr><td>1</td><td>smoking</td></tr> <tr><td>2</td><td>Quit for at least 24 hours</td></tr> <tr><td>3</td><td>Quit for 7 days (but less than 14 days)</td></tr> <tr><td>4</td><td>Quit for 14 days (but less than 4 weeks)</td></tr> <tr><td>5</td><td>Quit for 4 weeks or more</td></tr> </table>	1	smoking	2	Quit for at least 24 hours	3	Quit for 7 days (but less than 14 days)	4	Quit for 14 days (but less than 4 weeks)	5	Quit for 4 weeks or more																
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1707	session_info_chw_cbt_gl6	Information relevant to today's session (for example "Client related to boredom as a trigger; notes he does not think about smoking while at day program")	notes Custom alignment: LH																										
1708	session_plans_chw_cbt_gl6	Plans made in session (for example: "Client will do a jigsaw puzzle to keep her mind off of smoking")	notes Custom alignment: LH																										
1709	treatment_pat_chw_cbt_gl6	Pharmacotherapy: is the participant on any smoking cessation treatment?	checkbox <table border="1"> <tr><td>1</td><td>treatment_pat_chw_cbt_gl6__1</td><td>Varenicline (i.e. Chantix)</td></tr> <tr><td>2</td><td>treatment_pat_chw_cbt_gl6__2</td><td>Nicotine patch</td></tr> <tr><td>3</td><td>treatment_pat_chw_cbt_gl6__3</td><td>Bupropion (i.e. Wellbutrin, Zyban)</td></tr> <tr><td>4</td><td>treatment_pat_chw_cbt_gl6__4</td><td>Nicotine gum</td></tr> <tr><td>5</td><td>treatment_pat_chw_cbt_gl6__5</td><td>Nicotine lozenge</td></tr> <tr><td>6</td><td>treatment_pat_chw_cbt_gl6__6</td><td>Other</td></tr> <tr><td>7</td><td>treatment_pat_chw_cbt_gl6__7</td><td>No treatment</td></tr> </table>	1	treatment_pat_chw_cbt_gl6__1	Varenicline (i.e. Chantix)	2	treatment_pat_chw_cbt_gl6__2	Nicotine patch	3	treatment_pat_chw_cbt_gl6__3	Bupropion (i.e. Wellbutrin, Zyban)	4	treatment_pat_chw_cbt_gl6__4	Nicotine gum	5	treatment_pat_chw_cbt_gl6__5	Nicotine lozenge	6	treatment_pat_chw_cbt_gl6__6	Other	7	treatment_pat_chw_cbt_gl6__7	No treatment					
1	treatment_pat_chw_cbt_gl6__1	Varenicline (i.e. Chantix)																											
2	treatment_pat_chw_cbt_gl6__2	Nicotine patch																											
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6	treatment_pat_chw_cbt_gl6__6	Other																											
7	treatment_pat_chw_cbt_gl6__7	No treatment																											
1710	other_treat_pat_chw_cbt_gl6 Show the field ONLY if: [treatment_pat_chw_cbt_gl6(6)] = '1'	Other treatment	text, Required																										
1711	dose_treat_pat_chw_cbt_gl6	Dose(s)	notes																										
1712	treat_start_pat_chw_cbt_gl6	start date	text (date_mdy)																										
1713	reimb_cbt_chw_gl6	Did the participant receive \$5 for his/her participation in the smoking group?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																						
1	Yes																												
0	No																												
1714	notes_cbt_chw_gl6	Notes	notes Custom alignment: LH																										
1715	names_chw_cbt_gl6	CHW	radio, Required <table border="1"> <tr><td>1</td><td>Alexandra Fortune</td></tr> <tr><td>2</td><td>Ashley Newman</td></tr> <tr><td>3</td><td>Aysha Peralta</td></tr> <tr><td>4</td><td>Erin Hanrahan</td></tr> <tr><td>5</td><td>John Dowd</td></tr> <tr><td>6</td><td>Karlie Marrs</td></tr> <tr><td>7</td><td>Leeza Rojas</td></tr> <tr><td>8</td><td>Madalyn Davis</td></tr> <tr><td>9</td><td>Madeleine Fontaine</td></tr> <tr><td>10</td><td>Megan Donnelly</td></tr> <tr><td>11</td><td>Morgan Boudreau</td></tr> <tr><td>12</td><td>Nina Cherilus</td></tr> <tr><td>13</td><td>Carlos Taveras</td></tr> </table>	1	Alexandra Fortune	2	Ashley Newman	3	Aysha Peralta	4	Erin Hanrahan	5	John Dowd	6	Karlie Marrs	7	Leeza Rojas	8	Madalyn Davis	9	Madeleine Fontaine	10	Megan Donnelly	11	Morgan Boudreau	12	Nina Cherilus	13	Carlos Taveras
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13	Carlos Taveras																												
1716	comments_chw_cbt_gl6	Comments	notes																										
1717	groups_level_6_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																				
0	Incomplete																												
1	Unverified																												
2	Complete																												

Instrument: Contact Sheet All Visits CHW 81_100 (contact_sheet_all_visits_chw_81_100) ^ Collapse																					
1718	date_all_visits_chw_g234_g2345	Visit Date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																		
1719	start_all_visits_chw_g234_g2345	Start time	text (time), Required																		
1720	end_all_visits_chw_g234_g2345	End time	text (time), Required																		
1721	visit_modality_chw_g234_g2345	Visit modality	radio, Required <table border="1"> <tr> <td>1</td> <td>Phone visit</td> </tr> <tr> <td>2</td> <td>In person visit</td> </tr> </table>	1	Phone visit	2	In person visit														
1	Phone visit																				
2	In person visit																				
1722	reason_phone_chw_g234_g2345 Show the field ONLY if: [visit_modality_chw_g234_g2345] = '1'	Reasons for the phone visit (select all that apply)	checkbox, Required <table border="1"> <tr> <td>1</td> <td>reason_phone_chw_g234_g2345__1</td> <td>Help preparing for quit day</td> </tr> <tr> <td>2</td> <td>reason_phone_chw_g234_g2345__2</td> <td>Quit day</td> </tr> <tr> <td>3</td> <td>reason_phone_chw_g234_g2345__3</td> <td>Check for withdrawal symptoms</td> </tr> <tr> <td>4</td> <td>reason_phone_chw_g234_g2345__4</td> <td>Medication compliance/side effects</td> </tr> <tr> <td>5</td> <td>reason_phone_chw_g234_g2345__5</td> <td>Other</td> </tr> </table>	1	reason_phone_chw_g234_g2345__1	Help preparing for quit day	2	reason_phone_chw_g234_g2345__2	Quit day	3	reason_phone_chw_g234_g2345__3	Check for withdrawal symptoms	4	reason_phone_chw_g234_g2345__4	Medication compliance/side effects	5	reason_phone_chw_g234_g2345__5	Other			
1	reason_phone_chw_g234_g2345__1	Help preparing for quit day																			
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3	reason_phone_chw_g234_g2345__3	Check for withdrawal symptoms																			
4	reason_phone_chw_g234_g2345__4	Medication compliance/side effects																			
5	reason_phone_chw_g234_g2345__5	Other																			
1723	other_reason_phone_chw_g234_g2345 Show the field ONLY if: [reason_phone_chw_g234_g2345(5)] = '1'	Other reason for a phone visit	text, Required																		
1724	reasons_contact_chw_g234_g2345 Show the field ONLY if: [visit_modality_chw_g234_g2345] = '2'	Reasons for In Person meeting (select all that apply)	checkbox, Required <table border="1"> <tr> <td>1</td> <td>reasons_contact_chw_g234_g2345__1</td> <td>Initial visit/obtain consent</td> </tr> <tr> <td>2</td> <td>reasons_contact_chw_g234_g2345__2</td> <td>Intervention visit</td> </tr> <tr> <td>3</td> <td>reasons_contact_chw_g234_g2345__3</td> <td>Taking participant to smoking group</td> </tr> <tr> <td>4</td> <td>reasons_contact_chw_g234_g2345__4</td> <td>Taking participant to PCP</td> </tr> <tr> <td>5</td> <td>reasons_contact_chw_g234_g2345__5</td> <td>Other</td> </tr> <tr> <td>6</td> <td>reasons_contact_chw_g234_g2345__6</td> <td>Medication compliance/side effects</td> </tr> </table>	1	reasons_contact_chw_g234_g2345__1	Initial visit/obtain consent	2	reasons_contact_chw_g234_g2345__2	Intervention visit	3	reasons_contact_chw_g234_g2345__3	Taking participant to smoking group	4	reasons_contact_chw_g234_g2345__4	Taking participant to PCP	5	reasons_contact_chw_g234_g2345__5	Other	6	reasons_contact_chw_g234_g2345__6	Medication compliance/side effects
1	reasons_contact_chw_g234_g2345__1	Initial visit/obtain consent																			
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3	reasons_contact_chw_g234_g2345__3	Taking participant to smoking group																			
4	reasons_contact_chw_g234_g2345__4	Taking participant to PCP																			
5	reasons_contact_chw_g234_g2345__5	Other																			
6	reasons_contact_chw_g234_g2345__6	Medication compliance/side effects																			
1725	other_reason_contact_chw_g234_g2345 Show the field ONLY if: [reasons_contact_chw_g234_g2345(5)] = '1'	Other reason for an In Person Meeting	text, Required																		
1726	smoking_chw_g234_g2345	Section Header: <i>Smoking Behavior</i> Has the participant smoked in the past 7 days?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
1727	notes1_chw_g234_g2345	Notes	notes Custom alignment: RH																		
1728	tobacco_prod_chw_g234_g2345	Which tobacco products does the participant currently smoke? (I.e. Cigarettes, Cigars, Cigarillos, Rollies, Mini Cigars, Pipe) Select all that apply	checkbox <table border="1"> <tr> <td>1</td> <td>tobacco_prod_chw_g234_g2345__1</td> <td>Cigarettes</td> </tr> <tr> <td>2</td> <td>tobacco_prod_chw_g234_g2345__2</td> <td>Mini cigars (i.e. double diamonds)</td> </tr> <tr> <td>3</td> <td>tobacco_prod_chw_g234_g2345__3</td> <td>loose tobacco (roll your own, rollies)</td> </tr> <tr> <td>4</td> <td>tobacco_prod_chw_g234_g2345__4</td> <td>e-cigarettes/vaping</td> </tr> <tr> <td>5</td> <td>tobacco_prod_chw_g234_g2345__5</td> <td>Other</td> </tr> <tr> <td>6</td> <td>tobacco_prod_chw_g234_g2345__6</td> <td>Quit smoking</td> </tr> </table>	1	tobacco_prod_chw_g234_g2345__1	Cigarettes	2	tobacco_prod_chw_g234_g2345__2	Mini cigars (i.e. double diamonds)	3	tobacco_prod_chw_g234_g2345__3	loose tobacco (roll your own, rollies)	4	tobacco_prod_chw_g234_g2345__4	e-cigarettes/vaping	5	tobacco_prod_chw_g234_g2345__5	Other	6	tobacco_prod_chw_g234_g2345__6	Quit smoking
1	tobacco_prod_chw_g234_g2345__1	Cigarettes																			
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5	tobacco_prod_chw_g234_g2345__5	Other																			
6	tobacco_prod_chw_g234_g2345__6	Quit smoking																			

1729	cpd_chw_g234_g2345 Show the field ONLY if: [smoking_chw_g234_g2345] = '1'	On average, how many cigarettes (or other tobacco product) per day has the participant smoked in past 7 days?	text (integer), Required												
1730	cpd_non_daily_chw_g234_g2345	COMPLETE ONLY IF PARTICIPANT HASN'T BEEN SMOKING EVERY DAY DURING THE PAST WEEK On average, how many cigarettes (or other tobacco product) per WEEK has the participant smoked in past week?	text												
1731	last_cigarette_chw_g234_g2345 Show the field ONLY if: [smoking_chw_g234_g2345] = '1' or [smoking_chw_g234_g2345] = '0'	Time of last cigarette (or other tobacco product)	text (datetime_mdy), Required Custom alignment: RH Field Annotation: @HIDEBUTTON												
1732	pat_co_done_chw_g234_g2345 Show the field ONLY if: [visit_modality_chw_g234_g2345] = '2'	Was CO testing completed today?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No								
1	Yes														
0	No														
1733	pat_yes_co_chw_g234_g2345 Show the field ONLY if: [pat_co_done_chw_g234_g2345] = '1'	Reasons for CO measurement	checkbox, Required <table><tr><td>1</td><td>pat_yes_co_chw_g234_g2345__1</td><td>Last CO month was done over a month ago</td></tr><tr><td>2</td><td>pat_yes_co_chw_g234_g2345__2</td><td>Participant changed smoking behavior after last CO measurement (quit or relapsed)</td></tr><tr><td>3</td><td>pat_yes_co_chw_g234_g2345__3</td><td>Participant asked for it</td></tr><tr><td>4</td><td>pat_yes_co_chw_g234_g2345__4</td><td>Other</td></tr></table>	1	pat_yes_co_chw_g234_g2345__1	Last CO month was done over a month ago	2	pat_yes_co_chw_g234_g2345__2	Participant changed smoking behavior after last CO measurement (quit or relapsed)	3	pat_yes_co_chw_g234_g2345__3	Participant asked for it	4	pat_yes_co_chw_g234_g2345__4	Other
1	pat_yes_co_chw_g234_g2345__1	Last CO month was done over a month ago													
2	pat_yes_co_chw_g234_g2345__2	Participant changed smoking behavior after last CO measurement (quit or relapsed)													
3	pat_yes_co_chw_g234_g2345__3	Participant asked for it													
4	pat_yes_co_chw_g234_g2345__4	Other													
1734	pat_other_co_chw_g234_g2345 Show the field ONLY if: [pat_yes_co_chw_g234_g2345(4)] = '1'	Other	text, Required												
1735	expired_co_chw_g234_g2345 Show the field ONLY if: [pat_co_done_chw_g234_g2345] = '1'	Expired CO reading (ppm)	text (integer, Min: 0, Max: 100), Required												
1736	time_co_chw_g234_g2345 Show the field ONLY if: [pat_co_done_chw_g234_g2345] = '1'	Date of CO reading	text (date_mdy), Required Field Annotation: @HIDEBUTTON												
1737	hour_co_chw_g234_g2345 Show the field ONLY if: [pat_co_done_chw_g234_g2345] = '1'	Time of CO reading	text (time), Required												

1738	co_monitor_chw_g234_g2345 Show the field ONLY if: [pat_co_done_chw_g234_g2345] = '1'	CO Monitor ID	radio, Required <table><tr><td>1</td><td>A</td></tr><tr><td>2</td><td>B</td></tr><tr><td>3</td><td>C</td></tr><tr><td>4</td><td>D</td></tr><tr><td>5</td><td>E</td></tr><tr><td>6</td><td>F</td></tr><tr><td>7</td><td>G</td></tr><tr><td>8</td><td>H</td></tr><tr><td>9</td><td>I</td></tr><tr><td>10</td><td>J</td></tr><tr><td>11</td><td>K</td></tr><tr><td>12</td><td>L</td></tr><tr><td>13</td><td>M</td></tr><tr><td>14</td><td>N</td></tr><tr><td>15</td><td>O</td></tr><tr><td>16</td><td>P</td></tr></table> Custom alignment: RH	1	A	2	B	3	C	4	D	5	E	6	F	7	G	8	H	9	I	10	J	11	K	12	L	13	M	14	N	15	O	16	P
1	A																																		
2	B																																		
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13	M																																		
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15	O																																		
16	P																																		
1739	co_exec_chw_g234_g2345 Show the field ONLY if: [pat_co_done_chw_g234_g2345] = '1'	Was CO measuring executed properly?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																												
1	Yes																																		
0	No																																		
1740	pat_no_co_chw_g234_g2345 Show the field ONLY if: [pat_co_done_chw_g234_g2345] = '0'	Reasons for NO CO measurement	checkbox, Required <table><tr><td>1</td><td>pat_no_co_chw_g234_g2345__1</td><td>CO was done within the past month and there was no change in smoking behavior</td></tr><tr><td>2</td><td>pat_no_co_chw_g234_g2345__2</td><td>Participant refused</td></tr><tr><td>3</td><td>pat_no_co_chw_g234_g2345__3</td><td>Participant unable (respiratory illness, symptomatic)</td></tr><tr><td>4</td><td>pat_no_co_chw_g234_g2345__4</td><td>Other</td></tr></table>	1	pat_no_co_chw_g234_g2345__1	CO was done within the past month and there was no change in smoking behavior	2	pat_no_co_chw_g234_g2345__2	Participant refused	3	pat_no_co_chw_g234_g2345__3	Participant unable (respiratory illness, symptomatic)	4	pat_no_co_chw_g234_g2345__4	Other																				
1	pat_no_co_chw_g234_g2345__1	CO was done within the past month and there was no change in smoking behavior																																	
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1741	other_no_co_chw_g234_g2345 Show the field ONLY if: [pat_no_co_chw_g234_g2345(4)] = '1'	Other	text, Required																																
1742	notes_co_chw_g234_g2345	Notes	notes Custom alignment: RH																																
1743	seen_by_pcp_chw_g234_g2345 Show the field ONLY if: [visit_modality_chw_g234_g2345] = '2'	Was subject seen by primary care team since last meeting?	radio, Required <table><tr><td>1</td><td>None scheduled</td></tr><tr><td>2</td><td>No, missed visit</td></tr><tr><td>3</td><td>Yes, smoking discussed</td></tr><tr><td>4</td><td>Yes, smoking not discussed</td></tr><tr><td>5</td><td>Unknown</td></tr></table>	1	None scheduled	2	No, missed visit	3	Yes, smoking discussed	4	Yes, smoking not discussed	5	Unknown																						
1	None scheduled																																		
2	No, missed visit																																		
3	Yes, smoking discussed																																		
4	Yes, smoking not discussed																																		
5	Unknown																																		
1744	pcp_recommend_pat_chw_g234_g2345 Show the field ONLY if: [seen_by_pcp_chw_g234_g2345] = '3'	Did the PCP recommend that the participant quit smoking?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																												
1	Yes																																		
0	No																																		
1745	pcp_prescribed_pat_chw_g234_g2345 Show the field ONLY if: [seen_by_pcp_chw_g234_g2345] = '3'	Did PCP prescribe smoking cessation medication?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																												
1	Yes																																		
0	No																																		

1746	pat_what_prescribed_chw_g234_g2345 Show the field ONLY if: [pcp_prescribed_pat_chw_g234_g2345] = '1' or [reason_phone_chw_g234_g2345(4)] = '1'	What did the PCP prescribe?	checkbox, Required <table border="1"> <tr> <td>1</td> <td>pat_what_prescribed_chw_g234_g2345__1</td> <td>Varenicline (i.e. Chantix)</td> </tr> <tr> <td>2</td> <td>pat_what_prescribed_chw_g234_g2345__2</td> <td>Nicotine patch</td> </tr> <tr> <td>3</td> <td>pat_what_prescribed_chw_g234_g2345__3</td> <td>Bupropion (i.e. Wellbutrin, Zyban)</td> </tr> <tr> <td>4</td> <td>pat_what_prescribed_chw_g234_g2345__4</td> <td>Nicotine gum</td> </tr> <tr> <td>5</td> <td>pat_what_prescribed_chw_g234_g2345__5</td> <td>Nicotine lozenge</td> </tr> <tr> <td>6</td> <td>pat_what_prescribed_chw_g234_g2345__6</td> <td>Other</td> </tr> </table>	1	pat_what_prescribed_chw_g234_g2345__1	Varenicline (i.e. Chantix)	2	pat_what_prescribed_chw_g234_g2345__2	Nicotine patch	3	pat_what_prescribed_chw_g234_g2345__3	Bupropion (i.e. Wellbutrin, Zyban)	4	pat_what_prescribed_chw_g234_g2345__4	Nicotine gum	5	pat_what_prescribed_chw_g234_g2345__5	Nicotine lozenge	6	pat_what_prescribed_chw_g234_g2345__6	Other
1	pat_what_prescribed_chw_g234_g2345__1	Varenicline (i.e. Chantix)																			
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5	pat_what_prescribed_chw_g234_g2345__5	Nicotine lozenge																			
6	pat_what_prescribed_chw_g234_g2345__6	Other																			
1747	other_prescribed_chw_g234_g2345 Show the field ONLY if: [pat_what_prescribed_chw_g234_g2345(6)] = '1'	Other	text, Required																		
1748	pat_filled_med_chw_g234_g2345 Show the field ONLY if: [pcp_prescribed_pat_chw_g234_g2345] = '1' or [reason_phone_chw_g234_g2345(4)] = '1'	Did the participant fill the prescription for the smoking cessation medication?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
1749	pat_what_taking_chw_g234_g2345 Show the field ONLY if: [pcp_prescribed_pat_chw_g234_g2345] = '1' or [reason_phone_chw_g234_g2345(4)] = '1' or [reasons_contact_chw_g234_g2345(6)] = '1'	What is the participant taking?	checkbox, Required <table border="1"> <tr> <td>1</td> <td>pat_what_taking_chw_g234_g2345__1</td> <td>Varenicline (i.e. Chantix)</td> </tr> <tr> <td>2</td> <td>pat_what_taking_chw_g234_g2345__2</td> <td>Nicotine patch</td> </tr> <tr> <td>3</td> <td>pat_what_taking_chw_g234_g2345__3</td> <td>Bupropion (i.e. Wellbutrin, Zyban)</td> </tr> <tr> <td>4</td> <td>pat_what_taking_chw_g234_g2345__4</td> <td>Nicotine gum</td> </tr> <tr> <td>5</td> <td>pat_what_taking_chw_g234_g2345__5</td> <td>Nicotine lozenge</td> </tr> <tr> <td>6</td> <td>pat_what_taking_chw_g234_g2345__6</td> <td>Other</td> </tr> </table>	1	pat_what_taking_chw_g234_g2345__1	Varenicline (i.e. Chantix)	2	pat_what_taking_chw_g234_g2345__2	Nicotine patch	3	pat_what_taking_chw_g234_g2345__3	Bupropion (i.e. Wellbutrin, Zyban)	4	pat_what_taking_chw_g234_g2345__4	Nicotine gum	5	pat_what_taking_chw_g234_g2345__5	Nicotine lozenge	6	pat_what_taking_chw_g234_g2345__6	Other
1	pat_what_taking_chw_g234_g2345__1	Varenicline (i.e. Chantix)																			
2	pat_what_taking_chw_g234_g2345__2	Nicotine patch																			
3	pat_what_taking_chw_g234_g2345__3	Bupropion (i.e. Wellbutrin, Zyban)																			
4	pat_what_taking_chw_g234_g2345__4	Nicotine gum																			
5	pat_what_taking_chw_g234_g2345__5	Nicotine lozenge																			
6	pat_what_taking_chw_g234_g2345__6	Other																			
1750	pat_other_med_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(6)] = '1'	Other	text, Required																		
1751	pat_var_dose_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(1)] = '1'	Varenicline (Chantix) Dose	radio, Required <table border="1"> <tr> <td>1</td> <td>0.5 mg once a day</td> </tr> <tr> <td>2</td> <td>0.5 mg twice a day</td> </tr> <tr> <td>3</td> <td>1 mg once a day</td> </tr> <tr> <td>4</td> <td>1 mg twice a day</td> </tr> <tr> <td>5</td> <td>Other</td> </tr> </table>	1	0.5 mg once a day	2	0.5 mg twice a day	3	1 mg once a day	4	1 mg twice a day	5	Other								
1	0.5 mg once a day																				
2	0.5 mg twice a day																				
3	1 mg once a day																				
4	1 mg twice a day																				
5	Other																				
1752	pat_var_other_dose_chw_g234_g2345 Show the field ONLY if: [pat_var_dose_chw_g234_g2345] = '5'	Other Dose	text, Required																		
1753	pat_var_start_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(1)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																		

1754	pat_7days_var_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(1)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
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2	2																
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4	4																
5	5																
6	6																
7	7																
1755	var_still_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(1)] = '1'	Is participant still taking Varenicline?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1756	pat_var_end_chw_g234_g2345 Show the field ONLY if: [var_still_chw_g234_g2345] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1757	pat_bup_dose_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(3)] = '1'	Bupropion (Wellbutrin, Zyban) dose	radio, Required <table><tr><td>1</td><td>150 mg once a day</td></tr><tr><td>2</td><td>150 mg twice a day</td></tr><tr><td>3</td><td>Other</td></tr></table>	1	150 mg once a day	2	150 mg twice a day	3	Other								
1	150 mg once a day																
2	150 mg twice a day																
3	Other																
1758	pat_bup_other_dose_chw_g234_g2345 Show the field ONLY if: [pat_bup_dose_chw_g234_g2345] = '3'	Other Dose	text, Required														
1759	pat_bup_start_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(3)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1760	pat_7days_bup_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(3)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
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4	4																
5	5																
6	6																
7	7																
1761	bup_still_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(3)] = '1'	Is participant still taking Bupropion?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1762	pat_bup_end_chw_g234_g2345 Show the field ONLY if: [bup_still_chw_g234_g2345] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1763	pat_patch_dose_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(2)] = '1'	Nicotine patch dose	radio, Required <table><tr><td>1</td><td>21 mg</td></tr><tr><td>2</td><td>14 mg</td></tr><tr><td>3</td><td>7 mg</td></tr><tr><td>4</td><td>Other</td></tr></table>	1	21 mg	2	14 mg	3	7 mg	4	Other						
1	21 mg																
2	14 mg																
3	7 mg																
4	Other																
1764	pat_patch_other_dose_chw_g234_g2345 Show the field ONLY if: [pat_patch_dose_chw_g234_g2345] = '4'	Other Dose	text, Required														
1765	pat_patch_start_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(2)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														

1766	pat_7days_patch_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(2)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
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3	3																
4	4																
5	5																
6	6																
7	7																
1767	patch_still_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(2)] = '1'	Is participant still using the patch?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1768	pat_patch_end_chw_g234_g2345 Show the field ONLY if: [patch_still_chw_g234_g2345] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1769	pat_gum_dose_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(4)] = '1'	Nicotine gum	radio, Required <table><tr><td>1</td><td>4-6 mg per day</td></tr><tr><td>2</td><td>8-10 mg per day</td></tr><tr><td>3</td><td>12-14 mg per day</td></tr><tr><td>4</td><td>16-18 mg per day</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	4-6 mg per day	2	8-10 mg per day	3	12-14 mg per day	4	16-18 mg per day	5	Other				
1	4-6 mg per day																
2	8-10 mg per day																
3	12-14 mg per day																
4	16-18 mg per day																
5	Other																
1770	pat_gum_other_dose_chw_g234_g2345 Show the field ONLY if: [pat_gum_dose_chw_g234_g2345] = '5'	Other Dose	text, Required														
1771	pat_gum_start_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(4)] = '1'	Start date	text (date_mdy), Required														
1772	pat_7days_gum_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(4)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
3	3																
4	4																
5	5																
6	6																
7	7																
1773	gum_still_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(4)] = '1'	Is participant still using the gum?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1774	pat_gum_end_chw_g234_g2345 Show the field ONLY if: [gum_still_chw_g234_g2345] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1775	pat_loz_dose_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(5)] = '1'	Nicotine lozenges	radio, Required <table><tr><td>1</td><td>4-6 mg per day</td></tr><tr><td>2</td><td>8-10 mg per day</td></tr><tr><td>3</td><td>12-14 mg per day</td></tr><tr><td>4</td><td>16-18 mg per day</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	4-6 mg per day	2	8-10 mg per day	3	12-14 mg per day	4	16-18 mg per day	5	Other				
1	4-6 mg per day																
2	8-10 mg per day																
3	12-14 mg per day																
4	16-18 mg per day																
5	Other																
1776	pat_loz_other_dose_chw_g234_g2345 Show the field ONLY if: [pat_loz_dose_chw_g234_g2345] = '5'	Other Dose	text, Required														

1777	pat_loz_start_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(5)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																																		
1778	pat_7days_loz_chw_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(5)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>		1	1	2	2	3	3	4	4	5	5	6	6	7	7																			
1	1																																				
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5	5																																				
6	6																																				
7	7																																				
1779	gum_still_chw_2_g234_g2345 Show the field ONLY if: [pat_what_taking_chw_g234_g2345(5)] = '1'	Is participant still using the lozenges?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>		1	Yes	0	No																													
1	Yes																																				
0	No																																				
1780	pat_loz_end_chw_g234_g2345 Show the field ONLY if: [gum_still_chw_2_g234_g2345] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																																		
1781	pat_no_meds_chw_g234_g2345 Show the field ONLY if: [pat_filled_med_chw_g234_g2345] = '0'	if not taking smoking cessation medication, why not	checkbox, Required <table><tr><td>1</td><td>pat_no_meds_chw_g234_g2345__1</td><td>I don't need/want to take more medications</td></tr><tr><td>2</td><td>pat_no_meds_chw_g234_g2345__2</td><td>Fear of adverse effects,</td></tr><tr><td>3</td><td>pat_no_meds_chw_g234_g2345__3</td><td>Family/friends /media recommended not taking it</td></tr><tr><td>4</td><td>pat_no_meds_chw_g234_g2345__4</td><td>I took it before and didn't like the effect (their past experiences),</td></tr><tr><td>5</td><td>pat_no_meds_chw_g234_g2345__5</td><td>I didn't understand what the Treatment was about</td></tr><tr><td>6</td><td>pat_no_meds_chw_g234_g2345__6</td><td>I couldn't afford it</td></tr><tr><td>7</td><td>pat_no_meds_chw_g234_g2345__7</td><td>I'd rather go to smoking groups</td></tr><tr><td>8</td><td>pat_no_meds_chw_g234_g2345__8</td><td>I forgot</td></tr><tr><td>9</td><td>pat_no_meds_chw_g234_g2345__9</td><td>Other</td></tr><tr><td>10</td><td>pat_no_meds_chw_g234_g2345__10</td><td>Prefer not to answer</td></tr><tr><td>11</td><td>pat_no_meds_chw_g234_g2345__11</td><td>I didn't want to quit smoking/ambivalent /changed my mind</td></tr></table>		1	pat_no_meds_chw_g234_g2345__1	I don't need/want to take more medications	2	pat_no_meds_chw_g234_g2345__2	Fear of adverse effects,	3	pat_no_meds_chw_g234_g2345__3	Family/friends /media recommended not taking it	4	pat_no_meds_chw_g234_g2345__4	I took it before and didn't like the effect (their past experiences),	5	pat_no_meds_chw_g234_g2345__5	I didn't understand what the Treatment was about	6	pat_no_meds_chw_g234_g2345__6	I couldn't afford it	7	pat_no_meds_chw_g234_g2345__7	I'd rather go to smoking groups	8	pat_no_meds_chw_g234_g2345__8	I forgot	9	pat_no_meds_chw_g234_g2345__9	Other	10	pat_no_meds_chw_g234_g2345__10	Prefer not to answer	11	pat_no_meds_chw_g234_g2345__11	I didn't want to quit smoking/ambivalent /changed my mind
1	pat_no_meds_chw_g234_g2345__1	I don't need/want to take more medications																																			
2	pat_no_meds_chw_g234_g2345__2	Fear of adverse effects,																																			
3	pat_no_meds_chw_g234_g2345__3	Family/friends /media recommended not taking it																																			
4	pat_no_meds_chw_g234_g2345__4	I took it before and didn't like the effect (their past experiences),																																			
5	pat_no_meds_chw_g234_g2345__5	I didn't understand what the Treatment was about																																			
6	pat_no_meds_chw_g234_g2345__6	I couldn't afford it																																			
7	pat_no_meds_chw_g234_g2345__7	I'd rather go to smoking groups																																			
8	pat_no_meds_chw_g234_g2345__8	I forgot																																			
9	pat_no_meds_chw_g234_g2345__9	Other																																			
10	pat_no_meds_chw_g234_g2345__10	Prefer not to answer																																			
11	pat_no_meds_chw_g234_g2345__11	I didn't want to quit smoking/ambivalent /changed my mind																																			
1782	other_pat_no_meds_chw_g234_g2345 Show the field ONLY if: [pat_no_meds_chw_g234_g2345(9)] = '1'	Other	text, Required																																		
1783	pat_recommend_cbt_chw_g234_g2345 Show the field ONLY if: [seen_by_pcp_chw_g234_g2345] = '3'	Did the PCP recommend attending a smoking group?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>		1	Yes	0	No																													
1	Yes																																				
0	No																																				
1784	pat_cbt_chw_g234_g2345 Show the field ONLY if: [pat_recommend_cbt_chw_g234_g2345] = '1'	Is participant attending a smoking cessation group?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>		1	Yes	0	No																													
1	Yes																																				
0	No																																				

1785	pat_cbt_start_chw_g234_g2345 Show the field ONLY if: [pat_cbt_chw_g234_g2345] = '1'	Date started	text (date_mdy), Required Field Annotation: @HIDEBUTTON																												
1786	pat_att_cbt_chw_g234_g2345 Show the field ONLY if: [pat_cbt_chw_g234_g2345] = '1'	Attendance in past month	radio <table><tr><td>1</td><td>1 session</td></tr><tr><td>2</td><td>2 sessions</td></tr><tr><td>3</td><td>3 sessions</td></tr><tr><td>4</td><td>4 sessions</td></tr><tr><td>5</td><td>5 sessions or more</td></tr></table>		1	1 session	2	2 sessions	3	3 sessions	4	4 sessions	5	5 sessions or more																	
1	1 session																														
2	2 sessions																														
3	3 sessions																														
4	4 sessions																														
5	5 sessions or more																														
1787	pat_loc_cbt_chw_g234_g2345 Show the field ONLY if: [pat_cbt_chw_g234_g2345] = '1'	Group location	notes, Required																												
1788	pat_no_cbt_chw_g234_g2345 Show the field ONLY if: [pat_cbt_chw_g234_g2345] = '0'	If not attending cessation group, why not	checkbox, Required <table><tr><td>1</td><td>pat_no_cbt_chw_g234_g2345__1</td><td>I don't have a ride</td></tr><tr><td>2</td><td>pat_no_cbt_chw_g234_g2345__2</td><td>Fear of adverse effects,</td></tr><tr><td>3</td><td>pat_no_cbt_chw_g234_g2345__3</td><td>Family/friends /media recommended not going</td></tr><tr><td>4</td><td>pat_no_cbt_chw_g234_g2345__4</td><td>I did it before and didn't like it (their past experiences),</td></tr><tr><td>5</td><td>pat_no_cbt_chw_g234_g2345__5</td><td>I don't understand what the group is about</td></tr><tr><td>6</td><td>pat_no_cbt_chw_g234_g2345__6</td><td>I'd rather quit smoking on my own</td></tr><tr><td>7</td><td>pat_no_cbt_chw_g234_g2345__7</td><td>I don't want to quit smoking</td></tr><tr><td>8</td><td>pat_no_cbt_chw_g234_g2345__8</td><td>Other</td></tr><tr><td>9</td><td>pat_no_cbt_chw_g234_g2345__9</td><td>Prefer not to answer</td></tr></table>		1	pat_no_cbt_chw_g234_g2345__1	I don't have a ride	2	pat_no_cbt_chw_g234_g2345__2	Fear of adverse effects,	3	pat_no_cbt_chw_g234_g2345__3	Family/friends /media recommended not going	4	pat_no_cbt_chw_g234_g2345__4	I did it before and didn't like it (their past experiences),	5	pat_no_cbt_chw_g234_g2345__5	I don't understand what the group is about	6	pat_no_cbt_chw_g234_g2345__6	I'd rather quit smoking on my own	7	pat_no_cbt_chw_g234_g2345__7	I don't want to quit smoking	8	pat_no_cbt_chw_g234_g2345__8	Other	9	pat_no_cbt_chw_g234_g2345__9	Prefer not to answer
1	pat_no_cbt_chw_g234_g2345__1	I don't have a ride																													
2	pat_no_cbt_chw_g234_g2345__2	Fear of adverse effects,																													
3	pat_no_cbt_chw_g234_g2345__3	Family/friends /media recommended not going																													
4	pat_no_cbt_chw_g234_g2345__4	I did it before and didn't like it (their past experiences),																													
5	pat_no_cbt_chw_g234_g2345__5	I don't understand what the group is about																													
6	pat_no_cbt_chw_g234_g2345__6	I'd rather quit smoking on my own																													
7	pat_no_cbt_chw_g234_g2345__7	I don't want to quit smoking																													
8	pat_no_cbt_chw_g234_g2345__8	Other																													
9	pat_no_cbt_chw_g234_g2345__9	Prefer not to answer																													
1789	other_pat_no_cbt_chw_g234_g2345 Show the field ONLY if: [pat_no_cbt_chw_g234_g2345(8)] = '1'	Other	text, Required																												
1790	notes3_chw_g234_g2345	Notes	notes Custom alignment: RH																												

1791	<div>session_prev_goals_chw_g234_g2345</div> <div>Show the field ONLY if: [smoking_chw_g234_g2345] = '1' or [smoking_chw_g234_g2345] = '0'</div>	<div>Plan from previous session</div> <div>Visit 80: [visit_80_arm_2][session_next_goals_chw_g234_g2345]</div> <div>Visit 81: [visit_81_arm_2][session_next_goals_chw_g234_g2345]</div> <div>Visit 82: [visit_82_arm_2][session_next_goals_chw_g234_g2345]</div> <div>Visit 83: [visit_83_arm_2][session_next_goals_chw_g234_g2345]</div> <div>Visit 84: [visit_84_arm_2][session_next_goals_chw_g234_g2345]</div> <div>Visit 85: [visit_85_arm_2][session_next_goals_chw_g234_g2345]</div> <div>Visit 86: [visit_86_arm_2][session_next_goals_chw_g234_g2345]</div> <div>Visit 87: [visit_87_arm_2][session_next_goals_chw_g234_g2345]</div> <div>Visit 88: [visit_88_arm_2][session_next_goals_chw_g234_g2345]</div> <div>Visit 89: [visit_89_arm_2][session_next_goals_chw_g234_g2345]</div> <div>Visit 90: [visit_90_arm_2][session_next_goals_chw_g234_g2345]</div> <div>Visit 91: [visit_91_arm_2][session_next_goals_chw_g234_g2345]</div> <div>Visit 92: [visit_92_arm_2][session_next_goals_chw_g234_g2345]</div> <div>Visit 93: [visit_93_arm_2][session_next_goals_chw_g234_g2345]</div> <div>Visit 94: [visit_94_arm_2][session_next_goals_chw_g234_g2345]</div> <div>Visit 95: [visit_95_arm_2][session_next_goals_chw_g234_g2345]</div> <div>Visit 96: [visit_96_arm_2][session_next_goals_chw_g234_g2345]</div> <div>Visit 97: [visit_97_arm_2][session_next_goals_chw_g234_g2345]</div> <div>Visit 98: [visit_98_arm_2][session_next_goals_chw_g234_g2345]</div> <div>Visit 99: [visit_99_arm_2][session_next_goals_chw_g234_g2345]</div>	descriptive						
1792	<div>pat_goals_acc_chw_g234_g2345</div> <div>Show the field ONLY if: [seen_by_pcp_chw_g234_g2345] = '1' or [seen_by_pcp_chw_g234_g2345] = '2' or [seen_by_pcp_chw_g234_g2345] = '3' or [seen_by_pcp_chw_g234_g2345] = '4' or [seen_by_pcp_chw_g234_g2345] = '5'</div>	<div>Plan accomplished?</div>	<div>radio, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>3</td><td>Partially</td></tr></table>	1	Yes	2	No	3	Partially
1	Yes								
2	No								
3	Partially								
1793	<div>pat_goal_prog_chw_g234_g2345</div> <div>Show the field ONLY if: [seen_by_pcp_chw_g234_g2345] = '1' or [seen_by_pcp_chw_g234_g2345] = '2' or [seen_by_pcp_chw_g234_g2345] = '3' or [seen_by_pcp_chw_g234_g2345] = '4' or [seen_by_pcp_chw_g234_g2345] = '5'</div>	<div>Describe progress on plan</div>	notes, Required						
1794	<div>pat_goal_partially_chw_g234_g2345</div> <div>Show the field ONLY if: [pat_goals_acc_chw_g234_g2345] = '2' or [pat_goals_acc_chw_g234_g2345] = '3'</div>	<div>If plan was not completed or was only partially completed, identify what got in the way and how to problem-solve in future</div>	notes, Required						

1795	<div>session_content_chw_g234_g234_5</div> <div>Show the field ONLY if: [seen_by_pcp_chw_g234_g2345] = '1' or [seen_by_pcp_chw_g234_g2345] = '2' or [seen_by_pcp_chw_g234_g2345] = '3' or [seen_by_pcp_chw_g234_g2345] = '4' or [seen_by_pcp_chw_g234_g2345] = '5'</div>	Session Content	<div>checkbox, Required</div> <table><tr><td>1</td><td>session_content_chw_g234_g2345__1</td><td>Engagement and involvement</td></tr><tr><td>2</td><td>session_content_chw_g234_g2345__2</td><td>Motivational interviewing</td></tr><tr><td>3</td><td>session_content_chw_g234_g2345__3</td><td>Motivational tools</td></tr><tr><td>4</td><td>session_content_chw_g234_g2345__4</td><td>Education topic</td></tr><tr><td>5</td><td>session_content_chw_g234_g2345__5</td><td>Medication compliance</td></tr><tr><td>6</td><td>session_content_chw_g234_g2345__6</td><td>Care coordination</td></tr><tr><td>7</td><td>session_content_chw_g234_g2345__7</td><td>Progress</td></tr><tr><td>8</td><td>session_content_chw_g234_g2345__8</td><td>Other</td></tr><tr><td>9</td><td>session_content_chw_g234_g2345__9</td><td>Quit Line</td></tr></table>	1	session_content_chw_g234_g2345__1	Engagement and involvement	2	session_content_chw_g234_g2345__2	Motivational interviewing	3	session_content_chw_g234_g2345__3	Motivational tools	4	session_content_chw_g234_g2345__4	Education topic	5	session_content_chw_g234_g2345__5	Medication compliance	6	session_content_chw_g234_g2345__6	Care coordination	7	session_content_chw_g234_g2345__7	Progress	8	session_content_chw_g234_g2345__8	Other	9	session_content_chw_g234_g2345__9	Quit Line			
1	session_content_chw_g234_g2345__1	Engagement and involvement																															
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8	session_content_chw_g234_g2345__8	Other																															
9	session_content_chw_g234_g2345__9	Quit Line																															
1796	<div>session_engag_chw_g234_g2345</div> <div>Show the field ONLY if: [session_content_chw_g234_g234_5(1)] = '1'</div>	1, Engagement and involvement	<div>notes, Required</div> <div>Custom alignment: LH</div>																														
1797	<div>pat_mi_chw_g234_g2345</div> <div>Show the field ONLY if: [session_content_chw_g234_g234_5(2)] = '1'</div>	2. Motivational Interviewing	<div>notes, Required</div> <div>Custom alignment: LH</div>																														
1798	<div>session_pros_cons_chw_g234_g2345</div> <div>Show the field ONLY if: [session_content_chw_g234_g234_5(3)] = '1'</div>	3. Motivational tools: (include benefits and barriers-be specific! Use patient's own words when possible)	<div>checkbox, Required</div> <table><tr><td>1</td><td>session_pros_cons_chw_g234_g2345__1</td><td>Identifying pros of smoking</td></tr><tr><td>2</td><td>session_pros_cons_chw_g234_g2345__2</td><td>Identifying cons of smoking</td></tr><tr><td>3</td><td>session_pros_cons_chw_g234_g2345__3</td><td>Health benefits from quitting smoking</td></tr><tr><td>4</td><td>session_pros_cons_chw_g234_g2345__4</td><td>Cessation medications</td></tr><tr><td>5</td><td>session_pros_cons_chw_g234_g2345__5</td><td>Promoting smoking groups</td></tr><tr><td>6</td><td>session_pros_cons_chw_g234_g2345__6</td><td>Other</td></tr><tr><td>7</td><td>session_pros_cons_chw_g234_g2345__7</td><td>CO and smoking</td></tr><tr><td>8</td><td>session_pros_cons_chw_g234_g2345__8</td><td>Smoking triggers, pack wraps</td></tr><tr><td>9</td><td>session_pros_cons_chw_g234_g2345__9</td><td>Reasons to quit smoking</td></tr><tr><td>10</td><td>session_pros_cons_chw_g234_g2345__10</td><td>Preparing for the quit day</td></tr></table>	1	session_pros_cons_chw_g234_g2345__1	Identifying pros of smoking	2	session_pros_cons_chw_g234_g2345__2	Identifying cons of smoking	3	session_pros_cons_chw_g234_g2345__3	Health benefits from quitting smoking	4	session_pros_cons_chw_g234_g2345__4	Cessation medications	5	session_pros_cons_chw_g234_g2345__5	Promoting smoking groups	6	session_pros_cons_chw_g234_g2345__6	Other	7	session_pros_cons_chw_g234_g2345__7	CO and smoking	8	session_pros_cons_chw_g234_g2345__8	Smoking triggers, pack wraps	9	session_pros_cons_chw_g234_g2345__9	Reasons to quit smoking	10	session_pros_cons_chw_g234_g2345__10	Preparing for the quit day
1	session_pros_cons_chw_g234_g2345__1	Identifying pros of smoking																															
2	session_pros_cons_chw_g234_g2345__2	Identifying cons of smoking																															
3	session_pros_cons_chw_g234_g2345__3	Health benefits from quitting smoking																															
4	session_pros_cons_chw_g234_g2345__4	Cessation medications																															
5	session_pros_cons_chw_g234_g2345__5	Promoting smoking groups																															
6	session_pros_cons_chw_g234_g2345__6	Other																															
7	session_pros_cons_chw_g234_g2345__7	CO and smoking																															
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9	session_pros_cons_chw_g234_g2345__9	Reasons to quit smoking																															
10	session_pros_cons_chw_g234_g2345__10	Preparing for the quit day																															
1799	<div>other_motiv_tools_chw_g234_g234_5</div> <div>Show the field ONLY if: [session_pros_cons_chw_g234_g234_5(6)] = '1'</div>	Other	<div>text, Required</div>																														

1800	session_education_chw_g234_g2345 Show the field ONLY if: [session_content_chw_g234_g2345(4)] = '1'	4. Education Topic (check all that apply)	checkbox, Required <table><tr><td>1</td><td>session_education_chw_g234_g2345__1</td><td>Withdrawal symptoms</td></tr><tr><td>2</td><td>session_education_chw_g234_g2345__2</td><td>Coping with withdrawal</td></tr><tr><td>3</td><td>session_education_chw_g234_g2345__3</td><td>Cessation medication</td></tr><tr><td>4</td><td>session_education_chw_g234_g2345__4</td><td>Things to do instead of smoking, the 4Ds</td></tr><tr><td>5</td><td>session_education_chw_g234_g2345__5</td><td>Other</td></tr><tr><td>6</td><td>session_education_chw_g234_g2345__6</td><td>Dealing with stress</td></tr><tr><td>7</td><td>session_education_chw_g234_g2345__7</td><td>Dealing with weight gain</td></tr><tr><td>8</td><td>session_education_chw_g234_g2345__8</td><td>Dealing with high risk situations</td></tr><tr><td>9</td><td>session_education_chw_g234_g2345__9</td><td>Dealing with slips</td></tr></table>	1	session_education_chw_g234_g2345__1	Withdrawal symptoms	2	session_education_chw_g234_g2345__2	Coping with withdrawal	3	session_education_chw_g234_g2345__3	Cessation medication	4	session_education_chw_g234_g2345__4	Things to do instead of smoking, the 4Ds	5	session_education_chw_g234_g2345__5	Other	6	session_education_chw_g234_g2345__6	Dealing with stress	7	session_education_chw_g234_g2345__7	Dealing with weight gain	8	session_education_chw_g234_g2345__8	Dealing with high risk situations	9	session_education_chw_g234_g2345__9	Dealing with slips
1	session_education_chw_g234_g2345__1	Withdrawal symptoms																												
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8	session_education_chw_g234_g2345__8	Dealing with high risk situations																												
9	session_education_chw_g234_g2345__9	Dealing with slips																												
1801	other_educ_chw_g234_g2345 Show the field ONLY if: [session_education_chw_g234_g2345(5)] = '1'	Other	text, Required																											
1802	session_check_meds_chw_g234_g2345 Show the field ONLY if: [session_content_chw_g234_g2345(5)] = '1'	5. Check medication compliance	notes Custom alignment: LH																											
1803	session_care_chw_g234_g2345 Show the field ONLY if: [session_content_chw_g234_g2345(6)] = '1'	6. Care coordination (check all that apply)	checkbox, Required <table><tr><td>1</td><td>session_care_chw_g234_g2345__1</td><td>Scheduling PCP visit</td></tr><tr><td>2</td><td>session_care_chw_g234_g2345__2</td><td>Smoking cessation group</td></tr><tr><td>3</td><td>session_care_chw_g234_g2345__3</td><td>Other</td></tr><tr><td>4</td><td>session_care_chw_g234_g2345__4</td><td>Pharmacy and medications</td></tr></table>	1	session_care_chw_g234_g2345__1	Scheduling PCP visit	2	session_care_chw_g234_g2345__2	Smoking cessation group	3	session_care_chw_g234_g2345__3	Other	4	session_care_chw_g234_g2345__4	Pharmacy and medications															
1	session_care_chw_g234_g2345__1	Scheduling PCP visit																												
2	session_care_chw_g234_g2345__2	Smoking cessation group																												
3	session_care_chw_g234_g2345__3	Other																												
4	session_care_chw_g234_g2345__4	Pharmacy and medications																												
1804	other_care_chw_g234_g2345 Show the field ONLY if: [session_care_chw_g234_g2345(3)] = '1'	Other	text, Required																											
1805	session_progress_chw_g234_g2345 Show the field ONLY if: [session_content_chw_g234_g2345(7)] = '1'	7. Reinforcing progress and identifying what has been helpful in achieving gains (e.g., scheduling PCP visit, smoking cessation group)	notes Custom alignment: LH																											
1806	session_other_chw_g234_g2345 Show the field ONLY if: [session_content_chw_g234_g2345(8)] = '1'	8. Other	notes Custom alignment: LH																											
1807	session_qline_chw_g234_g2346 Show the field ONLY if: [session_content_chw_g234_g2345(9)] = '1'	9. QUIT LINE Was QUIT LINE presented/discussed to participant TODAY?	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH	1	Yes	0	No																							
1	Yes																													
0	No																													
1808	session_noql_chw_g234_g2346 Show the field ONLY if: [session_qline_chw_g234_g2346] = '0'	Why not?	text, Required Custom alignment: LH																											

1809	session_qline_interest_chw_g234_g2346 Show the field ONLY if: [session_qline_chw_g234_g2346] = '1'	Was participant interested?	yesno, Required 1 Yes 0 No Custom alignment: LH
1810	session_qlineatsession_chw_g234_g2346 Show the field ONLY if: [session_qline_chw_g234_g2346] = '1'	Did the participant call the Quit Line during this session?	yesno, Required 1 Yes 0 No
1811	session_qlinenoatsession_chw_g234_g2346 Show the field ONLY if: [session_qlineatsession_chw_g234_g2346] = '0'	Why not?	notes, Required
1812	session_qlinesched_chw_g234_g2346 Show the field ONLY if: [session_qlineatsession_chw_g234_g2346] = '0'	Was a Quit Line call scheduled?	yesno, Required 1 Yes 0 No
1813	session_qlinenosched_chw_g234_g2346 Show the field ONLY if: [session_qlinesched_chw_g234_g2346] = '0'	Why not?	notes, Required
1814	session_qlinetime_chw_g234_g2346 Show the field ONLY if: [session_qlineatsession_chw_g234_g2346] = '1'	Date/Time Quit Line call	text (datetime_mdy), Required
1815	session_qline_chwinvolv_g234_g2346 Show the field ONLY if: [session_qlineatsession_chw_g234_g2346] = '1'	Was the CHW involved in the Quit Line call?	yesno, Required 1 Yes 0 No
1816	session_qlinecall_chw_g234_g2346 Show the field ONLY if: [session_qlineatsession_chw_g234_g2346] = '1'	Describe session/call	notes, Required
1817	session_qlinenrt_chw_g234_g2346 Show the field ONLY if: [session_qlineatsession_chw_g234_g2346] = '1'	Did the participant/CHW request NRT? Please explain	notes, Required
1818	session_qlinenrtuse_chw_g234_g2346 Show the field ONLY if: [session_qlineatsession_chw_g234_g2346] = '1'	Did the participant use the NRT? Please explain	notes, Required
1819	session_qlineable_chw_g234_g2346 Show the field ONLY if: [session_qlineatsession_chw_g234_g2346] = '1'	Did the quitline staff seem able to work with people with SMI? Please explain	notes, Required
1820	session_qlinefu_chw_g234_g2346 Show the field ONLY if: [session_qlineatsession_chw_g234_g2346] = '1'	Was a follow up call scheduled?	notes, Required
1821	session_qlinecom_chw_g234_g2346	Quit Line Notes	notes
1822	session_descript_chw_g234_g2345	Brief description of the session	notes, Required Custom alignment: LH

1823	session_next_goals_chw_g234_g2345	Goals for next session	notes, Required Custom alignment: LH																										
1824	next_visit_all_chw_g234_g2345	Next visit will be	text (datetime_mdy), Required Field Annotation: @HIDEBUTTON																										
1825	name_chw_g234_g2345	CHW	radio, Required <table><tr><td>1</td><td>Alexandra Fortune</td></tr><tr><td>2</td><td>Ashley Newman</td></tr><tr><td>3</td><td>Aysha Peralta</td></tr><tr><td>4</td><td>Erin Hanrahan</td></tr><tr><td>5</td><td>John Dowd</td></tr><tr><td>6</td><td>Karlie Marrs</td></tr><tr><td>7</td><td>Leeza Rojas</td></tr><tr><td>8</td><td>Madalyn Davis</td></tr><tr><td>9</td><td>Madeleine Fontaine</td></tr><tr><td>10</td><td>Megan Donnelly</td></tr><tr><td>11</td><td>Morgan Boudreau</td></tr><tr><td>12</td><td>Nina Cherilus</td></tr><tr><td>13</td><td>Carlos Taveras</td></tr></table>	1	Alexandra Fortune	2	Ashley Newman	3	Aysha Peralta	4	Erin Hanrahan	5	John Dowd	6	Karlie Marrs	7	Leeza Rojas	8	Madalyn Davis	9	Madeleine Fontaine	10	Megan Donnelly	11	Morgan Boudreau	12	Nina Cherilus	13	Carlos Taveras
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13	Carlos Taveras																												
1826	contact_sheet_all_visits_chw_81_100_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete																				
0	Incomplete																												
1	Unverified																												
2	Complete																												
Instrument: Contact Sheet All Visits CHW 101_120 (contact_sheet_all_visits_chw_101_120) <div>^ Collapse</div>																													
1827	date_all_visits_chw_g234_g2345_v2	Visit Date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																										
1828	start_all_visits_chw_g234_g2345_v2	Start time	text (time), Required																										
1829	end_all_visits_chw_g234_g2345_v2	End time	text (time), Required																										
1830	visit_modality_chw_g234_g2345_v2	Visit modality	radio, Required <table><tr><td>1</td><td>Phone visit</td></tr><tr><td>2</td><td>In person visit</td></tr></table>	1	Phone visit	2	In person visit																						
1	Phone visit																												
2	In person visit																												
1831	reason_phone_chw_g234_g2345_v2 Show the field ONLY if: [visit_modality_chw_g234_g2345_v2] = '1'	Reasons for the phone visit (select all that apply)	checkbox, Required <table><tr><td>1</td><td>reason_phone_chw_g234_g2345_v2__1</td><td>Help preparing for quit day</td></tr><tr><td>2</td><td>reason_phone_chw_g234_g2345_v2__2</td><td>Quit day</td></tr><tr><td>3</td><td>reason_phone_chw_g234_g2345_v2__3</td><td>Check for withdrawal symptoms</td></tr><tr><td>4</td><td>reason_phone_chw_g234_g2345_v2__4</td><td>Medication compliance/side effects</td></tr><tr><td>5</td><td>reason_phone_chw_g234_g2345_v2__5</td><td>Other</td></tr></table>	1	reason_phone_chw_g234_g2345_v2__1	Help preparing for quit day	2	reason_phone_chw_g234_g2345_v2__2	Quit day	3	reason_phone_chw_g234_g2345_v2__3	Check for withdrawal symptoms	4	reason_phone_chw_g234_g2345_v2__4	Medication compliance/side effects	5	reason_phone_chw_g234_g2345_v2__5	Other											
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5	reason_phone_chw_g234_g2345_v2__5	Other																											
1832	other_reason_phone_chw_g234_g2345_v2 Show the field ONLY if: [reason_phone_chw_g234_g2345_v2(5)] = '1'	Other reason for a phone visit	text, Required																										

1833	reasons_contact_chw_g234_g234_5_v2 Show the field ONLY if: [visit_modality_chw_g234_g2345_v2] = '2'	Reasons for In Person meeting (select all that apply)	checkbox, Required <table><tr><td>1</td><td>reasons_contact_chw_g234_g2345_v2__1</td><td>Initial visit/obtain consent</td></tr><tr><td>2</td><td>reasons_contact_chw_g234_g2345_v2__2</td><td>Intervention visit</td></tr><tr><td>3</td><td>reasons_contact_chw_g234_g2345_v2__3</td><td>Taking participant to smoking group</td></tr><tr><td>4</td><td>reasons_contact_chw_g234_g2345_v2__4</td><td>Taking participant to PCP</td></tr><tr><td>5</td><td>reasons_contact_chw_g234_g2345_v2__5</td><td>Other</td></tr><tr><td>6</td><td>reasons_contact_chw_g234_g2345_v2__6</td><td>Medication compliance/side effects</td></tr></table>	1	reasons_contact_chw_g234_g2345_v2__1	Initial visit/obtain consent	2	reasons_contact_chw_g234_g2345_v2__2	Intervention visit	3	reasons_contact_chw_g234_g2345_v2__3	Taking participant to smoking group	4	reasons_contact_chw_g234_g2345_v2__4	Taking participant to PCP	5	reasons_contact_chw_g234_g2345_v2__5	Other	6	reasons_contact_chw_g234_g2345_v2__6	Medication compliance/side effects
1	reasons_contact_chw_g234_g2345_v2__1	Initial visit/obtain consent																			
2	reasons_contact_chw_g234_g2345_v2__2	Intervention visit																			
3	reasons_contact_chw_g234_g2345_v2__3	Taking participant to smoking group																			
4	reasons_contact_chw_g234_g2345_v2__4	Taking participant to PCP																			
5	reasons_contact_chw_g234_g2345_v2__5	Other																			
6	reasons_contact_chw_g234_g2345_v2__6	Medication compliance/side effects																			
1834	other_reason_contact_chw_g234_g2345_v2 Show the field ONLY if: [reasons_contact_chw_g234_g2345_v2(5)] = '1'	Other reason for an In Person Meeting	text, Required																		
1835	smoking_chw_g234_g2345_v2	Section Header: <i>Smoking Behavior</i> Has the participant smoked in the past 7 days?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																				
0	No																				
1836	notes1_chw_g234_g2345_v2	Notes	notes Custom alignment: RH																		
1837	tobacco_prod_chw_g234_g2345_v2	Which tobacco products does the participant currently smoke? (I.e. Cigarettes, Cigars, Cigarillos, Rollics, Mini Cigars, Pipe) Select all that apply	checkbox <table><tr><td>1</td><td>tobacco_prod_chw_g234_g2345_v2__1</td><td>Cigarettes</td></tr><tr><td>2</td><td>tobacco_prod_chw_g234_g2345_v2__2</td><td>Mini cigars (i.e. double diamonds)</td></tr><tr><td>3</td><td>tobacco_prod_chw_g234_g2345_v2__3</td><td>loose tobacco (roll your own, rollics)</td></tr><tr><td>4</td><td>tobacco_prod_chw_g234_g2345_v2__4</td><td>e-cigarettes/vaping</td></tr><tr><td>5</td><td>tobacco_prod_chw_g234_g2345_v2__5</td><td>Other</td></tr><tr><td>6</td><td>tobacco_prod_chw_g234_g2345_v2__6</td><td>Quit smoking</td></tr></table>	1	tobacco_prod_chw_g234_g2345_v2__1	Cigarettes	2	tobacco_prod_chw_g234_g2345_v2__2	Mini cigars (i.e. double diamonds)	3	tobacco_prod_chw_g234_g2345_v2__3	loose tobacco (roll your own, rollics)	4	tobacco_prod_chw_g234_g2345_v2__4	e-cigarettes/vaping	5	tobacco_prod_chw_g234_g2345_v2__5	Other	6	tobacco_prod_chw_g234_g2345_v2__6	Quit smoking
1	tobacco_prod_chw_g234_g2345_v2__1	Cigarettes																			
2	tobacco_prod_chw_g234_g2345_v2__2	Mini cigars (i.e. double diamonds)																			
3	tobacco_prod_chw_g234_g2345_v2__3	loose tobacco (roll your own, rollics)																			
4	tobacco_prod_chw_g234_g2345_v2__4	e-cigarettes/vaping																			
5	tobacco_prod_chw_g234_g2345_v2__5	Other																			
6	tobacco_prod_chw_g234_g2345_v2__6	Quit smoking																			
1838	cpd_chw_g234_g2345_v2 Show the field ONLY if: [smoking_chw_g234_g2345_v2] = '1'	On average, how many cigarettes (or other tobacco product) per day has the participant smoked in past 7 days?	text (integer), Required																		
1839	cpd_non_daily_chw_g234_g2345_v2	COMPLETE ONLY IF PARTICIPANT HASN'T BEEN SMOKING EVERY DAY DURING THE PAST WEEK On average, how many cigarettes (or other tobacco product) per WEEK has the participant smoked in past week?	text																		
1840	last_cigarette_chw_g234_g2345_v2 Show the field ONLY if: [smoking_chw_g234_g2345_v2] = '1' or [smoking_chw_g234_g2345_v2] = '0'	Time of last cigarette (or other tobacco product)	text (datetime_mdy), Required Custom alignment: RH Field Annotation: @HIDEBUTTON																		
1841	pat_co_done_chw_g234_g2345_v2 Show the field ONLY if: [visit_modality_chw_g234_g2345_v2] = '2'	Was CO testing completed today?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																				
0	No																				

1842	pat_yes_co_chw_g234_g2345_v2 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2] = '1'	Reasons for CO measurement	checkbox, Required																																	
			1	pat_yes_co_chw_g234_g2345_v2__1 Last CO month was done over a month ago																																
			2	pat_yes_co_chw_g234_g2345_v2__2 Participant changed smoking behavior after last CO measurement (quit or relapsed)																																
			3	pat_yes_co_chw_g234_g2345_v2__3 Participant asked for it																																
			4	pat_yes_co_chw_g234_g2345_v2__4 Other																																
1843	pat_other_co_chw_g234_g2345_v2 Show the field ONLY if: [pat_yes_co_chw_g234_g2345_v2(4)] = '1'	Other	text, Required																																	
1844	expired_co_chw_g234_g2345_v2 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2] = '1'	Expired CO reading (ppm)	text (integer, Min: 0, Max: 100), Required																																	
1845	time_co_chw_g234_g2345_v2 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2] = '1'	Date of CO reading	text (date_mdy), Required Field Annotation: @HIDEBUTTON																																	
1846	hour_co_chw_g234_g2345_v2 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2] = '1'	Time of CO reading	text (time), Required																																	
1847	co_monitor_chw_g234_g2345_v2 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2] = '1'	CO Monitor ID	radio, Required <table><tr><td>1</td><td>A</td></tr><tr><td>2</td><td>B</td></tr><tr><td>3</td><td>C</td></tr><tr><td>4</td><td>D</td></tr><tr><td>5</td><td>E</td></tr><tr><td>6</td><td>F</td></tr><tr><td>7</td><td>G</td></tr><tr><td>8</td><td>H</td></tr><tr><td>9</td><td>I</td></tr><tr><td>10</td><td>J</td></tr><tr><td>11</td><td>K</td></tr><tr><td>12</td><td>L</td></tr><tr><td>13</td><td>M</td></tr><tr><td>14</td><td>N</td></tr><tr><td>15</td><td>O</td></tr><tr><td>16</td><td>P</td></tr></table> Custom alignment: RH		1	A	2	B	3	C	4	D	5	E	6	F	7	G	8	H	9	I	10	J	11	K	12	L	13	M	14	N	15	O	16	P
1	A																																			
2	B																																			
3	C																																			
4	D																																			
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11	K																																			
12	L																																			
13	M																																			
14	N																																			
15	O																																			
16	P																																			
1848	co_exec_chw_g234_g2345_v2 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2] = '1'	Was CO measuring executed properly?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>		1	Yes	0	No																												
1	Yes																																			
0	No																																			

1849	pat_no_co_chw_g234_g2345_v2 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2] = '0'	Reasons for NO CO measurement	checkbox, Required <table border="1"> <tr> <td>1</td> <td>pat_no_co_chw_g234_g2345_v2__1</td> <td>CO was done within the past month and there was no change in smoking behavior</td> </tr> <tr> <td>2</td> <td>pat_no_co_chw_g234_g2345_v2__2</td> <td>Participant refused</td> </tr> <tr> <td>3</td> <td>pat_no_co_chw_g234_g2345_v2__3</td> <td>Participant unable (respiratory illness, symptomatic)</td> </tr> <tr> <td>4</td> <td>pat_no_co_chw_g234_g2345_v2__4</td> <td>Other</td> </tr> </table>	1	pat_no_co_chw_g234_g2345_v2__1	CO was done within the past month and there was no change in smoking behavior	2	pat_no_co_chw_g234_g2345_v2__2	Participant refused	3	pat_no_co_chw_g234_g2345_v2__3	Participant unable (respiratory illness, symptomatic)	4	pat_no_co_chw_g234_g2345_v2__4	Other						
1	pat_no_co_chw_g234_g2345_v2__1	CO was done within the past month and there was no change in smoking behavior																			
2	pat_no_co_chw_g234_g2345_v2__2	Participant refused																			
3	pat_no_co_chw_g234_g2345_v2__3	Participant unable (respiratory illness, symptomatic)																			
4	pat_no_co_chw_g234_g2345_v2__4	Other																			
1850	other_no_co_chw_g234_g2345_v2 Show the field ONLY if: [pat_no_co_chw_g234_g2345_v2(4)] = '1'	Other	text, Required																		
1851	notes_co_chw_g234_g2345_v2	Notes	notes Custom alignment: RH																		
1852	seen_by_pcp_chw_g234_g2345_v2 Show the field ONLY if: [visit_modality_chw_g234_g2345_v2] = '2'	Was subject seen by primary care team since last meeting?	radio, Required <table border="1"> <tr><td>1</td><td>None scheduled</td></tr> <tr><td>2</td><td>No, missed visit</td></tr> <tr><td>3</td><td>Yes, smoking discussed</td></tr> <tr><td>4</td><td>Yes, smoking not discussed</td></tr> <tr><td>5</td><td>Unknown</td></tr> </table>	1	None scheduled	2	No, missed visit	3	Yes, smoking discussed	4	Yes, smoking not discussed	5	Unknown								
1	None scheduled																				
2	No, missed visit																				
3	Yes, smoking discussed																				
4	Yes, smoking not discussed																				
5	Unknown																				
1853	pcp_recommend_pat_chw_g234_g2345_v2 Show the field ONLY if: [seen_by_pcp_chw_g234_g2345_v2] = '3'	Did the PCP recommend that the participant quit smoking?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
1854	pcp_prescribed_pat_chw_g234_g2345_v2 Show the field ONLY if: [seen_by_pcp_chw_g234_g2345_v2] = '3'	Did PCP prescribe smoking cessation medication?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
1855	pat_what_prescribed_chw_g234_g2345_v2 Show the field ONLY if: [pcp_prescribed_pat_chw_g234_g2345_v2] = '1' or [reason_phone_chw_g234_g2345_v2(4)] = '1'	What did the PCP prescribe?	checkbox, Required <table border="1"> <tr> <td>1</td> <td>pat_what_prescribed_chw_g234_g2345_v2__1</td> <td>Varenicline (i.e. Chantix)</td> </tr> <tr> <td>2</td> <td>pat_what_prescribed_chw_g234_g2345_v2__2</td> <td>Nicotine patch</td> </tr> <tr> <td>3</td> <td>pat_what_prescribed_chw_g234_g2345_v2__3</td> <td>Bupropion (i.e. Wellbutrin, Zyban)</td> </tr> <tr> <td>4</td> <td>pat_what_prescribed_chw_g234_g2345_v2__4</td> <td>Nicotine gum</td> </tr> <tr> <td>5</td> <td>pat_what_prescribed_chw_g234_g2345_v2__5</td> <td>Nicotine lozenge</td> </tr> <tr> <td>6</td> <td>pat_what_prescribed_chw_g234_g2345_v2__6</td> <td>Other</td> </tr> </table>	1	pat_what_prescribed_chw_g234_g2345_v2__1	Varenicline (i.e. Chantix)	2	pat_what_prescribed_chw_g234_g2345_v2__2	Nicotine patch	3	pat_what_prescribed_chw_g234_g2345_v2__3	Bupropion (i.e. Wellbutrin, Zyban)	4	pat_what_prescribed_chw_g234_g2345_v2__4	Nicotine gum	5	pat_what_prescribed_chw_g234_g2345_v2__5	Nicotine lozenge	6	pat_what_prescribed_chw_g234_g2345_v2__6	Other
1	pat_what_prescribed_chw_g234_g2345_v2__1	Varenicline (i.e. Chantix)																			
2	pat_what_prescribed_chw_g234_g2345_v2__2	Nicotine patch																			
3	pat_what_prescribed_chw_g234_g2345_v2__3	Bupropion (i.e. Wellbutrin, Zyban)																			
4	pat_what_prescribed_chw_g234_g2345_v2__4	Nicotine gum																			
5	pat_what_prescribed_chw_g234_g2345_v2__5	Nicotine lozenge																			
6	pat_what_prescribed_chw_g234_g2345_v2__6	Other																			
1856	other_prescribed_chw_g234_g2345_v2 Show the field ONLY if: [pat_what_prescribed_chw_g234_g2345_v2(6)] = '1'	Other	text, Required																		
1857	pat_filled_med_chw_g234_g2345_v2 Show the field ONLY if: [pcp_prescribed_pat_chw_g234_g2345_v2] = '1' or [reason_phone_chw_g234_g2345_v2(4)] = '1'	Did the participant fill the prescription for the smoking cessation medication?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				

1858	pat_what_taking_chw_g234_g234_5_v2 Show the field ONLY if: [pcp_prescribed_pat_chw_g234_g234_5_v2] = '1' or [reason_phone_chw_g234_g234_5_v2(4)] = '1' or [reasons_contact_chw_g234_g234_5_v2(6)] = '1'	What is the participant taking?	checkbox, Required <table border="1"> <tr> <td>1</td> <td>pat_what_taking_chw_g234_g234_5_v2__1</td> <td>Varenicline (i.e. Chantix)</td> </tr> <tr> <td>2</td> <td>pat_what_taking_chw_g234_g234_5_v2__2</td> <td>Nicotine patch</td> </tr> <tr> <td>3</td> <td>pat_what_taking_chw_g234_g234_5_v2__3</td> <td>Bupropion (i.e. Wellbutrin, Zyban)</td> </tr> <tr> <td>4</td> <td>pat_what_taking_chw_g234_g234_5_v2__4</td> <td>Nicotine gum</td> </tr> <tr> <td>5</td> <td>pat_what_taking_chw_g234_g234_5_v2__5</td> <td>Nicotine lozenge</td> </tr> <tr> <td>6</td> <td>pat_what_taking_chw_g234_g234_5_v2__6</td> <td>Other</td> </tr> </table>	1	pat_what_taking_chw_g234_g234_5_v2__1	Varenicline (i.e. Chantix)	2	pat_what_taking_chw_g234_g234_5_v2__2	Nicotine patch	3	pat_what_taking_chw_g234_g234_5_v2__3	Bupropion (i.e. Wellbutrin, Zyban)	4	pat_what_taking_chw_g234_g234_5_v2__4	Nicotine gum	5	pat_what_taking_chw_g234_g234_5_v2__5	Nicotine lozenge	6	pat_what_taking_chw_g234_g234_5_v2__6	Other
1	pat_what_taking_chw_g234_g234_5_v2__1	Varenicline (i.e. Chantix)																			
2	pat_what_taking_chw_g234_g234_5_v2__2	Nicotine patch																			
3	pat_what_taking_chw_g234_g234_5_v2__3	Bupropion (i.e. Wellbutrin, Zyban)																			
4	pat_what_taking_chw_g234_g234_5_v2__4	Nicotine gum																			
5	pat_what_taking_chw_g234_g234_5_v2__5	Nicotine lozenge																			
6	pat_what_taking_chw_g234_g234_5_v2__6	Other																			
1859	pat_other_med_chw_g234_g234_5_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g234_5_v2(6)] = '1'	Other	text, Required																		
1860	pat_var_dose_chw_g234_g234_5_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g234_5_v2(1)] = '1'	Varenicline (Chantix) Dose	radio, Required <table border="1"> <tr> <td>1</td> <td>0.5 mg once a day</td> </tr> <tr> <td>2</td> <td>0.5 mg twice a day</td> </tr> <tr> <td>3</td> <td>1 mg once a day</td> </tr> <tr> <td>4</td> <td>1 mg twice a day</td> </tr> <tr> <td>5</td> <td>Other</td> </tr> </table>	1	0.5 mg once a day	2	0.5 mg twice a day	3	1 mg once a day	4	1 mg twice a day	5	Other								
1	0.5 mg once a day																				
2	0.5 mg twice a day																				
3	1 mg once a day																				
4	1 mg twice a day																				
5	Other																				
1861	pat_var_other_dose_chw_g234_g234_5_v2 Show the field ONLY if: [pat_var_dose_chw_g234_g234_5_v2] = '5'	Other Dose	text, Required																		
1862	pat_var_start_chw_g234_g234_5_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g234_5_v2(1)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																		
1863	pat_7days_var_chw_g234_g234_5_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g234_5_v2(1)] = '1'	Days used as prescribed in past 7 days	radio, Required <table border="1"> <tr> <td>1</td> <td>1</td> </tr> <tr> <td>2</td> <td>2</td> </tr> <tr> <td>3</td> <td>3</td> </tr> <tr> <td>4</td> <td>4</td> </tr> <tr> <td>5</td> <td>5</td> </tr> <tr> <td>6</td> <td>6</td> </tr> <tr> <td>7</td> <td>7</td> </tr> </table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7				
1	1																				
2	2																				
3	3																				
4	4																				
5	5																				
6	6																				
7	7																				
1864	var_still_chw_g234_g234_5_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g234_5_v2(1)] = '1'	Is participant still taking Varenicline?	yesno, Required <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No														
1	Yes																				
0	No																				
1865	pat_var_end_chw_g234_g234_5_v2 Show the field ONLY if: [var_still_chw_g234_g234_5_v2] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																		
1866	pat_bup_dose_chw_g234_g234_5_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g234_5_v2(3)] = '1'	Bupropion (Wellbutrin, Zyban) dose	radio, Required <table border="1"> <tr> <td>1</td> <td>150 mg once a day</td> </tr> <tr> <td>2</td> <td>150 mg twice a day</td> </tr> <tr> <td>3</td> <td>Other</td> </tr> </table>	1	150 mg once a day	2	150 mg twice a day	3	Other												
1	150 mg once a day																				
2	150 mg twice a day																				
3	Other																				

1867	pat_bup_other_dose_chw_g234_g2345_v2 Show the field ONLY if: [pat_bup_dose_chw_g234_g2345_v2] = '3'	Other Dose	text, Required														
1868	pat_bup_start_chw_g234_g2345_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2(3)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1869	pat_7days_bup_chw_g234_g2345_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2(3)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
3	3																
4	4																
5	5																
6	6																
7	7																
1870	bup_still_chw_g234_g2345_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2(3)] = '1'	Is participant still taking Bupropion?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1871	pat_bup_end_chw_g234_g2345_v2 Show the field ONLY if: [bup_still_chw_g234_g2345_v2] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1872	pat_patch_dose_chw_g234_g2345_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2(2)] = '1'	Nicotine patch dose	radio, Required <table><tr><td>1</td><td>21 mg</td></tr><tr><td>2</td><td>14 mg</td></tr><tr><td>3</td><td>7 mg</td></tr><tr><td>4</td><td>Other</td></tr></table>	1	21 mg	2	14 mg	3	7 mg	4	Other						
1	21 mg																
2	14 mg																
3	7 mg																
4	Other																
1873	pat_patch_other_dose_chw_g234_g2345_v2 Show the field ONLY if: [pat_patch_dose_chw_g234_g2345_v2] = '4'	Other Dose	text, Required														
1874	pat_patch_start_chw_g234_g2345_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2(2)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1875	pat_7days_patch_chw_g234_g2345_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2(2)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
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7	7																
1876	patch_still_chw_g234_g2345_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2(2)] = '1'	Is participant still using the patch?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1877	pat_patch_end_chw_g234_g2345_v2 Show the field ONLY if: [patch_still_chw_g234_g2345_v2] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														

1878	pat_gum_dose_chw_g234_g2345_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2(4)] = '1'	Nicotine gum	radio, Required <table><tr><td>1</td><td>4-6 mg per day</td></tr><tr><td>2</td><td>8-10 mg per day</td></tr><tr><td>3</td><td>12-14 mg per day</td></tr><tr><td>4</td><td>16-18 mg per day</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	4-6 mg per day	2	8-10 mg per day	3	12-14 mg per day	4	16-18 mg per day	5	Other				
1	4-6 mg per day																
2	8-10 mg per day																
3	12-14 mg per day																
4	16-18 mg per day																
5	Other																
1879	pat_gum_other_dose_chw_g234_g2345_v2 Show the field ONLY if: [pat_gum_dose_chw_g234_g2345_v2] = '5'	Other Dose	text, Required														
1880	pat_gum_start_chw_g234_g2345_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2(4)] = '1'	Start date	text (date_mdy), Required														
1881	pat_7days_gum_chw_g234_g2345_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2(4)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
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4	4																
5	5																
6	6																
7	7																
1882	gum_still_chw_g234_g2345_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2(4)] = '1'	Is participant still using the gum?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1883	pat_gum_end_chw_g234_g2345_v2 Show the field ONLY if: [gum_still_chw_g234_g2345_v2] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1884	pat_loz_dose_chw_g234_g2345_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2(5)] = '1'	Nicotine lozenges	radio, Required <table><tr><td>1</td><td>4-6 mg per day</td></tr><tr><td>2</td><td>8-10 mg per day</td></tr><tr><td>3</td><td>12-14 mg per day</td></tr><tr><td>4</td><td>16-18 mg per day</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	4-6 mg per day	2	8-10 mg per day	3	12-14 mg per day	4	16-18 mg per day	5	Other				
1	4-6 mg per day																
2	8-10 mg per day																
3	12-14 mg per day																
4	16-18 mg per day																
5	Other																
1885	pat_loz_other_dose_chw_g234_g2345_v2 Show the field ONLY if: [pat_loz_dose_chw_g234_g2345_v2] = '5'	Other Dose	text, Required														
1886	pat_loz_start_chw_g234_g2345_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2(5)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1887	pat_7days_loz_chw_g234_g2345_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2(5)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
3	3																
4	4																
5	5																
6	6																
7	7																

1888	gum_still_chw_2_g234_g2345_v2 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2(5)] = '1'	Is participant still using the lozenges?	yesno, Required 1 Yes 0 No
1889	pat_loz_end_chw_g234_g2345_v2 Show the field ONLY if: [gum_still_chw_2_g234_g2345_v2] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON
1890	pat_no_meds_chw_g234_g2345_v2 Show the field ONLY if: [pat_filled_med_chw_g234_g2345_v2] = '0'	if not taking smoking cessation medication, why not	checkbox, Required 1 pat_no_meds_chw_g234_g2345_v2__1 I don't need/was taking more medications 2 pat_no_meds_chw_g234_g2345_v2__2 Fear of adverse effects, 3 pat_no_meds_chw_g234_g2345_v2__3 Family/friends/media recommended not taking it 4 pat_no_meds_chw_g234_g2345_v2__4 I took it before and didn't like the effects (their past experiences), 5 pat_no_meds_chw_g234_g2345_v2__5 I didn't understand what the Treatment was about 6 pat_no_meds_chw_g234_g2345_v2__6 I couldn't afford 7 pat_no_meds_chw_g234_g2345_v2__7 I'd rather go to smoking groups 8 pat_no_meds_chw_g234_g2345_v2__8 I forgot 9 pat_no_meds_chw_g234_g2345_v2__9 Other 10 pat_no_meds_chw_g234_g2345_v2__10 Prefer not to answer 11 pat_no_meds_chw_g234_g2345_v2__11 I didn't want to quit smoking/ambivalent/changed my mind
1891	other_pat_no_meds_chw_g234_g2345_v2 Show the field ONLY if: [pat_no_meds_chw_g234_g2345_v2(9)] = '1'	Other	text, Required
1892	pat_recommend_cbt_chw_g234_g2345_v2 Show the field ONLY if: [seen_by_pcp_chw_g234_g2345_v2] = '3'	Did the PCP recommend attending a smoking group?	yesno, Required 1 Yes 0 No
1893	pat_cbt_chw_g234_g2345_v2 Show the field ONLY if: [pat_recommend_cbt_chw_g234_g2345_v2] = '1'	Is participant attending a smoking cessation group?	yesno, Required 1 Yes 0 No
1894	pat_cbt_start_chw_g234_g2345_v2 Show the field ONLY if: [pat_cbt_chw_g234_g2345_v2] = '1'	Date started	text (date_mdy), Required Field Annotation: @HIDEBUTTON
1895	pat_att_cbt_chw_g234_g2345_v2 Show the field ONLY if: [pat_cbt_chw_g234_g2345_v2] = '1'	Attendance in past month	radio 1 1 session 2 2 sessions 3 3 sessions 4 4 sessions 5 5 sessions or more

1896	pat_loc_cbt_chw_g234_g2345_v2 Show the field ONLY if: [pat_cbt_chw_g234_g2345_v2] = '1'	Group location	notes, Required																													
1897	pat_no_cbt_chw_g234_g2345_v2 Show the field ONLY if: [pat_cbt_chw_g234_g2345_v2] = '0'	If not attending cessation group, why not	<div>checkbox, Required</div> <table><tr><td>1</td><td>pat_no_cbt_chw_g234_g2345_v2__1</td><td>I don't have a ride</td></tr><tr><td>2</td><td>pat_no_cbt_chw_g234_g2345_v2__2</td><td>Fear of adverse effects,</td></tr><tr><td>3</td><td>pat_no_cbt_chw_g234_g2345_v2__3</td><td>Family/friends /media recommended not going</td></tr><tr><td>4</td><td>pat_no_cbt_chw_g234_g2345_v2__4</td><td>I did it before and didn't like it (their past experiences),</td></tr><tr><td>5</td><td>pat_no_cbt_chw_g234_g2345_v2__5</td><td>I don't understand what the group is about</td></tr><tr><td>6</td><td>pat_no_cbt_chw_g234_g2345_v2__6</td><td>I'd rather quit smoking on my own</td></tr><tr><td>7</td><td>pat_no_cbt_chw_g234_g2345_v2__7</td><td>I don't want to quit smoking</td></tr><tr><td>8</td><td>pat_no_cbt_chw_g234_g2345_v2__8</td><td>Other</td></tr><tr><td>9</td><td>pat_no_cbt_chw_g234_g2345_v2__9</td><td>Prefer not to answer</td></tr></table>			1	pat_no_cbt_chw_g234_g2345_v2__1	I don't have a ride	2	pat_no_cbt_chw_g234_g2345_v2__2	Fear of adverse effects,	3	pat_no_cbt_chw_g234_g2345_v2__3	Family/friends /media recommended not going	4	pat_no_cbt_chw_g234_g2345_v2__4	I did it before and didn't like it (their past experiences),	5	pat_no_cbt_chw_g234_g2345_v2__5	I don't understand what the group is about	6	pat_no_cbt_chw_g234_g2345_v2__6	I'd rather quit smoking on my own	7	pat_no_cbt_chw_g234_g2345_v2__7	I don't want to quit smoking	8	pat_no_cbt_chw_g234_g2345_v2__8	Other	9	pat_no_cbt_chw_g234_g2345_v2__9	Prefer not to answer
1	pat_no_cbt_chw_g234_g2345_v2__1	I don't have a ride																														
2	pat_no_cbt_chw_g234_g2345_v2__2	Fear of adverse effects,																														
3	pat_no_cbt_chw_g234_g2345_v2__3	Family/friends /media recommended not going																														
4	pat_no_cbt_chw_g234_g2345_v2__4	I did it before and didn't like it (their past experiences),																														
5	pat_no_cbt_chw_g234_g2345_v2__5	I don't understand what the group is about																														
6	pat_no_cbt_chw_g234_g2345_v2__6	I'd rather quit smoking on my own																														
7	pat_no_cbt_chw_g234_g2345_v2__7	I don't want to quit smoking																														
8	pat_no_cbt_chw_g234_g2345_v2__8	Other																														
9	pat_no_cbt_chw_g234_g2345_v2__9	Prefer not to answer																														
1898	other_pat_no_cbt_chw_g234_g2345_v2 Show the field ONLY if: [pat_no_cbt_chw_g234_g2345_v2(8)] = '1'	Other	text, Required																													
1899	notes3_chw_g234_g2345_v2	Notes	notes Custom alignment: RH																													

1900	<p>session_prev_goals_chw_g234_g2345_v2</p> <p>Show the field ONLY if: [smoking_chw_g234_g2345_v2] = '1' or [smoking_chw_g234_g2345_v2] = '0'</p>	<p>Plan from previous session</p> <p>Visit 100: [visit_100_arm_2][session_next_goals_chw_g234_g2345]</p> <p>Visit 101: [visit_101_arm_2][session_next_goals_chw_g234_g2345_v2]</p> <p>Visit 102: [visit_102_arm_2][session_next_goals_chw_g234_g2345_v2]</p> <p>Visit 103: [visit_103_arm_2][session_next_goals_chw_g234_g2345_v2]</p> <p>Visit 104: [visit_104_arm_2][session_next_goals_chw_g234_g2345_v2]</p> <p>Visit 105: [visit_105_arm_2][session_next_goals_chw_g234_g2345_v2]</p> <p>Visit 106: [visit_106_arm_2][session_next_goals_chw_g234_g2345_v2]</p> <p>Visit 107: [visit_107_arm_2][session_next_goals_chw_g234_g2345_v2]</p> <p>Visit 108: [visit_108_arm_2][session_next_goals_chw_g234_g2345_v2]</p> <p>Visit 109: [visit_109_arm_2][session_next_goals_chw_g234_g2345_v2]</p> <p>Visit 110: [visit_110_arm_2][session_next_goals_chw_g234_g2345_v2]</p> <p>Visit 111: [visit_111_arm_2][session_next_goals_chw_g234_g2345_v2]</p> <p>Visit 112: [visit_112_arm_2][session_next_goals_chw_g234_g2345_v2]</p> <p>Visit 113: [visit_113_arm_2][session_next_goals_chw_g234_g2345_v2]</p> <p>Visit 114: [visit_114_arm_2][session_next_goals_chw_g234_g2345_v2]</p> <p>Visit 115: [visit_115_arm_2][session_next_goals_chw_g234_g2345_v2]</p> <p>Visit 116: [visit_116_arm_2][session_next_goals_chw_g234_g2345_v2]</p> <p>Visit 117: [visit_117_arm_2][session_next_goals_chw_g234_g2345_v2]</p> <p>Visit 118: [visit_118_arm_2][session_next_goals_chw_g234_g2345_v2]</p> <p>Visit 119: [visit_119_arm_2][session_next_goals_chw_g234_g2345_v2]</p>	descriptive						
1901	<p>pat_goals_acc_chw_g234_g2345_v2</p> <p>Show the field ONLY if: [seen_by_pcp_chw_g234_g2345_v2] = '1' or [seen_by_pcp_chw_g234_g2345_v2] = '2' or [seen_by_pcp_chw_g234_g2345_v2] = '3' or [seen_by_pcp_chw_g234_g2345_v2] = '4' or [seen_by_pcp_chw_g234_g2345_v2] = '5'</p>	<p>Plan accomplished?</p>	<p>radio, Required</p> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>3</td><td>Partially</td></tr></table>	1	Yes	2	No	3	Partially
1	Yes								
2	No								
3	Partially								
1902	<p>pat_goal_prog_chw_g234_g2345_v2</p> <p>Show the field ONLY if: [seen_by_pcp_chw_g234_g2345_v2] = '1' or [seen_by_pcp_chw_g234_g2345_v2] = '2' or [seen_by_pcp_chw_g234_g2345_v2] = '3' or [seen_by_pcp_chw_g234_g2345_v2] = '4' or [seen_by_pcp_chw_g234_g2345_v2] = '5'</p>	<p>Describe progress on plan</p>	<p>notes, Required</p>						
1903	<p>pat_goal_partially_chw_g234_g2345_v2</p> <p>Show the field ONLY if: [pat_goals_acc_chw_g234_g2345_v2] = '2' or [pat_goals_acc_chw_g234_g2345_v2] = '3'</p>	<p>If plan was not completed or was only partially completed, identify what got in the way and how to problem-solve in future</p>	<p>notes, Required</p>						

1904	session_content_chw_g234_g234_5_v2 Show the field ONLY if: [seen_by_pcp_chw_g234_g2345_v2] = '1' or [seen_by_pcp_chw_g234_g2345_v2] = '2' or [seen_by_pcp_chw_g234_g2345_v2] = '3' or [seen_by_pcp_chw_g234_g2345_v2] = '4' or [seen_by_pcp_chw_g234_g2345_v2] = '5'	Session Content	checkbox, Required		
			1	session_content_chw_g234_g2345_v2__1	Engagement and involvement
			2	session_content_chw_g234_g2345_v2__2	Motivational interviewing
			3	session_content_chw_g234_g2345_v2__3	Motivational tools
			4	session_content_chw_g234_g2345_v2__4	Education topic
			5	session_content_chw_g234_g2345_v2__5	Medication compliance
			6	session_content_chw_g234_g2345_v2__6	Care coordination
			7	session_content_chw_g234_g2345_v2__7	Progress
			8	session_content_chw_g234_g2345_v2__8	Other
			9	session_content_chw_g234_g2345_v2__9	Quit Line
1905	session_engag_chw_g234_g2345_v2 Show the field ONLY if: [session_content_chw_g234_g234_5_v2(1)] = '1'	1, Engagement and involvement	notes, Required Custom alignment: LH		
1906	pat_mi_chw_g234_g2345_v2 Show the field ONLY if: [session_content_chw_g234_g234_5_v2(2)] = '1'	2, Motivational Interviewing	notes, Required Custom alignment: LH		
1907	session_pros_cons_chw_g234_g2345_v2 Show the field ONLY if: [session_content_chw_g234_g234_5_v2(3)] = '1'	3, Motivational tools: (include benefits and barriers-be specific! Use patient's own words when possible)	checkbox, Required		
			1	session_pros_cons_chw_g234_g2345_v2__1	Identifying pros of smoking
			2	session_pros_cons_chw_g234_g2345_v2__2	Identifying cons of smoking
			3	session_pros_cons_chw_g234_g2345_v2__3	Health benefits from quitting smoking
			4	session_pros_cons_chw_g234_g2345_v2__4	Cessation medication
			5	session_pros_cons_chw_g234_g2345_v2__5	Promoting smoking groups
			6	session_pros_cons_chw_g234_g2345_v2__6	Other
			7	session_pros_cons_chw_g234_g2345_v2__7	CO and smoking
			8	session_pros_cons_chw_g234_g2345_v2__8	Smoking triggers, pack wraps
			9	session_pros_cons_chw_g234_g2345_v2__9	Reasons to quit smoking
			10	session_pros_cons_chw_g234_g2345_v2__10	Preparing for the quit day
1908	other_motiv_tools_chw_g234_g2345_v2 Show the field ONLY if: [session_pros_cons_chw_g234_g2345_v2(6)] = '1'	Other	text, Required		

1909	session_education_chw_g234_g2345_v2 Show the field ONLY if: [session_content_chw_g234_g2345_v2(4)] = '1'	4. Education Topic (check all that apply)	checkbox, Required	
			1	session_education_chw_g234_g2345_v2__1 Withdrawal symptoms
			2	session_education_chw_g234_g2345_v2__2 Coping with withdrawal
			3	session_education_chw_g234_g2345_v2__3 Cessation medication
			4	session_education_chw_g234_g2345_v2__4 Things to do instead of smoking, the 4Ds
			5	session_education_chw_g234_g2345_v2__5 Other
			6	session_education_chw_g234_g2345_v2__6 Dealing with stress
			7	session_education_chw_g234_g2345_v2__7 Dealing with weight gain
			8	session_education_chw_g234_g2345_v2__8 Dealing with high risk situations
			9	session_education_chw_g234_g2345_v2__9 Dealing with slips
1910	other_educ_chw_g234_g2345_v2 Show the field ONLY if: [session_education_chw_g234_g2345_v2(5)] = '1'	Other	text, Required	
1911	session_check_meds_chw_g234_g2345_v2 Show the field ONLY if: [session_content_chw_g234_g2345_v2(5)] = '1'	5. Check medication compliance	notes Custom alignment: LH	
1912	session_care_chw_g234_g2345_v2 Show the field ONLY if: [session_content_chw_g234_g2345_v2(6)] = '1'	6. Care coordination (check all that apply)	checkbox, Required	
			1	session_care_chw_g234_g2345_v2__1 Scheduling PCP visit
			2	session_care_chw_g234_g2345_v2__2 Smoking cessation group
			3	session_care_chw_g234_g2345_v2__3 Other
			4	session_care_chw_g234_g2345_v2__4 Pharmacy and medications
1913	other_care_chw_g234_g2345_v2 Show the field ONLY if: [session_care_chw_g234_g2345_v2(3)] = '1'	Other	text, Required	
1914	session_progress_chw_g234_g2345_v2 Show the field ONLY if: [session_content_chw_g234_g2345_v2(7)] = '1'	7. Reinforcing progress and identifying what has been helpful in achieving gains (e.g., scheduling PCP visit, smoking cessation group)	notes Custom alignment: LH	
1915	session_other_chw_g234_g2345_v2 Show the field ONLY if: [session_content_chw_g234_g2345_v2(8)] = '1'	8. Other	notes Custom alignment: LH	
1916	session_qline_chw_g234_g2345_v2 Show the field ONLY if: [session_content_chw_g234_g2345_v2(9)] = '1'	9. QUIT LINE Was QUIT LINE presented/discussed to participant TODAY?	yesno, Required	
			1	Yes
			0	No
			Custom alignment: LH	

1917	session_noqline_chw_g234_g234_5_v2 Show the field ONLY if: [session_qline_chw_g234_g234_5_v2] = '0'	Why not?	notes, Required Custom alignment: LH				
1918	session_qline_interest_chw_g234_g234_5_v2 Show the field ONLY if: [session_qline_chw_g234_g234_5_v2] = '1'	Was participant interested?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH	1	Yes	0	No
1	Yes						
0	No						
1919	session_qlineatsession_chw_g234_g234_5_v2 Show the field ONLY if: [session_qline_chw_g234_g234_5_v2] = '1'	Did the participant call the Quit Line during this session?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH	1	Yes	0	No
1	Yes						
0	No						
1920	session_qlinenoatsession_chw_g234_g234_5_v2 Show the field ONLY if: [session_qlineatsession_chw_g234_g234_5_v2] = '0'	Why not?	notes, Required Custom alignment: LH				
1921	session_qlinesched_chw_g234_g234_5_v2 Show the field ONLY if: [session_qlineatsession_chw_g234_g234_5_v2] = '0'	Was a Quit Line call scheduled?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH	1	Yes	0	No
1	Yes						
0	No						
1922	session_qlinenosched_chw_g234_g234_5_v2 Show the field ONLY if: [session_qlinesched_chw_g234_g234_5_v2] = '0'	Why not?	notes, Required Custom alignment: LH				
1923	session_qlinetime_chw_g234_g234_5_v2 Show the field ONLY if: [session_qlineatsession_chw_g234_g234_5_v2] = '1'	Date/time Quit Line call	text (datetime_mdy), Required Custom alignment: LH				
1924	session_qline_chwinvolv_g234_g234_5_v2 Show the field ONLY if: [session_qlineatsession_chw_g234_g234_5_v2] = '1'	Was the CHW involved in the Quit Line call?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH	1	Yes	0	No
1	Yes						
0	No						
1925	session_qlinecall_chw_g234_g234_5_v2 Show the field ONLY if: [session_qlineatsession_chw_g234_g234_5_v2] = '1'	Describe session/call	notes, Required Custom alignment: LH				
1926	session_qlinenrt_chw_g234_g234_5_v2 Show the field ONLY if: [session_qlineatsession_chw_g234_g234_5_v2] = '1'	Did the participant/CHW request NRT? Please explain	notes, Required Custom alignment: LH				
1927	session_qlinenrtuse_chw_g234_g234_5_v2 Show the field ONLY if: [session_qlineatsession_chw_g234_g234_5_v2] = '1'	Did the participant use the NRT? Please explain	notes, Required Custom alignment: LH				
1928	session_qlineable_chw_g234_g234_5_v2 Show the field ONLY if: [session_qlineatsession_chw_g234_g234_5_v2] = '1'	Did the quitline staff seem able to work with people with SMI? Please explain	notes, Required Custom alignment: LH				

1929	session_qlinefu_chw_g234_g2345_v2 Show the field ONLY if: [session_qlineatsession_chw_g234_g2345_v2] = '1'	Was a follow up call scheduled?	notes, Required Custom alignment: LH																										
1930	session_qlinecom_chw_g234_g2345_v2	Quit Line Notes	notes Custom alignment: LH																										
1931	session_descript_chw_g234_g2345_v2	Brief description of the session	notes, Required Custom alignment: LH																										
1932	session_next_goals_chw_g234_g2345_v2	Goals for next session	notes, Required Custom alignment: LH																										
1933	next_visit_all_chw_g234_g2345_v2	Next visit will be	text (datetime_mdy), Required Field Annotation: @HIDEBUTTON																										
1934	name_chw_g234_g2345_v2	CHW	radio, Required <table><tr><td>1</td><td>Alexandra Fortune</td></tr><tr><td>2</td><td>Ashley Newman</td></tr><tr><td>3</td><td>Aysha Peralta</td></tr><tr><td>4</td><td>Erin Hanrahan</td></tr><tr><td>5</td><td>John Dowd</td></tr><tr><td>6</td><td>Karlie Marrs</td></tr><tr><td>7</td><td>Leeza Rojas</td></tr><tr><td>8</td><td>Madalyn Davis</td></tr><tr><td>9</td><td>Madeleine Fontaine</td></tr><tr><td>10</td><td>Megan Donnelly</td></tr><tr><td>11</td><td>Morgan Boudreau</td></tr><tr><td>12</td><td>Nina Cherilus</td></tr><tr><td>13</td><td>Carlos Taveras</td></tr></table>	1	Alexandra Fortune	2	Ashley Newman	3	Aysha Peralta	4	Erin Hanrahan	5	John Dowd	6	Karlie Marrs	7	Leeza Rojas	8	Madalyn Davis	9	Madeleine Fontaine	10	Megan Donnelly	11	Morgan Boudreau	12	Nina Cherilus	13	Carlos Taveras
1	Alexandra Fortune																												
2	Ashley Newman																												
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7	Leeza Rojas																												
8	Madalyn Davis																												
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10	Megan Donnelly																												
11	Morgan Boudreau																												
12	Nina Cherilus																												
13	Carlos Taveras																												
1935	contact_sheet_all_visits_chw_101_120_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete																				
0	Incomplete																												
1	Unverified																												
2	Complete																												
Instrument: Contact Sheet All Visits CHW 121_140 (contact_sheet_all_visits_chw_121_140) ^ Collapse																													
1936	date_all_visits_chw_g234_g2345_v2_v3	Visit Date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																										
1937	start_all_visits_chw_g234_g2345_v2_v3	Start time	text (time), Required																										
1938	end_all_visits_chw_g234_g2345_v2_v3	End time	text (time), Required																										
1939	visit_modality_chw_g234_g2345_v2_v3	Visit modality	radio, Required <table><tr><td>1</td><td>Phone visit</td></tr><tr><td>2</td><td>In person visit</td></tr></table>	1	Phone visit	2	In person visit																						
1	Phone visit																												
2	In person visit																												
1940	reason_phone_chw_g234_g2345_v2_v3 Show the field ONLY if: [visit_modality_chw_g234_g2345_v2_v3] = '1'	Reasons for the phone visit (select all that apply)	checkbox, Required <table><tr><td>1</td><td>reason_phone_chw_g234_g2345_v2_v3__1</td><td>Help preparing for quit day</td></tr><tr><td>2</td><td>reason_phone_chw_g234_g2345_v2_v3__2</td><td>Quit day</td></tr><tr><td>3</td><td>reason_phone_chw_g234_g2345_v2_v3__3</td><td>Check for withdrawal symptoms</td></tr><tr><td>4</td><td>reason_phone_chw_g234_g2345_v2_v3__4</td><td>Medication compliance/side effects</td></tr><tr><td>5</td><td>reason_phone_chw_g234_g2345_v2_v3__5</td><td>Other</td></tr></table>	1	reason_phone_chw_g234_g2345_v2_v3__1	Help preparing for quit day	2	reason_phone_chw_g234_g2345_v2_v3__2	Quit day	3	reason_phone_chw_g234_g2345_v2_v3__3	Check for withdrawal symptoms	4	reason_phone_chw_g234_g2345_v2_v3__4	Medication compliance/side effects	5	reason_phone_chw_g234_g2345_v2_v3__5	Other											
1	reason_phone_chw_g234_g2345_v2_v3__1	Help preparing for quit day																											
2	reason_phone_chw_g234_g2345_v2_v3__2	Quit day																											
3	reason_phone_chw_g234_g2345_v2_v3__3	Check for withdrawal symptoms																											
4	reason_phone_chw_g234_g2345_v2_v3__4	Medication compliance/side effects																											
5	reason_phone_chw_g234_g2345_v2_v3__5	Other																											
1941	other_reason_phone_chw_g234_g2345_v2_v3 Show the field ONLY if: [reason_phone_chw_g234_g2345_v2_v3(5)] = '1'	Other reason for a phone visit	text, Required																										

1942	<div>reasons_contact_chw_g234_g234_5_v2_v3</div> <div>Show the field ONLY if: [visit_modality_chw_g234_g2345_v2_v3] = '2'</div>	<div>Reasons for In Person meeting (select all that apply)</div>	<div>checkbox, Required</div> <table><tr><td>1</td><td>reasons_contact_chw_g234_g2345_v2_v3__1</td><td>Initial visit/obtain consent</td></tr><tr><td>2</td><td>reasons_contact_chw_g234_g2345_v2_v3__2</td><td>Intervention visit</td></tr><tr><td>3</td><td>reasons_contact_chw_g234_g2345_v2_v3__3</td><td>Taking participant t smoking gro</td></tr><tr><td>4</td><td>reasons_contact_chw_g234_g2345_v2_v3__4</td><td>Taking participant t PCP</td></tr><tr><td>5</td><td>reasons_contact_chw_g234_g2345_v2_v3__5</td><td>Other</td></tr><tr><td>6</td><td>reasons_contact_chw_g234_g2345_v2_v3__6</td><td>Medication compliance/ effects</td></tr></table>	1	reasons_contact_chw_g234_g2345_v2_v3__1	Initial visit/obtain consent	2	reasons_contact_chw_g234_g2345_v2_v3__2	Intervention visit	3	reasons_contact_chw_g234_g2345_v2_v3__3	Taking participant t smoking gro	4	reasons_contact_chw_g234_g2345_v2_v3__4	Taking participant t PCP	5	reasons_contact_chw_g234_g2345_v2_v3__5	Other	6	reasons_contact_chw_g234_g2345_v2_v3__6	Medication compliance/ effects
1	reasons_contact_chw_g234_g2345_v2_v3__1	Initial visit/obtain consent																			
2	reasons_contact_chw_g234_g2345_v2_v3__2	Intervention visit																			
3	reasons_contact_chw_g234_g2345_v2_v3__3	Taking participant t smoking gro																			
4	reasons_contact_chw_g234_g2345_v2_v3__4	Taking participant t PCP																			
5	reasons_contact_chw_g234_g2345_v2_v3__5	Other																			
6	reasons_contact_chw_g234_g2345_v2_v3__6	Medication compliance/ effects																			
1943	<div>other_reason_contact_chw_g234_g2345_v2_v3</div> <div>Show the field ONLY if: [reasons_contact_chw_g234_g2345_v2_v3(5)] = '1'</div>	<div>Other reason for an In Person Meeting</div>	<div>text, Required</div>																		
1944	<div>smoking_chw_g234_g2345_v2_v3</div>	<div>Section Header: <i>Smoking Behavior</i></div> <div>Has the participant smoked in the past 7 days?</div>	<div>yesno, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																				
0	No																				
1945	<div>notes1_chw_g234_g2345_v2_v3</div>	<div>Notes</div>	<div>notes</div> <div>Custom alignment: RH</div>																		
1946	<div>tobacco_prod_chw_g234_g2345_v2_v3</div>	<div>Which tobacco products does the participant currently smoke? (I.e. Cigarettes, Cigars, Cigarillos, Rollics, Mini Cigars, Pipe)</div> <div>Select all that apply</div>	<div>checkbox</div> <table><tr><td>1</td><td>tobacco_prod_chw_g234_g2345_v2_v3__1</td><td>Cigarettes</td></tr><tr><td>2</td><td>tobacco_prod_chw_g234_g2345_v2_v3__2</td><td>Mini cigars (I.e. double diamor</td></tr><tr><td>3</td><td>tobacco_prod_chw_g234_g2345_v2_v3__3</td><td>loose tobacco (your own, rollie</td></tr><tr><td>4</td><td>tobacco_prod_chw_g234_g2345_v2_v3__4</td><td>e-cigarettes/va</td></tr><tr><td>5</td><td>tobacco_prod_chw_g234_g2345_v2_v3__5</td><td>Other</td></tr><tr><td>6</td><td>tobacco_prod_chw_g234_g2345_v2_v3__6</td><td>Quit smoking</td></tr></table>	1	tobacco_prod_chw_g234_g2345_v2_v3__1	Cigarettes	2	tobacco_prod_chw_g234_g2345_v2_v3__2	Mini cigars (I.e. double diamor	3	tobacco_prod_chw_g234_g2345_v2_v3__3	loose tobacco (your own, rollie	4	tobacco_prod_chw_g234_g2345_v2_v3__4	e-cigarettes/va	5	tobacco_prod_chw_g234_g2345_v2_v3__5	Other	6	tobacco_prod_chw_g234_g2345_v2_v3__6	Quit smoking
1	tobacco_prod_chw_g234_g2345_v2_v3__1	Cigarettes																			
2	tobacco_prod_chw_g234_g2345_v2_v3__2	Mini cigars (I.e. double diamor																			
3	tobacco_prod_chw_g234_g2345_v2_v3__3	loose tobacco (your own, rollie																			
4	tobacco_prod_chw_g234_g2345_v2_v3__4	e-cigarettes/va																			
5	tobacco_prod_chw_g234_g2345_v2_v3__5	Other																			
6	tobacco_prod_chw_g234_g2345_v2_v3__6	Quit smoking																			
1947	<div>cpd_chw_g234_g2345_v2_v3</div> <div>Show the field ONLY if: [smoking_chw_g234_g2345_v2_v3] = '1'</div>	<div>On average, how many cigarettes (or other tobacco product) per day has the participant smoked in past 7 days?</div>	<div>text (integer), Required</div>																		
1948	<div>cpd_non_daily_chw_g234_g2345_v2_v3</div>	<div>COMPLETE ONLY IF PARTICIPANT HASN'T BEEN SMOKING EVERY DAY DURING THE PAST WEEK</div> <div>On average, how many cigarettes (or other tobacco product) per WEEK has the participant smoked in past week?</div>	<div>text</div>																		
1949	<div>last_cigarette_chw_g234_g2345_v2_v3</div> <div>Show the field ONLY if: [smoking_chw_g234_g2345_v2_v3] = '1' or [smoking_chw_g234_g2345_v2_v3] = '0'</div>	<div>Time of last cigarette (or other tobacco product)</div>	<div>text (datetime_mdy), Required</div> <div>Custom alignment: RH</div> <div>Field Annotation: @HIDEBUTTON</div>																		
1950	<div>pat_co_done_chw_g234_g2345_v2_v3</div> <div>Show the field ONLY if: [visit_modality_chw_g234_g2345_v2_v3] = '2'</div>	<div>Was CO testing completed today?</div>	<div>yesno, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																				
0	No																				

1951	pat_yes_co_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2_v3] = '1'	Reasons for CO measurement	checkbox, Required	
			1	pat_yes_co_chw_g234_g2345_v2_v3__1 Last CO month was done over a month ago
			2	pat_yes_co_chw_g234_g2345_v2_v3__2 Participant changed smoking behavior after last CO measurement (quit or relapsed)
			3	pat_yes_co_chw_g234_g2345_v2_v3__3 Participant asked for it
			4	pat_yes_co_chw_g234_g2345_v2_v3__4 Other
1952	pat_other_co_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_yes_co_chw_g234_g2345_v2_v3(4)] = '1'	Other	text, Required	
1953	expired_co_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2_v3] = '1'	Expired CO reading (ppm)	text (integer, Min: 0, Max: 100), Required	
1954	time_co_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2_v3] = '1'	Date of CO reading	text (date_mdy), Required Field Annotation: @HIDEBUTTON	
1955	hour_co_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2_v3] = '1'	Time of CO reading	text (time), Required	
1956	co_monitor_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2_v3] = '1'	CO Monitor ID	radio, Required	
			1	A
			2	B
			3	C
			4	D
			5	E
			6	F
			7	G
			8	H
			9	I
			10	J
			11	K
			12	L
			13	M
			14	N
			15	O
			16	P
			Custom alignment: RH	
1957	co_exec_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2_v3] = '1'	Was CO measuring executed properly?	yesno, Required	
			1	Yes
			0	No

1958	pat_no_co_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2_v3] = '0'	Reasons for NO CO measurement	checkbox, Required <table><tr><td>1</td><td>pat_no_co_chw_g234_g2345_v2_v3__1</td><td>CO was done within the past month and there was no change in smoking behavior</td></tr><tr><td>2</td><td>pat_no_co_chw_g234_g2345_v2_v3__2</td><td>Participant refused</td></tr><tr><td>3</td><td>pat_no_co_chw_g234_g2345_v2_v3__3</td><td>Participant unable (respiratory illness, symptomatic)</td></tr><tr><td>4</td><td>pat_no_co_chw_g234_g2345_v2_v3__4</td><td>Other</td></tr></table>	1	pat_no_co_chw_g234_g2345_v2_v3__1	CO was done within the past month and there was no change in smoking behavior	2	pat_no_co_chw_g234_g2345_v2_v3__2	Participant refused	3	pat_no_co_chw_g234_g2345_v2_v3__3	Participant unable (respiratory illness, symptomatic)	4	pat_no_co_chw_g234_g2345_v2_v3__4	Other						
1	pat_no_co_chw_g234_g2345_v2_v3__1	CO was done within the past month and there was no change in smoking behavior																			
2	pat_no_co_chw_g234_g2345_v2_v3__2	Participant refused																			
3	pat_no_co_chw_g234_g2345_v2_v3__3	Participant unable (respiratory illness, symptomatic)																			
4	pat_no_co_chw_g234_g2345_v2_v3__4	Other																			
1959	other_no_co_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_no_co_chw_g234_g2345_v2_v3(4)] = '1'	Other	text, Required																		
1960	notes_co_chw_g234_g2345_v2_v3	Notes	notes Custom alignment: RH																		
1961	seen_by_pcp_chw_g234_g2345_v2_v3 Show the field ONLY if: [visit_modality_chw_g234_g2345_v2_v3] = '2'	Was subject seen by primary care team since last meeting?	radio, Required <table><tr><td>1</td><td>None scheduled</td></tr><tr><td>2</td><td>No, missed visit</td></tr><tr><td>3</td><td>Yes, smoking discussed</td></tr><tr><td>4</td><td>Yes, smoking not discussed</td></tr><tr><td>5</td><td>Unknown</td></tr></table>	1	None scheduled	2	No, missed visit	3	Yes, smoking discussed	4	Yes, smoking not discussed	5	Unknown								
1	None scheduled																				
2	No, missed visit																				
3	Yes, smoking discussed																				
4	Yes, smoking not discussed																				
5	Unknown																				
1962	pcp_recommend_pat_chw_g234_g2345_v2_v3 Show the field ONLY if: [seen_by_pcp_chw_g234_g2345_v2_v3] = '3'	Did the PCP recommend that the participant quit smoking?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																				
0	No																				
1963	pcp_prescribed_pat_chw_g234_g2345_v2_v3 Show the field ONLY if: [seen_by_pcp_chw_g234_g2345_v2_v3] = '3'	Did PCP prescribe smoking cessation medication?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																				
0	No																				
1964	pat_what_prescribed_chw_g234_g2345_v2_v3 Show the field ONLY if: [pcp_prescribed_pat_chw_g234_g2345_v2_v3] = '1' or [reason_phone_chw_g234_g2345_v2_v3(4)] = '1'	What did the PCP prescribe?	checkbox, Required <table><tr><td>1</td><td>pat_what_prescribed_chw_g234_g2345_v2_v3__1</td><td>Varenicline (i.e. Chantix)</td></tr><tr><td>2</td><td>pat_what_prescribed_chw_g234_g2345_v2_v3__2</td><td>Nicotine patch</td></tr><tr><td>3</td><td>pat_what_prescribed_chw_g234_g2345_v2_v3__3</td><td>Bupropion (i.e. Wellbutrin/Zyban)</td></tr><tr><td>4</td><td>pat_what_prescribed_chw_g234_g2345_v2_v3__4</td><td>Nicotine gum</td></tr><tr><td>5</td><td>pat_what_prescribed_chw_g234_g2345_v2_v3__5</td><td>Nicotine lozenge</td></tr><tr><td>6</td><td>pat_what_prescribed_chw_g234_g2345_v2_v3__6</td><td>Other</td></tr></table>	1	pat_what_prescribed_chw_g234_g2345_v2_v3__1	Varenicline (i.e. Chantix)	2	pat_what_prescribed_chw_g234_g2345_v2_v3__2	Nicotine patch	3	pat_what_prescribed_chw_g234_g2345_v2_v3__3	Bupropion (i.e. Wellbutrin/Zyban)	4	pat_what_prescribed_chw_g234_g2345_v2_v3__4	Nicotine gum	5	pat_what_prescribed_chw_g234_g2345_v2_v3__5	Nicotine lozenge	6	pat_what_prescribed_chw_g234_g2345_v2_v3__6	Other
1	pat_what_prescribed_chw_g234_g2345_v2_v3__1	Varenicline (i.e. Chantix)																			
2	pat_what_prescribed_chw_g234_g2345_v2_v3__2	Nicotine patch																			
3	pat_what_prescribed_chw_g234_g2345_v2_v3__3	Bupropion (i.e. Wellbutrin/Zyban)																			
4	pat_what_prescribed_chw_g234_g2345_v2_v3__4	Nicotine gum																			
5	pat_what_prescribed_chw_g234_g2345_v2_v3__5	Nicotine lozenge																			
6	pat_what_prescribed_chw_g234_g2345_v2_v3__6	Other																			
1965	other_prescribed_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_prescribed_chw_g234_g2345_v2_v3(6)] = '1'	Other	text, Required																		

1966	pat_filled_med_chw_g234_g2345_v2_v3 Show the field ONLY if: [pcp_prescribed_pat_chw_g234_g2345_v2_v3] = '1' or [reason_phone_chw_g234_g2345_v2_v3(4)] = '1'	Did the participant fill the prescription for the smoking cessation medication?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>		1	Yes	0	No														
1	Yes																					
0	No																					
1967	pat_what_taking_chw_g234_g2345_v2_v3 Show the field ONLY if: [pcp_prescribed_pat_chw_g234_g2345_v2_v3] = '1' or [reason_phone_chw_g234_g2345_v2_v3(4)] = '1' or [reasons_contact_chw_g234_g2345_v2_v3(6)] = '1'	What is the participant taking?	checkbox, Required <table><tr><td>1</td><td>pat_what_taking_chw_g234_g2345_v2_v3__1</td><td>Varenicline (i.e. Chantix)</td></tr><tr><td>2</td><td>pat_what_taking_chw_g234_g2345_v2_v3__2</td><td>Nicotine patch</td></tr><tr><td>3</td><td>pat_what_taking_chw_g234_g2345_v2_v3__3</td><td>Bupropion (i.e. Wellbutrin, Zyban)</td></tr><tr><td>4</td><td>pat_what_taking_chw_g234_g2345_v2_v3__4</td><td>Nicotine gum</td></tr><tr><td>5</td><td>pat_what_taking_chw_g234_g2345_v2_v3__5</td><td>Nicotine lozenge</td></tr><tr><td>6</td><td>pat_what_taking_chw_g234_g2345_v2_v3__6</td><td>Other</td></tr></table>		1	pat_what_taking_chw_g234_g2345_v2_v3__1	Varenicline (i.e. Chantix)	2	pat_what_taking_chw_g234_g2345_v2_v3__2	Nicotine patch	3	pat_what_taking_chw_g234_g2345_v2_v3__3	Bupropion (i.e. Wellbutrin, Zyban)	4	pat_what_taking_chw_g234_g2345_v2_v3__4	Nicotine gum	5	pat_what_taking_chw_g234_g2345_v2_v3__5	Nicotine lozenge	6	pat_what_taking_chw_g234_g2345_v2_v3__6	Other
1	pat_what_taking_chw_g234_g2345_v2_v3__1	Varenicline (i.e. Chantix)																				
2	pat_what_taking_chw_g234_g2345_v2_v3__2	Nicotine patch																				
3	pat_what_taking_chw_g234_g2345_v2_v3__3	Bupropion (i.e. Wellbutrin, Zyban)																				
4	pat_what_taking_chw_g234_g2345_v2_v3__4	Nicotine gum																				
5	pat_what_taking_chw_g234_g2345_v2_v3__5	Nicotine lozenge																				
6	pat_what_taking_chw_g234_g2345_v2_v3__6	Other																				
1968	pat_other_med_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(6)] = '1'	Other	text, Required																			
1969	pat_var_dose_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(1)] = '1'	Varenicline (Chantix) Dose	radio, Required <table><tr><td>1</td><td>0.5 mg once a day</td></tr><tr><td>2</td><td>0.5 mg twice a day</td></tr><tr><td>3</td><td>1 mg once a day</td></tr><tr><td>4</td><td>1 mg twice a day</td></tr><tr><td>5</td><td>Other</td></tr></table>		1	0.5 mg once a day	2	0.5 mg twice a day	3	1 mg once a day	4	1 mg twice a day	5	Other								
1	0.5 mg once a day																					
2	0.5 mg twice a day																					
3	1 mg once a day																					
4	1 mg twice a day																					
5	Other																					
1970	pat_var_other_dose_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_var_dose_chw_g234_g2345_v2_v3] = '5'	Other Dose	text, Required																			
1971	pat_var_start_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(1)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																			
1972	pat_7days_var_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(1)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>		1	1	2	2	3	3	4	4	5	5	6	6	7	7				
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1973	var_still_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(1)] = '1'	Is participant still taking Varenicline?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>		1	Yes	0	No														
1	Yes																					
0	No																					
1974	pat_var_end_chw_g234_g2345_v2_v3 Show the field ONLY if: [var_still_chw_g234_g2345_v2_v3] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																			

1975	pat_bup_dose_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(3)] = '1'	Bupropion (Wellbutrin, Zyban) dose	radio, Required <table><tr><td>1</td><td>150 mg once a day</td></tr><tr><td>2</td><td>150 mg twice a day</td></tr><tr><td>3</td><td>Other</td></tr></table>	1	150 mg once a day	2	150 mg twice a day	3	Other								
1	150 mg once a day																
2	150 mg twice a day																
3	Other																
1976	pat_bup_other_dose_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_bup_dose_chw_g234_g2345_v2_v3] = '3'	Other Dose	text, Required														
1977	pat_bup_start_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(3)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1978	pat_7days_bup_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(3)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
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1979	bup_still_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(3)] = '1'	Is participant still taking Bupropion?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1980	pat_bup_end_chw_g234_g2345_v2_v3 Show the field ONLY if: [bup_still_chw_g234_g2345_v2_v3] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1981	pat_patch_dose_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(2)] = '1'	Nicotine patch dose	radio, Required <table><tr><td>1</td><td>21 mg</td></tr><tr><td>2</td><td>14 mg</td></tr><tr><td>3</td><td>7 mg</td></tr><tr><td>4</td><td>Other</td></tr></table>	1	21 mg	2	14 mg	3	7 mg	4	Other						
1	21 mg																
2	14 mg																
3	7 mg																
4	Other																
1982	pat_patch_other_dose_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_patch_dose_chw_g234_g2345_v2_v3] = '4'	Other Dose	text, Required														
1983	pat_patch_start_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(2)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1984	pat_7days_patch_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(2)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
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5	5																
6	6																
7	7																
1985	patch_still_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(2)] = '1'	Is participant still using the patch?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																

1986	pat_patch_end_chw_g234_g2345_v2_v3 Show the field ONLY if: [patch_still_chw_g234_g2345_v2_v3] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1987	pat_gum_dose_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(4)] = '1'	Nicotine gum	radio, Required <table><tr><td>1</td><td>4-6 mg per day</td></tr><tr><td>2</td><td>8-10 mg per day</td></tr><tr><td>3</td><td>12-14 mg per day</td></tr><tr><td>4</td><td>16-18 mg per day</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	4-6 mg per day	2	8-10 mg per day	3	12-14 mg per day	4	16-18 mg per day	5	Other				
1	4-6 mg per day																
2	8-10 mg per day																
3	12-14 mg per day																
4	16-18 mg per day																
5	Other																
1988	pat_gum_other_dose_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_gum_dose_chw_g234_g2345_v2_v3] = '5'	Other Dose	text, Required														
1989	pat_gum_start_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(4)] = '1'	Start date	text (date_mdy), Required														
1990	pat_7days_gum_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(4)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
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1991	gum_still_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(4)] = '1'	Is participant still using the gum?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
1992	pat_gum_end_chw_g234_g2345_v2_v3 Show the field ONLY if: [gum_still_chw_g234_g2345_v2_v3] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
1993	pat_loz_dose_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(5)] = '1'	Nicotine lozenges	radio, Required <table><tr><td>1</td><td>4-6 mg per day</td></tr><tr><td>2</td><td>8-10 mg per day</td></tr><tr><td>3</td><td>12-14 mg per day</td></tr><tr><td>4</td><td>16-18 mg per day</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	4-6 mg per day	2	8-10 mg per day	3	12-14 mg per day	4	16-18 mg per day	5	Other				
1	4-6 mg per day																
2	8-10 mg per day																
3	12-14 mg per day																
4	16-18 mg per day																
5	Other																
1994	pat_loz_other_dose_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_loz_dose_chw_g234_g2345_v2_v3] = '5'	Other Dose	text, Required														
1995	pat_loz_start_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(5)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														

1996	pat_7days_loz_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(5)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>			1	1	2	2	3	3	4	4	5	5	6	6	7	7																			
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6	6																																					
7	7																																					
1997	gum_still_chw_2_g234_g2345_v2_v3 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v3(5)] = '1'	Is participant still using the lozenges?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>			1	Yes	0	No																													
1	Yes																																					
0	No																																					
1998	pat_loz_end_chw_g234_g2345_v2_v3 Show the field ONLY if: [gum_still_chw_2_g234_g2345_v2_v3] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																																			
1999	pat_no_meds_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_filled_med_chw_g234_g2345_v2_v3] = '0'	if not taking smoking cessation medication, why not	checkbox, Required <table><tr><td>1</td><td>pat_no_meds_chw_g234_g2345_v2_v3__1</td><td>I don't need/take more medications</td></tr><tr><td>2</td><td>pat_no_meds_chw_g234_g2345_v2_v3__2</td><td>Fear of adverse effects,</td></tr><tr><td>3</td><td>pat_no_meds_chw_g234_g2345_v2_v3__3</td><td>Family/friend/media recommendation taking it</td></tr><tr><td>4</td><td>pat_no_meds_chw_g234_g2345_v2_v3__4</td><td>I took it before but didn't like the side effects (their past experiences)</td></tr><tr><td>5</td><td>pat_no_meds_chw_g234_g2345_v2_v3__5</td><td>I didn't understand what the treatment was about</td></tr><tr><td>6</td><td>pat_no_meds_chw_g234_g2345_v2_v3__6</td><td>I couldn't afford it</td></tr><tr><td>7</td><td>pat_no_meds_chw_g234_g2345_v2_v3__7</td><td>I'd rather go back to smoking group</td></tr><tr><td>8</td><td>pat_no_meds_chw_g234_g2345_v2_v3__8</td><td>I forgot</td></tr><tr><td>9</td><td>pat_no_meds_chw_g234_g2345_v2_v3__9</td><td>Other</td></tr><tr><td>10</td><td>pat_no_meds_chw_g234_g2345_v2_v3__10</td><td>Prefer not to answer</td></tr><tr><td>11</td><td>pat_no_meds_chw_g234_g2345_v2_v3__11</td><td>I didn't want to quit smoking/already quit/changed my mind</td></tr></table>			1	pat_no_meds_chw_g234_g2345_v2_v3__1	I don't need/take more medications	2	pat_no_meds_chw_g234_g2345_v2_v3__2	Fear of adverse effects,	3	pat_no_meds_chw_g234_g2345_v2_v3__3	Family/friend/media recommendation taking it	4	pat_no_meds_chw_g234_g2345_v2_v3__4	I took it before but didn't like the side effects (their past experiences)	5	pat_no_meds_chw_g234_g2345_v2_v3__5	I didn't understand what the treatment was about	6	pat_no_meds_chw_g234_g2345_v2_v3__6	I couldn't afford it	7	pat_no_meds_chw_g234_g2345_v2_v3__7	I'd rather go back to smoking group	8	pat_no_meds_chw_g234_g2345_v2_v3__8	I forgot	9	pat_no_meds_chw_g234_g2345_v2_v3__9	Other	10	pat_no_meds_chw_g234_g2345_v2_v3__10	Prefer not to answer	11	pat_no_meds_chw_g234_g2345_v2_v3__11	I didn't want to quit smoking/already quit/changed my mind
1	pat_no_meds_chw_g234_g2345_v2_v3__1	I don't need/take more medications																																				
2	pat_no_meds_chw_g234_g2345_v2_v3__2	Fear of adverse effects,																																				
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8	pat_no_meds_chw_g234_g2345_v2_v3__8	I forgot																																				
9	pat_no_meds_chw_g234_g2345_v2_v3__9	Other																																				
10	pat_no_meds_chw_g234_g2345_v2_v3__10	Prefer not to answer																																				
11	pat_no_meds_chw_g234_g2345_v2_v3__11	I didn't want to quit smoking/already quit/changed my mind																																				
2000	other_pat_no_meds_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_no_meds_chw_g234_g2345_v2_v3(9)] = '1'	Other	text, Required																																			
2001	pat_recommend_cbt_chw_g234_g2345_v2_v3 Show the field ONLY if: [seen_by_pcp_chw_g234_g2345_v2_v3] = '3'	Did the PCP recommend attending a smoking group?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>			1	Yes	0	No																													
1	Yes																																					
0	No																																					
2002	pat_cbt_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_recommend_cbt_chw_g234_g2345_v2_v3] = '1'	Is participant attending a smoking cessation group?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>			1	Yes	0	No																													
1	Yes																																					
0	No																																					

2003	pat_cbt_start_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_cbt_chw_g234_g2345_v2_v3] = '1'	Date started	text (date_mdy), Required Field Annotation: @HIDEBUTTON																															
2004	pat_att_cbt_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_cbt_chw_g234_g2345_v2_v3] = '1'	Attendance in past month	<table><tr><td colspan="3">radio</td></tr><tr><td>1</td><td colspan="2">1 session</td></tr><tr><td>2</td><td colspan="2">2 sessions</td></tr><tr><td>3</td><td colspan="2">3 sessions</td></tr><tr><td>4</td><td colspan="2">4 sessions</td></tr><tr><td>5</td><td colspan="2">5 sessions or more</td></tr></table>		radio			1	1 session		2	2 sessions		3	3 sessions		4	4 sessions		5	5 sessions or more													
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5	5 sessions or more																																	
2005	pat_loc_cbt_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_cbt_chw_g234_g2345_v2_v3] = '1'	Group location	notes, Required																															
2006	pat_no_cbt_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_cbt_chw_g234_g2345_v2_v3] = '0'	If not attending cessation group, why not	<table><tr><td colspan="3">checkbox, Required</td></tr><tr><td>1</td><td>pat_no_cbt_chw_g234_g2345_v2_v3__1</td><td>I don't have a ride</td></tr><tr><td>2</td><td>pat_no_cbt_chw_g234_g2345_v2_v3__2</td><td>Fear of adverse effects,</td></tr><tr><td>3</td><td>pat_no_cbt_chw_g234_g2345_v2_v3__3</td><td>Family/friends /media recommended not going</td></tr><tr><td>4</td><td>pat_no_cbt_chw_g234_g2345_v2_v3__4</td><td>I did it before and didn't like it (their past experiences),</td></tr><tr><td>5</td><td>pat_no_cbt_chw_g234_g2345_v2_v3__5</td><td>I don't understand what the group is about</td></tr><tr><td>6</td><td>pat_no_cbt_chw_g234_g2345_v2_v3__6</td><td>I'd rather quit smoking on my own</td></tr><tr><td>7</td><td>pat_no_cbt_chw_g234_g2345_v2_v3__7</td><td>I don't want to quit smoking</td></tr><tr><td>8</td><td>pat_no_cbt_chw_g234_g2345_v2_v3__8</td><td>Other</td></tr><tr><td>9</td><td>pat_no_cbt_chw_g234_g2345_v2_v3__9</td><td>Prefer not to answer</td></tr></table>		checkbox, Required			1	pat_no_cbt_chw_g234_g2345_v2_v3__1	I don't have a ride	2	pat_no_cbt_chw_g234_g2345_v2_v3__2	Fear of adverse effects,	3	pat_no_cbt_chw_g234_g2345_v2_v3__3	Family/friends /media recommended not going	4	pat_no_cbt_chw_g234_g2345_v2_v3__4	I did it before and didn't like it (their past experiences),	5	pat_no_cbt_chw_g234_g2345_v2_v3__5	I don't understand what the group is about	6	pat_no_cbt_chw_g234_g2345_v2_v3__6	I'd rather quit smoking on my own	7	pat_no_cbt_chw_g234_g2345_v2_v3__7	I don't want to quit smoking	8	pat_no_cbt_chw_g234_g2345_v2_v3__8	Other	9	pat_no_cbt_chw_g234_g2345_v2_v3__9	Prefer not to answer
checkbox, Required																																		
1	pat_no_cbt_chw_g234_g2345_v2_v3__1	I don't have a ride																																
2	pat_no_cbt_chw_g234_g2345_v2_v3__2	Fear of adverse effects,																																
3	pat_no_cbt_chw_g234_g2345_v2_v3__3	Family/friends /media recommended not going																																
4	pat_no_cbt_chw_g234_g2345_v2_v3__4	I did it before and didn't like it (their past experiences),																																
5	pat_no_cbt_chw_g234_g2345_v2_v3__5	I don't understand what the group is about																																
6	pat_no_cbt_chw_g234_g2345_v2_v3__6	I'd rather quit smoking on my own																																
7	pat_no_cbt_chw_g234_g2345_v2_v3__7	I don't want to quit smoking																																
8	pat_no_cbt_chw_g234_g2345_v2_v3__8	Other																																
9	pat_no_cbt_chw_g234_g2345_v2_v3__9	Prefer not to answer																																
2007	other_pat_no_cbt_chw_g234_g2345_v2_v3 Show the field ONLY if: [pat_no_cbt_chw_g234_g2345_v2_v3(8)] = '1'	Other	text, Required																															
2008	notes3_chw_g234_g2345_v2_v3	Notes	notes Custom alignment: RH																															

2009	<p>session_prev_goals_chw_g234_g2345_v2_v3</p> <p>Show the field ONLY if: [smoking_chw_g234_g2345_v2_v3] = '1' or [smoking_chw_g234_g2345_v2_v3] = '0'</p>	<p>Plan from previous session</p> <p>Visit 120: [visit_120_arm_2][session_next_goals_chw_g234_g2345_v2]</p> <p>Visit 121: [visit_121_arm_2][session_next_goals_chw_g234_g2345_v2_v3]</p> <p>Visit 122: [visit_122_arm_2][session_next_goals_chw_g234_g2345_v2_v3]</p> <p>Visit 123: [visit_123_arm_2][session_next_goals_chw_g234_g2345_v2_v3]</p> <p>Visit 124: [visit_124_arm_2][session_next_goals_chw_g234_g2345_v2_v3]</p> <p>Visit 125: [visit_125_arm_2][session_next_goals_chw_g234_g2345_v2_v3]</p> <p>Visit 126: [visit_126_arm_2][session_next_goals_chw_g234_g2345_v2_v3]</p> <p>Visit 127: [visit_127_arm_2][session_next_goals_chw_g234_g2345_v2_v3]</p> <p>Visit 128: [visit_128_arm_2][session_next_goals_chw_g234_g2345_v2_v3]</p> <p>Visit 129: [visit_129_arm_2][session_next_goals_chw_g234_g2345_v2_v3]</p> <p>Visit 130: [visit_130_arm_2][session_next_goals_chw_g234_g2345_v2_v3]</p> <p>Visit 131: [visit_131_arm_2][session_next_goals_chw_g234_g2345_v2_v3]</p> <p>Visit 132: [visit_132_arm_2][session_next_goals_chw_g234_g2345_v2_v3]</p> <p>Visit 133: [visit_133_arm_2][session_next_goals_chw_g234_g2345_v2_v3]</p> <p>Visit 134: [visit_134_arm_2][session_next_goals_chw_g234_g2345_v2_v3]</p> <p>Visit 135: [visit_135_arm_2][session_next_goals_chw_g234_g2345_v2_v3]</p> <p>Visit 136: [visit_136_arm_2][session_next_goals_chw_g234_g2345_v2_v3]</p> <p>Visit 137: [visit_137_arm_2][session_next_goals_chw_g234_g2345_v2_v3]</p> <p>Visit 138: [visit_138_arm_2][session_next_goals_chw_g234_g2345_v2_v3]</p> <p>Visit 139: [visit_139_arm_2][session_next_goals_chw_g234_g2345_v2_v3]</p>	descriptive						
2010	<p>pat_goals_acc_chw_g234_g2345_v2_v3</p> <p>Show the field ONLY if: [seen_by_pcp_chw_g234_g2345_v2_v3] = '1' or [seen_by_pcp_chw_g234_g2345_v2_v3] = '2' or [seen_by_pcp_chw_g234_g2345_v2_v3] = '3' or [seen_by_pcp_chw_g234_g2345_v2_v3] = '4' or [seen_by_pcp_chw_g234_g2345_v2_v3] = '5'</p>	<p>Plan accomplished?</p>	<p>radio, Required</p> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>3</td><td>Partially</td></tr></table>	1	Yes	2	No	3	Partially
1	Yes								
2	No								
3	Partially								
2011	<p>pat_goal_prog_chw_g234_g2345_v2_v3</p> <p>Show the field ONLY if: [seen_by_pcp_chw_g234_g2345_v2_v3] = '1' or [seen_by_pcp_chw_g234_g2345_v2_v3] = '2' or [seen_by_pcp_chw_g234_g2345_v2_v3] = '3' or [seen_by_pcp_chw_g234_g2345_v2_v3] = '4' or [seen_by_pcp_chw_g234_g2345_v2_v3] = '5'</p>	<p>Describe progress on plan</p>	<p>notes, Required</p>						
2012	<p>pat_goal_partially_chw_g234_g2345_v2_v3</p> <p>Show the field ONLY if: [pat_goals_acc_chw_g234_g2345_v2_v3] = '2' or [pat_goals_acc_chw_g234_g2345_v2_v3] = '3'</p>	<p>If plan was not completed or was only partially completed, identify what got in the way and how to problem-solve in future</p>	<p>notes, Required</p>						

2013	session_content_chw_g234_g234_5_v2_v3 Show the field ONLY if: [seen_by_pcp_chw_g234_g2345_v2_v3] = '1' or [seen_by_pcp_chw_g234_g2345_v2_v3] = '2' or [seen_by_pcp_chw_g234_g2345_v2_v3] = '3' or [seen_by_pcp_chw_g234_g2345_v2_v3] = '4' or [seen_by_pcp_chw_g234_g2345_v2_v3] = '5'	Session Content	checkbox, Required		
			1	session_content_chw_g234_g2345_v2_v3__1	Engagement and involvement
			2	session_content_chw_g234_g2345_v2_v3__2	Motivational interviewing
			3	session_content_chw_g234_g2345_v2_v3__3	Motivational tools
			4	session_content_chw_g234_g2345_v2_v3__4	Education topic
			5	session_content_chw_g234_g2345_v2_v3__5	Medication compliance
			6	session_content_chw_g234_g2345_v2_v3__6	Care coordination
			7	session_content_chw_g234_g2345_v2_v3__7	Progress
			8	session_content_chw_g234_g2345_v2_v3__8	Other
			9	session_content_chw_g234_g2345_v2_v3__9	Quit line
2014	session_engag_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_content_chw_g234_g234_5_v2_v3(1)] = '1'	1, Engagement and involvement	notes, Required Custom alignment: LH		
2015	pat_mi_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_content_chw_g234_g234_5_v2_v3(2)] = '1'	2, Motivational Interviewing	notes, Required Custom alignment: LH		
2016	session_pros_cons_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_content_chw_g234_g234_5_v2_v3(3)] = '1'	3, Motivational tools: (include benefits and barriers-be specific! Use patient's own words when possible)	checkbox, Required		
			1	session_pros_cons_chw_g234_g2345_v2_v3__1	Identify pros of smokin
			2	session_pros_cons_chw_g234_g2345_v2_v3__2	Identify cons of smokin
			3	session_pros_cons_chw_g234_g2345_v2_v3__3	Health benefit: from quitting smokin
			4	session_pros_cons_chw_g234_g2345_v2_v3__4	Cessati medica
			5	session_pros_cons_chw_g234_g2345_v2_v3__5	Promot smokin groups
			6	session_pros_cons_chw_g234_g2345_v2_v3__6	Other
			7	session_pros_cons_chw_g234_g2345_v2_v3__7	CO and smokin
			8	session_pros_cons_chw_g234_g2345_v2_v3__8	Smokin triggers pack wr
			9	session_pros_cons_chw_g234_g2345_v2_v3__9	Reason quit smokin
			10	session_pros_cons_chw_g234_g2345_v2_v3__10	Prepari for the day
2017	other_motiv_tools_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_pros_cons_chw_g234_g2345_v2_v3(6)] = '1'	Other	text, Required		

2018	session_education_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_content_chw_g234_g2345_v2_v3(4)] = '1'	4. Education Topic (check all that apply)	checkbox, Required	
			1	session_education_chw_g234_g2345_v2_v3__1 Withdrawal symptoms
			2	session_education_chw_g234_g2345_v2_v3__2 Coping with withdrawal
			3	session_education_chw_g234_g2345_v2_v3__3 Cessation medication
			4	session_education_chw_g234_g2345_v2_v3__4 Things to do instead of smoking, the 4Ds
			5	session_education_chw_g234_g2345_v2_v3__5 Other
			6	session_education_chw_g234_g2345_v2_v3__6 Dealing with stress
			7	session_education_chw_g234_g2345_v2_v3__7 Dealing with weight gain
			8	session_education_chw_g234_g2345_v2_v3__8 Dealing with high risk situations
			9	session_education_chw_g234_g2345_v2_v3__9 Dealing with slips
2019	other_educ_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_education_chw_g234_g2345_v2_v3(5)] = '1'	Other	text, Required	
2020	session_check_meds_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_content_chw_g234_g2345_v2_v3(5)] = '1'	5. Check medication compliance	notes Custom alignment: LH	
2021	session_care_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_content_chw_g234_g2345_v2_v3(6)] = '1'	6. Care coordination (check all that apply)	checkbox, Required	
			1	session_care_chw_g234_g2345_v2_v3__1 Scheduling PCP visit
			2	session_care_chw_g234_g2345_v2_v3__2 Smoking cessation group
			3	session_care_chw_g234_g2345_v2_v3__3 Other
			4	session_care_chw_g234_g2345_v2_v3__4 Pharmacy and medications
2022	other_care_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_care_chw_g234_g2345_v2_v3(3)] = '1'	Other	text, Required	
2023	session_progress_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_content_chw_g234_g2345_v2_v3(7)] = '1'	7. Reinforcing progress and identifying what has been helpful in achieving gains (e.g., scheduling PCP visit, smoking cessation group)	notes Custom alignment: LH	
2024	session_other_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_content_chw_g234_g2345_v2_v3(8)] = '1'	8. Other	notes Custom alignment: LH	

2025	session_qline_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_content_chw_g234_g2345_v2_v3(9)] = '1'	9. QUIT LINE Was QUIT LINE presented/discussed to participant TODAY?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH	1	Yes	0	No
1	Yes						
0	No						
2026	session_noqline_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_qline_chw_g234_g2345_v2_v3] = '0'	Why not?	notes, Required Custom alignment: LH				
2027	session_qline_interest_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_qline_chw_g234_g2345_v2_v3] = '1'	Was participant interested?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH	1	Yes	0	No
1	Yes						
0	No						
2028	session_qlineatsession_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_qline_chw_g234_g2345_v2_v3] = '1'	Did the participant call the Quit Line during this session?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No
1	Yes						
0	No						
2029	session_qlinenoatsession_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_qlineatsession_chw_g234_g2345_v2_v3] = '0'	Why not?	notes, Required Custom alignment: LH				
2030	session_qlinesched_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_qlineatsession_chw_g234_g2345_v2_v3] = '0'	Was Quit Line call scheduled?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No
1	Yes						
0	No						
2031	session_qlinenosched_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_qlinesched_chw_g234_g2345_v2_v3] = '0'	Why not?	notes, Required Custom alignment: LH				
2032	session_qlinetime_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_qlineatsession_chw_g234_g2345_v2_v3] = '1'	Date/time Quit Line call	text (datetime_mdy), Required Custom alignment: LH				
2033	session_qline_chwinvolv_g234_g2345_v2_v3 Show the field ONLY if: [session_qlineatsession_chw_g234_g2345_v2_v3] = '1'	Was the CHW involved in the Quit Line call?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No
1	Yes						
0	No						
2034	session_qlinecall_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_qlineatsession_chw_g234_g2345_v2_v3] = '1'	Describe session/call	notes, Required Custom alignment: LH				
2035	session_qlinenrt_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_qlineatsession_chw_g234_g2345_v2_v3] = '1'	Did the participant/CHW request NRT? Please explain	notes, Required Custom alignment: LH				
2036	session_qlinenrtuse_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_qlineatsession_chw_g234_g2345_v2_v3] = '1'	Did the participant use the NRT? Please explain	notes, Required Custom alignment: LH				

2037	session_qlineable_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_qlineatsession_chw_g234_g2345_v2_v3] = '1'	Did the quitline staff seem able to work with people with SMI? Please explain	notes, Required Custom alignment: LH																										
2038	session_qlinefu_chw_g234_g2345_v2_v3 Show the field ONLY if: [session_qlineatsession_chw_g234_g2345_v2_v3] = '1'	Was a follow up call scheduled?	notes, Required Custom alignment: LH																										
2039	session_qlinecom_chw_g234_g2345_v2_v3	Quit Line Notes	notes Custom alignment: LH																										
2040	session_descript_chw_g234_g2345_v2_v3	Brief description of the session	notes, Required Custom alignment: LH																										
2041	session_next_goals_chw_g234_g2345_v2_v3	Goals for next session	notes, Required Custom alignment: LH																										
2042	next_visit_all_chw_g234_g2345_v2_v3	Next visit will be	text (datetime_mdy), Required Field Annotation: @HIDEBUTTON																										
2043	name_chw_g234_g2345_v2_v3	CHW	radio, Required <table><tr><td>1</td><td>Alexandra Fortune</td></tr><tr><td>2</td><td>Ashley Newman</td></tr><tr><td>3</td><td>Aysha Peralta</td></tr><tr><td>4</td><td>Erin Hanrahan</td></tr><tr><td>5</td><td>John Dowd</td></tr><tr><td>6</td><td>Karlie Marrs</td></tr><tr><td>7</td><td>Leeza Rojas</td></tr><tr><td>8</td><td>Madalyn Davis</td></tr><tr><td>9</td><td>Madeleine Fontaine</td></tr><tr><td>10</td><td>Megan Donnelly</td></tr><tr><td>11</td><td>Morgan Boudreau</td></tr><tr><td>12</td><td>Nina Cherilus</td></tr><tr><td>13</td><td>Carlos Taveras</td></tr></table>	1	Alexandra Fortune	2	Ashley Newman	3	Aysha Peralta	4	Erin Hanrahan	5	John Dowd	6	Karlie Marrs	7	Leeza Rojas	8	Madalyn Davis	9	Madeleine Fontaine	10	Megan Donnelly	11	Morgan Boudreau	12	Nina Cherilus	13	Carlos Taveras
1	Alexandra Fortune																												
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11	Morgan Boudreau																												
12	Nina Cherilus																												
13	Carlos Taveras																												
2044	contact_sheet_all_visits_chw_121_140_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete																				
0	Incomplete																												
1	Unverified																												
2	Complete																												
Instrument: Contact Sheet All Visits CHW 141_160 (contact_sheet_all_visits_chw_141_160) ^ Collapse																													
2045	date_all_visits_chw_g234_g2345_v2_v34	Visit Date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																										
2046	start_all_visits_chw_g234_g2345_v2_v34	Start time	text (time), Required																										
2047	end_all_visits_chw_g234_g2345_v2_v34	End time	text (time), Required																										
2048	visit_modality_chw_g234_g2345_v2_v34	Visit modality	radio, Required <table><tr><td>1</td><td>Phone visit</td></tr><tr><td>2</td><td>In person visit</td></tr></table>	1	Phone visit	2	In person visit																						
1	Phone visit																												
2	In person visit																												
2049	reason_phone_chw_g234_g2345_v2_v34 Show the field ONLY if: [visit_modality_chw_g234_g2345_v2_v34] = '1'	Reasons for the phone visit (select all that apply)	checkbox, Required <table><tr><td>1</td><td>reason_phone_chw_g234_g2345_v2_v34__1</td><td>Help preparing for quit day</td></tr><tr><td>2</td><td>reason_phone_chw_g234_g2345_v2_v34__2</td><td>Quit day</td></tr><tr><td>3</td><td>reason_phone_chw_g234_g2345_v2_v34__3</td><td>Check for withdrawal symptoms</td></tr><tr><td>4</td><td>reason_phone_chw_g234_g2345_v2_v34__4</td><td>Medication compliance/effects</td></tr><tr><td>5</td><td>reason_phone_chw_g234_g2345_v2_v34__5</td><td>Other</td></tr></table>	1	reason_phone_chw_g234_g2345_v2_v34__1	Help preparing for quit day	2	reason_phone_chw_g234_g2345_v2_v34__2	Quit day	3	reason_phone_chw_g234_g2345_v2_v34__3	Check for withdrawal symptoms	4	reason_phone_chw_g234_g2345_v2_v34__4	Medication compliance/effects	5	reason_phone_chw_g234_g2345_v2_v34__5	Other											
1	reason_phone_chw_g234_g2345_v2_v34__1	Help preparing for quit day																											
2	reason_phone_chw_g234_g2345_v2_v34__2	Quit day																											
3	reason_phone_chw_g234_g2345_v2_v34__3	Check for withdrawal symptoms																											
4	reason_phone_chw_g234_g2345_v2_v34__4	Medication compliance/effects																											
5	reason_phone_chw_g234_g2345_v2_v34__5	Other																											

2050	other_reason_phone_chw_g234_g2345_v2_v34 Show the field ONLY if: [reason_phone_chw_g234_g2345_v2_v34(5)] = '1'	Other reason for a phone visit	text, Required	
2051	reasons_contact_chw_g234_g2345_v2_v34 Show the field ONLY if: [visit_modality_chw_g234_g2345_v2_v34] = '2'	Reasons for In Person meeting (select all that apply)	checkbox, Required	
			1	reasons_contact_chw_g234_g2345_v2_v34__1 Initial visit/obtain consent
			2	reasons_contact_chw_g234_g2345_v2_v34__2 Intervention visit
			3	reasons_contact_chw_g234_g2345_v2_v34__3 Taking participant smokinggr
			4	reasons_contact_chw_g234_g2345_v2_v34__4 Taking participant PCP
			5	reasons_contact_chw_g234_g2345_v2_v34__5 Other
			6	reasons_contact_chw_g234_g2345_v2_v34__6 Medication compliance effects
2052	other_reason_contact_chw_g234_g2345_v2_v34 Show the field ONLY if: [reasons_contact_chw_g234_g2345_v2_v34(5)] = '1'	Other reason for an In Person Meeting	text, Required	
2053	smoking_chw_g234_g2345_v2_v34_4	Section Header: <i>Smoking Behavior</i> Has the participant smoked in the past 7 days?	yesno, Required	
			1	Yes
			0	No
2054	notes1_chw_g234_g2345_v2_v34	Notes	notes Custom alignment: RH	
2055	tobacco_prod_chw_g234_g2345_v2_v34	Which tobacco products does the participant currently smoke? (I.e. Cigarettes, Cigars, Cigarillos, Rollies, Mini Cigars, Pipe) Select all that apply	checkbox	
			1	tobacco_prod_chw_g234_g2345_v2_v34__1 Cigarettes
			2	tobacco_prod_chw_g234_g2345_v2_v34__2 Mini cigars (i.e. double diamc
			3	tobacco_prod_chw_g234_g2345_v2_v34__3 loose tobacco your own, roll
			4	tobacco_prod_chw_g234_g2345_v2_v34__4 e-cigarettes/v
			5	tobacco_prod_chw_g234_g2345_v2_v34__5 Other
			6	tobacco_prod_chw_g234_g2345_v2_v34__6 Quit smoking
2056	cpd_chw_g234_g2345_v2_v34 Show the field ONLY if: [smoking_chw_g234_g2345_v2_v34] = '1'	On average, how many cigarettes (or other tobacco product) per day has the participant smoked in past 7 days?	text (integer), Required	
2057	cpd_non_daily_chw_g234_g2345_v2_v34	COMPLETE ONLY IF PARTICIPANT HASN'T BEEN SMOKING EVERY DAY DURING THE PAST WEEK On average, how many cigarettes (or other tobacco product) per WEEK has the participant smoked in past week?	text	
2058	last_cigarette_chw_g234_g2345_v2_v34 Show the field ONLY if: [smoking_chw_g234_g2345_v2_v34] = '1' or [smoking_chw_g234_g2345_v2_v34] = '0'	Time of last cigarette (or other tobacco product)	text (datetime_mdy), Required Custom alignment: RH Field Annotation: @HIDEBUTTON	
2059	pat_co_done_chw_g234_g2345_v2_v34 Show the field ONLY if: [visit_modality_chw_g234_g2345_v2_v34] = '2'	Was CO testing completed today?	yesno, Required	
			1	Yes
			0	No

2060	pat_yes_co_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2_v34] = '1'	Reasons for CO measurement	checkbox, Required																																	
			1	pat_yes_co_chw_g234_g2345_v2_v34__1 Last CO month was done over a month ago																																
			2	pat_yes_co_chw_g234_g2345_v2_v34__2 Participant changed smoking behavior after last CO measurement (quit or relapsed)																																
			3	pat_yes_co_chw_g234_g2345_v2_v34__3 Participant asked for it																																
			4	pat_yes_co_chw_g234_g2345_v2_v34__4 Other																																
2061	pat_other_co_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_yes_co_chw_g234_g2345_v2_v34(4)] = '1'	Other	text, Required																																	
2062	expired_co_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2_v34] = '1'	Expired CO reading (ppm)	text (integer, Min: 0, Max: 100), Required																																	
2063	time_co_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2_v34] = '1'	Date of CO reading	text (date_mdy), Required Field Annotation: @HIDEBUTTON																																	
2064	hour_co_chw_g234_g2345_v2_v34_4 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2_v34] = '1'	Time of CO reading	text (time), Required																																	
2065	co_monitor_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2_v34] = '1'	CO Monitor ID	radio, Required <table><tr><td>1</td><td>A</td></tr><tr><td>2</td><td>B</td></tr><tr><td>3</td><td>C</td></tr><tr><td>4</td><td>D</td></tr><tr><td>5</td><td>E</td></tr><tr><td>6</td><td>F</td></tr><tr><td>7</td><td>G</td></tr><tr><td>8</td><td>H</td></tr><tr><td>9</td><td>I</td></tr><tr><td>10</td><td>J</td></tr><tr><td>11</td><td>K</td></tr><tr><td>12</td><td>L</td></tr><tr><td>13</td><td>M</td></tr><tr><td>14</td><td>N</td></tr><tr><td>15</td><td>O</td></tr><tr><td>16</td><td>P</td></tr></table> Custom alignment: RH		1	A	2	B	3	C	4	D	5	E	6	F	7	G	8	H	9	I	10	J	11	K	12	L	13	M	14	N	15	O	16	P
1	A																																			
2	B																																			
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12	L																																			
13	M																																			
14	N																																			
15	O																																			
16	P																																			
2066	co_exec_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2_v34] = '1'	Was CO measuring executed properly?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>		1	Yes	0	No																												
1	Yes																																			
0	No																																			

2067	pat_no_co_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_co_done_chw_g234_g2345_v2_v34] = '0'	Reasons for NO CO measurement	checkbox, Required <table><tr><td>1</td><td>pat_no_co_chw_g234_g2345_v2_v34__1</td><td>CO was done within the past month and there was no change in smoking behavior</td></tr><tr><td>2</td><td>pat_no_co_chw_g234_g2345_v2_v34__2</td><td>Participant refused</td></tr><tr><td>3</td><td>pat_no_co_chw_g234_g2345_v2_v34__3</td><td>Participant unable (respiratory illness, symptomatic)</td></tr><tr><td>4</td><td>pat_no_co_chw_g234_g2345_v2_v34__4</td><td>Other</td></tr></table>	1	pat_no_co_chw_g234_g2345_v2_v34__1	CO was done within the past month and there was no change in smoking behavior	2	pat_no_co_chw_g234_g2345_v2_v34__2	Participant refused	3	pat_no_co_chw_g234_g2345_v2_v34__3	Participant unable (respiratory illness, symptomatic)	4	pat_no_co_chw_g234_g2345_v2_v34__4	Other						
1	pat_no_co_chw_g234_g2345_v2_v34__1	CO was done within the past month and there was no change in smoking behavior																			
2	pat_no_co_chw_g234_g2345_v2_v34__2	Participant refused																			
3	pat_no_co_chw_g234_g2345_v2_v34__3	Participant unable (respiratory illness, symptomatic)																			
4	pat_no_co_chw_g234_g2345_v2_v34__4	Other																			
2068	other_no_co_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_no_co_chw_g234_g2345_v2_v34(4)] = '1'	Other	text, Required																		
2069	notes_co_chw_g234_g2345_v2_v34_4	Notes	notes Custom alignment: RH																		
2070	seen_by_pcp_chw_g234_g2345_v2_v34 Show the field ONLY if: [visit_modality_chw_g234_g2345_v2_v34] = '2'	Was subject seen by primary care team since last meeting?	radio, Required <table><tr><td>1</td><td>None scheduled</td></tr><tr><td>2</td><td>No, missed visit</td></tr><tr><td>3</td><td>Yes, smoking discussed</td></tr><tr><td>4</td><td>Yes, smoking not discussed</td></tr><tr><td>5</td><td>Unknown</td></tr></table>	1	None scheduled	2	No, missed visit	3	Yes, smoking discussed	4	Yes, smoking not discussed	5	Unknown								
1	None scheduled																				
2	No, missed visit																				
3	Yes, smoking discussed																				
4	Yes, smoking not discussed																				
5	Unknown																				
2071	pcp_recommend_pat_chw_g234_g2345_v2_v34 Show the field ONLY if: [seen_by_pcp_chw_g234_g2345_v2_v34] = '3'	Did the PCP recommend that the participant quit smoking?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																				
0	No																				
2072	pcp_prescribed_pat_chw_g234_g2345_v2_v34 Show the field ONLY if: [seen_by_pcp_chw_g234_g2345_v2_v34] = '3'	Did PCP prescribe smoking cessation medication?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																				
0	No																				
2073	pat_what_prescribed_chw_g234_g2345_v2_v34 Show the field ONLY if: [pcp_prescribed_pat_chw_g234_g2345_v2_v34] = '1' or [reason_phone_chw_g234_g2345_v2_v34(4)] = '1'	What did the PCP prescribe?	checkbox, Required <table><tr><td>1</td><td>pat_what_prescribed_chw_g234_g2345_v2_v34__1</td><td>Varenicline (i.e., Chantix)</td></tr><tr><td>2</td><td>pat_what_prescribed_chw_g234_g2345_v2_v34__2</td><td>Nicotine patch</td></tr><tr><td>3</td><td>pat_what_prescribed_chw_g234_g2345_v2_v34__3</td><td>Bupropion (i.e., Wellbutrin, Zyban)</td></tr><tr><td>4</td><td>pat_what_prescribed_chw_g234_g2345_v2_v34__4</td><td>Nicotine gum</td></tr><tr><td>5</td><td>pat_what_prescribed_chw_g234_g2345_v2_v34__5</td><td>Nicotine lozenge</td></tr><tr><td>6</td><td>pat_what_prescribed_chw_g234_g2345_v2_v34__6</td><td>Other</td></tr></table>	1	pat_what_prescribed_chw_g234_g2345_v2_v34__1	Varenicline (i.e., Chantix)	2	pat_what_prescribed_chw_g234_g2345_v2_v34__2	Nicotine patch	3	pat_what_prescribed_chw_g234_g2345_v2_v34__3	Bupropion (i.e., Wellbutrin, Zyban)	4	pat_what_prescribed_chw_g234_g2345_v2_v34__4	Nicotine gum	5	pat_what_prescribed_chw_g234_g2345_v2_v34__5	Nicotine lozenge	6	pat_what_prescribed_chw_g234_g2345_v2_v34__6	Other
1	pat_what_prescribed_chw_g234_g2345_v2_v34__1	Varenicline (i.e., Chantix)																			
2	pat_what_prescribed_chw_g234_g2345_v2_v34__2	Nicotine patch																			
3	pat_what_prescribed_chw_g234_g2345_v2_v34__3	Bupropion (i.e., Wellbutrin, Zyban)																			
4	pat_what_prescribed_chw_g234_g2345_v2_v34__4	Nicotine gum																			
5	pat_what_prescribed_chw_g234_g2345_v2_v34__5	Nicotine lozenge																			
6	pat_what_prescribed_chw_g234_g2345_v2_v34__6	Other																			
2074	other_prescribed_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_prescribed_chw_g234_g2345_v2_v34(6)] = '1'	Other	text, Required																		

2075	pat_filled_med_chw_g234_g2345_v2_v34 Show the field ONLY if: [pcp_prescribed_pat_chw_g234_g2345_v2_v34] = '1' or [reason_phone_chw_g234_g2345_v2_v34(4)] = '1'	Did the participant fill the prescription for the smoking cessation medication?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																				
0	No																				
2076	pat_what_taking_chw_g234_g2345_v2_v34 Show the field ONLY if: [pcp_prescribed_pat_chw_g234_g2345_v2_v34] = '1' or [reason_phone_chw_g234_g2345_v2_v34(4)] = '1' or [reasons_contact_chw_g234_g2345_v2_v34(6)] = '1'	What is the participant taking?	checkbox, Required <table><tr><td>1</td><td>pat_what_taking_chw_g234_g2345_v2_v34__1</td><td>Varenicline (i.e. Chantix)</td></tr><tr><td>2</td><td>pat_what_taking_chw_g234_g2345_v2_v34__2</td><td>Nicotine patch</td></tr><tr><td>3</td><td>pat_what_taking_chw_g234_g2345_v2_v34__3</td><td>Bupropion (i.e. Wellbutrin, Zyban)</td></tr><tr><td>4</td><td>pat_what_taking_chw_g234_g2345_v2_v34__4</td><td>Nicotine gum</td></tr><tr><td>5</td><td>pat_what_taking_chw_g234_g2345_v2_v34__5</td><td>Nicotine lozenge</td></tr><tr><td>6</td><td>pat_what_taking_chw_g234_g2345_v2_v34__6</td><td>Other</td></tr></table>	1	pat_what_taking_chw_g234_g2345_v2_v34__1	Varenicline (i.e. Chantix)	2	pat_what_taking_chw_g234_g2345_v2_v34__2	Nicotine patch	3	pat_what_taking_chw_g234_g2345_v2_v34__3	Bupropion (i.e. Wellbutrin, Zyban)	4	pat_what_taking_chw_g234_g2345_v2_v34__4	Nicotine gum	5	pat_what_taking_chw_g234_g2345_v2_v34__5	Nicotine lozenge	6	pat_what_taking_chw_g234_g2345_v2_v34__6	Other
1	pat_what_taking_chw_g234_g2345_v2_v34__1	Varenicline (i.e. Chantix)																			
2	pat_what_taking_chw_g234_g2345_v2_v34__2	Nicotine patch																			
3	pat_what_taking_chw_g234_g2345_v2_v34__3	Bupropion (i.e. Wellbutrin, Zyban)																			
4	pat_what_taking_chw_g234_g2345_v2_v34__4	Nicotine gum																			
5	pat_what_taking_chw_g234_g2345_v2_v34__5	Nicotine lozenge																			
6	pat_what_taking_chw_g234_g2345_v2_v34__6	Other																			
2077	pat_other_med_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(6)] = '1'	Other	text, Required																		
2078	pat_var_dose_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(1)] = '1'	Varenicline (Chantix) Dose	radio, Required <table><tr><td>1</td><td>0.5 mg once a day</td></tr><tr><td>2</td><td>0.5 mg twice a day</td></tr><tr><td>3</td><td>1 mg once a day</td></tr><tr><td>4</td><td>1 mg twice a day</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	0.5 mg once a day	2	0.5 mg twice a day	3	1 mg once a day	4	1 mg twice a day	5	Other								
1	0.5 mg once a day																				
2	0.5 mg twice a day																				
3	1 mg once a day																				
4	1 mg twice a day																				
5	Other																				
2079	pat_var_other_dose_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_var_dose_chw_g234_g2345_v2_v34] = '5'	Other Dose	text, Required																		
2080	pat_var_start_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(1)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																		
2081	pat_7days_var_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(1)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7				
1	1																				
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3	3																				
4	4																				
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6	6																				
7	7																				
2082	var_still_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(1)] = '1'	Is participant still taking Varenicline?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No														
1	Yes																				
0	No																				
2083	pat_var_end_chw_g234_g2345_v2_v34 Show the field ONLY if: [var_still_chw_g234_g2345_v2_v34] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																		

2084	pat_bup_dose_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(3)] = '1'	Bupropion (Wellbutrin, Zyban) dose	radio, Required <table><tr><td>1</td><td>150 mg once a day</td></tr><tr><td>2</td><td>150 mg twice a day</td></tr><tr><td>3</td><td>Other</td></tr></table>	1	150 mg once a day	2	150 mg twice a day	3	Other								
1	150 mg once a day																
2	150 mg twice a day																
3	Other																
2085	pat_bup_other_dose_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_bup_dose_chw_g234_g2345_v2_v34] = '3'	Other Dose	text, Required														
2086	pat_bup_start_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(3)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
2087	pat_7days_bup_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(3)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
3	3																
4	4																
5	5																
6	6																
7	7																
2088	bup_still_chw_g234_g2345_v2_v34_4 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(3)] = '1'	Is participant still taking Bupropion?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
2089	pat_bup_end_chw_g234_g2345_v2_v34 Show the field ONLY if: [bup_still_chw_g234_g2345_v2_v34_4] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
2090	pat_patch_dose_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(2)] = '1'	Nicotine patch dose	radio, Required <table><tr><td>1</td><td>21 mg</td></tr><tr><td>2</td><td>14 mg</td></tr><tr><td>3</td><td>7 mg</td></tr><tr><td>4</td><td>Other</td></tr></table>	1	21 mg	2	14 mg	3	7 mg	4	Other						
1	21 mg																
2	14 mg																
3	7 mg																
4	Other																
2091	pat_patch_other_dose_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_patch_dose_chw_g234_g2345_v2_v34] = '4'	Other Dose	text, Required														
2092	pat_patch_start_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(2)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
2093	pat_7days_patch_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(2)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
2	2																
3	3																
4	4																
5	5																
6	6																
7	7																

2094	patch_still_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(2)] = '1'	Is participant still using the patch?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
2095	pat_patch_end_chw_g234_g2345_v2_v34 Show the field ONLY if: [patch_still_chw_g234_g2345_v2_v34] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
2096	pat_gum_dose_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(4)] = '1'	Nicotine gum	radio, Required <table><tr><td>1</td><td>4-6 mg per day</td></tr><tr><td>2</td><td>8-10 mg per day</td></tr><tr><td>3</td><td>12-14 mg per day</td></tr><tr><td>4</td><td>16-18 mg per day</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	4-6 mg per day	2	8-10 mg per day	3	12-14 mg per day	4	16-18 mg per day	5	Other				
1	4-6 mg per day																
2	8-10 mg per day																
3	12-14 mg per day																
4	16-18 mg per day																
5	Other																
2097	pat_gum_other_dose_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_gum_dose_chw_g234_g2345_v2_v34] = '5'	Other Dose	text, Required														
2098	pat_gum_start_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(4)] = '1'	Start date	text (date_mdy), Required														
2099	pat_7days_gum_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(4)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7
1	1																
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3	3																
4	4																
5	5																
6	6																
7	7																
2100	gum_still_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(4)] = '1'	Is participant still using the gum?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No										
1	Yes																
0	No																
2101	pat_gum_end_chw_g234_g2345_v2_v34 Show the field ONLY if: [gum_still_chw_g234_g2345_v2_v34] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														
2102	pat_loz_dose_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(5)] = '1'	Nicotine lozenges	radio, Required <table><tr><td>1</td><td>4-6 mg per day</td></tr><tr><td>2</td><td>8-10 mg per day</td></tr><tr><td>3</td><td>12-14 mg per day</td></tr><tr><td>4</td><td>16-18 mg per day</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	4-6 mg per day	2	8-10 mg per day	3	12-14 mg per day	4	16-18 mg per day	5	Other				
1	4-6 mg per day																
2	8-10 mg per day																
3	12-14 mg per day																
4	16-18 mg per day																
5	Other																
2103	pat_loz_other_dose_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_loz_dose_chw_g234_g2345_v2_v34] = '5'	Other Dose	text, Required														
2104	pat_loz_start_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(5)] = '1'	Start date	text (date_mdy), Required Field Annotation: @HIDEBUTTON														

2105	pat_7days_loz_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(5)] = '1'	Days used as prescribed in past 7 days	radio, Required <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr></table>	1	1	2	2	3	3	4	4	5	5	6	6	7	7																			
1	1																																			
2	2																																			
3	3																																			
4	4																																			
5	5																																			
6	6																																			
7	7																																			
2106	gum_still_chw_2_g234_g2345_v2_v34 Show the field ONLY if: [pat_what_taking_chw_g234_g2345_v2_v34(5)] = '1'	Is participant still using the lozenges?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																													
1	Yes																																			
0	No																																			
2107	pat_loz_end_chw_g234_g2345_v2_v34 Show the field ONLY if: [gum_still_chw_2_g234_g2345_v2_v34] = '0'	Change/end date	text (date_mdy), Required Field Annotation: @HIDEBUTTON																																	
2108	pat_no_meds_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_filled_med_chw_g234_g2345_v2_v34] = '0'	If not taking smoking cessation medication, why not	checkbox, Required <table><tr><td>1</td><td>pat_no_meds_chw_g234_g2345_v2_v34__1</td><td>I don't need to take more medication</td></tr><tr><td>2</td><td>pat_no_meds_chw_g234_g2345_v2_v34__2</td><td>Fear of adverse effects,</td></tr><tr><td>3</td><td>pat_no_meds_chw_g234_g2345_v2_v34__3</td><td>Family/friend/media recommendation taking it</td></tr><tr><td>4</td><td>pat_no_meds_chw_g234_g2345_v2_v34__4</td><td>I took it before but didn't like the taste (their past experience)</td></tr><tr><td>5</td><td>pat_no_meds_chw_g234_g2345_v2_v34__5</td><td>I didn't understand what the Treatment was about</td></tr><tr><td>6</td><td>pat_no_meds_chw_g234_g2345_v2_v34__6</td><td>I couldn't afford it</td></tr><tr><td>7</td><td>pat_no_meds_chw_g234_g2345_v2_v34__7</td><td>I'd rather go back to smoking group</td></tr><tr><td>8</td><td>pat_no_meds_chw_g234_g2345_v2_v34__8</td><td>I forgot</td></tr><tr><td>9</td><td>pat_no_meds_chw_g234_g2345_v2_v34__9</td><td>Other</td></tr><tr><td>10</td><td>pat_no_meds_chw_g234_g2345_v2_v34__10</td><td>Prefer not to answer</td></tr><tr><td>11</td><td>pat_no_meds_chw_g234_g2345_v2_v34__11</td><td>I didn't want to quit smoking/already quit smoking/changed my mind</td></tr></table>	1	pat_no_meds_chw_g234_g2345_v2_v34__1	I don't need to take more medication	2	pat_no_meds_chw_g234_g2345_v2_v34__2	Fear of adverse effects,	3	pat_no_meds_chw_g234_g2345_v2_v34__3	Family/friend/media recommendation taking it	4	pat_no_meds_chw_g234_g2345_v2_v34__4	I took it before but didn't like the taste (their past experience)	5	pat_no_meds_chw_g234_g2345_v2_v34__5	I didn't understand what the Treatment was about	6	pat_no_meds_chw_g234_g2345_v2_v34__6	I couldn't afford it	7	pat_no_meds_chw_g234_g2345_v2_v34__7	I'd rather go back to smoking group	8	pat_no_meds_chw_g234_g2345_v2_v34__8	I forgot	9	pat_no_meds_chw_g234_g2345_v2_v34__9	Other	10	pat_no_meds_chw_g234_g2345_v2_v34__10	Prefer not to answer	11	pat_no_meds_chw_g234_g2345_v2_v34__11	I didn't want to quit smoking/already quit smoking/changed my mind
1	pat_no_meds_chw_g234_g2345_v2_v34__1	I don't need to take more medication																																		
2	pat_no_meds_chw_g234_g2345_v2_v34__2	Fear of adverse effects,																																		
3	pat_no_meds_chw_g234_g2345_v2_v34__3	Family/friend/media recommendation taking it																																		
4	pat_no_meds_chw_g234_g2345_v2_v34__4	I took it before but didn't like the taste (their past experience)																																		
5	pat_no_meds_chw_g234_g2345_v2_v34__5	I didn't understand what the Treatment was about																																		
6	pat_no_meds_chw_g234_g2345_v2_v34__6	I couldn't afford it																																		
7	pat_no_meds_chw_g234_g2345_v2_v34__7	I'd rather go back to smoking group																																		
8	pat_no_meds_chw_g234_g2345_v2_v34__8	I forgot																																		
9	pat_no_meds_chw_g234_g2345_v2_v34__9	Other																																		
10	pat_no_meds_chw_g234_g2345_v2_v34__10	Prefer not to answer																																		
11	pat_no_meds_chw_g234_g2345_v2_v34__11	I didn't want to quit smoking/already quit smoking/changed my mind																																		
2109	other_pat_no_meds_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_no_meds_chw_g234_g2345_v2_v34(9)] = '1'	Other	text, Required																																	
2110	pat_recommend_cbt_chw_g234_g2345_v2_v34 Show the field ONLY if: [seen_by_pcp_chw_g234_g2345_v2_v34] = '3'	Did the PCP recommend attending a smoking group?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																													
1	Yes																																			
0	No																																			
2111	pat_cbt_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_recommend_cbt_chw_g234_g2345_v2_v34] = '1'	Is participant attending a smoking cessation group?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																													
1	Yes																																			
0	No																																			

2112	pat_cbt_start_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_cbt_chw_g234_g2345_v2_v34] = '1'	Date started	text (date_mdy), Required Field Annotation: @HIDEBUTTON																												
2113	pat_att_cbt_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_cbt_chw_g234_g2345_v2_v34] = '1'	Attendance in past month	radio <table><tr><td>1</td><td>1 session</td></tr><tr><td>2</td><td>2 sessions</td></tr><tr><td>3</td><td>3 sessions</td></tr><tr><td>4</td><td>4 sessions</td></tr><tr><td>5</td><td>5 sessions or more</td></tr></table>		1	1 session	2	2 sessions	3	3 sessions	4	4 sessions	5	5 sessions or more																	
1	1 session																														
2	2 sessions																														
3	3 sessions																														
4	4 sessions																														
5	5 sessions or more																														
2114	pat_loc_cbt_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_cbt_chw_g234_g2345_v2_v34] = '1'	Group location	notes, Required																												
2115	pat_no_cbt_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_cbt_chw_g234_g2345_v2_v34] = '0'	If not attending cessation group, why not	checkbox, Required <table><tr><td>1</td><td>pat_no_cbt_chw_g234_g2345_v2_v34__1</td><td>I don't have a ride</td></tr><tr><td>2</td><td>pat_no_cbt_chw_g234_g2345_v2_v34__2</td><td>Fear of adverse effects,</td></tr><tr><td>3</td><td>pat_no_cbt_chw_g234_g2345_v2_v34__3</td><td>Family/friends /media recommended not going</td></tr><tr><td>4</td><td>pat_no_cbt_chw_g234_g2345_v2_v34__4</td><td>I did it before and didn't like it (their past experiences),</td></tr><tr><td>5</td><td>pat_no_cbt_chw_g234_g2345_v2_v34__5</td><td>I don't understand what the group is about</td></tr><tr><td>6</td><td>pat_no_cbt_chw_g234_g2345_v2_v34__6</td><td>I'd rather quit smoking on my own</td></tr><tr><td>7</td><td>pat_no_cbt_chw_g234_g2345_v2_v34__7</td><td>I don't want to quit smoking</td></tr><tr><td>8</td><td>pat_no_cbt_chw_g234_g2345_v2_v34__8</td><td>Other</td></tr><tr><td>9</td><td>pat_no_cbt_chw_g234_g2345_v2_v34__9</td><td>Prefer not to answer</td></tr></table>		1	pat_no_cbt_chw_g234_g2345_v2_v34__1	I don't have a ride	2	pat_no_cbt_chw_g234_g2345_v2_v34__2	Fear of adverse effects,	3	pat_no_cbt_chw_g234_g2345_v2_v34__3	Family/friends /media recommended not going	4	pat_no_cbt_chw_g234_g2345_v2_v34__4	I did it before and didn't like it (their past experiences),	5	pat_no_cbt_chw_g234_g2345_v2_v34__5	I don't understand what the group is about	6	pat_no_cbt_chw_g234_g2345_v2_v34__6	I'd rather quit smoking on my own	7	pat_no_cbt_chw_g234_g2345_v2_v34__7	I don't want to quit smoking	8	pat_no_cbt_chw_g234_g2345_v2_v34__8	Other	9	pat_no_cbt_chw_g234_g2345_v2_v34__9	Prefer not to answer
1	pat_no_cbt_chw_g234_g2345_v2_v34__1	I don't have a ride																													
2	pat_no_cbt_chw_g234_g2345_v2_v34__2	Fear of adverse effects,																													
3	pat_no_cbt_chw_g234_g2345_v2_v34__3	Family/friends /media recommended not going																													
4	pat_no_cbt_chw_g234_g2345_v2_v34__4	I did it before and didn't like it (their past experiences),																													
5	pat_no_cbt_chw_g234_g2345_v2_v34__5	I don't understand what the group is about																													
6	pat_no_cbt_chw_g234_g2345_v2_v34__6	I'd rather quit smoking on my own																													
7	pat_no_cbt_chw_g234_g2345_v2_v34__7	I don't want to quit smoking																													
8	pat_no_cbt_chw_g234_g2345_v2_v34__8	Other																													
9	pat_no_cbt_chw_g234_g2345_v2_v34__9	Prefer not to answer																													
2116	other_pat_no_cbt_chw_g234_g2345_v2_v34 Show the field ONLY if: [pat_no_cbt_chw_g234_g2345_v2_v34(8)] = '1'	Other	text, Required																												
2117	notes3_chw_g234_g2345_v2_v34	Notes	notes Custom alignment: RH																												

2118	<div>session_prev_goals_chw_g234_g2345_v2_v34</div> <div>Show the field ONLY if: [smoking_chw_g234_g2345_v2_v34] = '1' or [smoking_chw_g234_g2345_v2_v34] = '0'</div>	<div>Plan from previous session</div> <div>Visit 140: [visit_140_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div> <div>Visit 141: [visit_141_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div> <div>Visit 142: [visit_142_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div> <div>Visit 143: [visit_143_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div> <div>Visit 144: [visit_144_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div> <div>Visit 145: [visit_145_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div> <div>Visit 146: [visit_146_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div> <div>Visit 147: [visit_147_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div> <div>Visit 148: [visit_148_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div> <div>Visit 149: [visit_149_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div> <div>Visit 150: [visit_150_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div> <div>Visit 151: [visit_151_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div> <div>Visit 152: [visit_152_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div> <div>Visit 153: [visit_153_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div> <div>Visit 154: [visit_154_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div> <div>Visit 155: [visit_155_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div> <div>Visit 156: [visit_156_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div> <div>Visit 157: [visit_157_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div> <div>Visit 158: [visit_158_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div> <div>Visit 159: [visit_159_arm_2][session_next_goals_chw_g234_g2345_v2_v34]</div>	<div>descriptive</div>						
2119	<div>pat_goals_acc_chw_g234_g2345_v2_v34</div> <div>Show the field ONLY if: [seen_by_pcp_chw_g234_g2345_v2_v34] = '1' or [seen_by_pcp_chw_g234_g2345_v2_v34] = '2' or [seen_by_pcp_chw_g234_g2345_v2_v34] = '3' or [seen_by_pcp_chw_g234_g2345_v2_v34] = '4' or [seen_by_pcp_chw_g234_g2345_v2_v34] = '5'</div>	<div>Plan accomplished?</div>	<div>radio, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr><tr><td>3</td><td>Partially</td></tr></table>	1	Yes	2	No	3	Partially
1	Yes								
2	No								
3	Partially								
2120	<div>pat_goal_prog_chw_g234_g2345_v2_v34</div> <div>Show the field ONLY if: [seen_by_pcp_chw_g234_g2345_v2_v34] = '1' or [seen_by_pcp_chw_g234_g2345_v2_v34] = '2' or [seen_by_pcp_chw_g234_g2345_v2_v34] = '3' or [seen_by_pcp_chw_g234_g2345_v2_v34] = '4' or [seen_by_pcp_chw_g234_g2345_v2_v34] = '5'</div>	<div>Describe progress on plan</div>	<div>notes, Required</div>						
2121	<div>pat_goal_partially_chw_g234_g2345_v2_v34</div> <div>Show the field ONLY if: [pat_goals_acc_chw_g234_g2345_v2_v34] = '2' or [pat_goals_acc_chw_g234_g2345_v2_v34] = '3'</div>	<div>If plan was not completed or was only partially completed, identify what got in the way and how to problem-solve in future</div>	<div>notes, Required</div>						

2122	session_content_chw_g234_g234_5_v2_v34 Show the field ONLY if: [seen_by_pcp_chw_g234_g2345_v2_v34] = '1' or [seen_by_pcp_chw_g234_g2345_v2_v34] = '2' or [seen_by_pcp_chw_g234_g2345_v2_v34] = '3' or [seen_by_pcp_chw_g234_g2345_v2_v34] = '4' or [seen_by_pcp_chw_g234_g2345_v2_v34] = '5'	Session Content	checkbox, Required		
			1	session_content_chw_g234_g2345_v2_v34__1	Engagement and involvement
			2	session_content_chw_g234_g2345_v2_v34__2	Motivational interviewing
			3	session_content_chw_g234_g2345_v2_v34__3	Motivational tools
			4	session_content_chw_g234_g2345_v2_v34__4	Education topic
			5	session_content_chw_g234_g2345_v2_v34__5	Medication compliance
			6	session_content_chw_g234_g2345_v2_v34__6	Care coordination
			7	session_content_chw_g234_g2345_v2_v34__7	Progress
			8	session_content_chw_g234_g2345_v2_v34__8	Other
			9	session_content_chw_g234_g2345_v2_v34__9	Quit Line
2123	session_engag_chw_g234_g2345_v2_v34 Show the field ONLY if: [session_content_chw_g234_g234_5_v2_v34(1)] = '1'	1, Engagement and involvement	notes, Required Custom alignment: LH		
2124	pat_mi_chw_g234_g2345_v2_v34 Show the field ONLY if: [session_content_chw_g234_g234_5_v2_v34(2)] = '1'	2, Motivational Interviewing	notes, Required Custom alignment: LH		
2125	session_pros_cons_chw_g234_g2345_v2_v34 Show the field ONLY if: [session_content_chw_g234_g234_5_v2_v34(3)] = '1'	3, Motivational tools: (include benefits and barriers-be specific! Use patient's own words when possible)	checkbox, Required		
			1	session_pros_cons_chw_g234_g2345_v2_v34__1	Identify pros of smoking
			2	session_pros_cons_chw_g234_g2345_v2_v34__2	Identify cons of smoking
			3	session_pros_cons_chw_g234_g2345_v2_v34__3	Health benefits from quitting smoking
			4	session_pros_cons_chw_g234_g2345_v2_v34__4	Cessation medication
			5	session_pros_cons_chw_g234_g2345_v2_v34__5	Promote smoking group
			6	session_pros_cons_chw_g234_g2345_v2_v34__6	Other
			7	session_pros_cons_chw_g234_g2345_v2_v34__7	CO and smoking
			8	session_pros_cons_chw_g234_g2345_v2_v34__8	Smoking trigger pack v
			9	session_pros_cons_chw_g234_g2345_v2_v34__9	Reasons to quit smoking
			10	session_pros_cons_chw_g234_g2345_v2_v34__10	Preparation for the day
2126	other_motiv_tools_chw_g234_g2345_v2_v34 Show the field ONLY if: [session_pros_cons_chw_g234_g2345_v2_v34(6)] = '1'	Other	text, Required		

2127	<div>session_education_chw_g234_g2345_v2_v34</div> <div>Show the field ONLY if: [session_content_chw_g234_g2345_v2_v34(4)] = '1'</div>	4. Education Topic (check all that apply)	<div>checkbox, Required</div> <table><tr><td>1</td><td>session_education_chw_g234_g2345_v2_v34__1</td><td>Withdrawal symptoms</td></tr><tr><td>2</td><td>session_education_chw_g234_g2345_v2_v34__2</td><td>Coping with withdrawal</td></tr><tr><td>3</td><td>session_education_chw_g234_g2345_v2_v34__3</td><td>Cessation medication</td></tr><tr><td>4</td><td>session_education_chw_g234_g2345_v2_v34__4</td><td>Things to do instead of smoking, the 4Ds</td></tr><tr><td>5</td><td>session_education_chw_g234_g2345_v2_v34__5</td><td>Other</td></tr><tr><td>6</td><td>session_education_chw_g234_g2345_v2_v34__6</td><td>Dealing with stress</td></tr><tr><td>7</td><td>session_education_chw_g234_g2345_v2_v34__7</td><td>Dealing with weight gain</td></tr><tr><td>8</td><td>session_education_chw_g234_g2345_v2_v34__8</td><td>Dealing with high risk situation</td></tr><tr><td>9</td><td>session_education_chw_g234_g2345_v2_v34__9</td><td>Dealing with slips</td></tr></table>	1	session_education_chw_g234_g2345_v2_v34__1	Withdrawal symptoms	2	session_education_chw_g234_g2345_v2_v34__2	Coping with withdrawal	3	session_education_chw_g234_g2345_v2_v34__3	Cessation medication	4	session_education_chw_g234_g2345_v2_v34__4	Things to do instead of smoking, the 4Ds	5	session_education_chw_g234_g2345_v2_v34__5	Other	6	session_education_chw_g234_g2345_v2_v34__6	Dealing with stress	7	session_education_chw_g234_g2345_v2_v34__7	Dealing with weight gain	8	session_education_chw_g234_g2345_v2_v34__8	Dealing with high risk situation	9	session_education_chw_g234_g2345_v2_v34__9	Dealing with slips
1	session_education_chw_g234_g2345_v2_v34__1	Withdrawal symptoms																												
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5	session_education_chw_g234_g2345_v2_v34__5	Other																												
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9	session_education_chw_g234_g2345_v2_v34__9	Dealing with slips																												
2128	<div>other_educ_chw_g234_g2345_v2_v34</div> <div>Show the field ONLY if: [session_education_chw_g234_g2345_v2_v34(5)] = '1'</div>	Other	text, Required																											
2129	<div>session_check_meds_chw_g234_g2345_v2_v34</div> <div>Show the field ONLY if: [session_content_chw_g234_g2345_v2_v34(5)] = '1'</div>	5. Check medication compliance	<div>notes</div> <div>Custom alignment: LH</div>																											
2130	<div>session_care_chw_g234_g2345_v2_v34</div> <div>Show the field ONLY if: [session_content_chw_g234_g2345_v2_v34(6)] = '1'</div>	6. Care coordination (check all that apply)	<div>checkbox, Required</div> <table><tr><td>1</td><td>session_care_chw_g234_g2345_v2_v34__1</td><td>Scheduling PCP visit</td></tr><tr><td>2</td><td>session_care_chw_g234_g2345_v2_v34__2</td><td>Smoking cessation group</td></tr><tr><td>3</td><td>session_care_chw_g234_g2345_v2_v34__3</td><td>Other</td></tr><tr><td>4</td><td>session_care_chw_g234_g2345_v2_v34__4</td><td>Pharmacy and medications</td></tr></table>	1	session_care_chw_g234_g2345_v2_v34__1	Scheduling PCP visit	2	session_care_chw_g234_g2345_v2_v34__2	Smoking cessation group	3	session_care_chw_g234_g2345_v2_v34__3	Other	4	session_care_chw_g234_g2345_v2_v34__4	Pharmacy and medications															
1	session_care_chw_g234_g2345_v2_v34__1	Scheduling PCP visit																												
2	session_care_chw_g234_g2345_v2_v34__2	Smoking cessation group																												
3	session_care_chw_g234_g2345_v2_v34__3	Other																												
4	session_care_chw_g234_g2345_v2_v34__4	Pharmacy and medications																												
2131	<div>other_care_chw_g234_g2345_v2_v34</div> <div>Show the field ONLY if: [session_care_chw_g234_g2345_v2_v34(3)] = '1'</div>	Other	text, Required																											
2132	<div>session_progress_chw_g234_g2345_v2_v34</div> <div>Show the field ONLY if: [session_content_chw_g234_g2345_v2_v34(7)] = '1'</div>	7. Reinforcing progress and identifying what has been helpful in achieving gains (e.g., scheduling PCP visit, smoking cessation group)	<div>notes</div> <div>Custom alignment: LH</div>																											
2133	<div>session_other_chw_g234_g2345_v2_v34</div> <div>Show the field ONLY if: [session_content_chw_g234_g2345_v2_v34(8)] = '1'</div>	8. Other	<div>notes</div> <div>Custom alignment: LH</div>																											

2134	session_qline_chw_g234_g2345_v2_v34 Show the field ONLY if: [session_content_chw_g234_g2345_v2_v34(9)] = '1'	9. QUIT LINE Was QUIT LINE presented/discussed to participant TODAY?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH	1	Yes	0	No
1	Yes						
0	No						
2135	session_noqline_chw_g234_g2345_v2_v34 Show the field ONLY if: [session_qline_chw_g234_g2345_v2_v34] = '0'	Why not?	notes, Required Custom alignment: LH				
2136	session_qline_interest_chw_g234_g2345_v2_v34 Show the field ONLY if: [session_qline_chw_g234_g2345_v2_v34] = '1'	Was participant interested?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH	1	Yes	0	No
1	Yes						
0	No						
2137	session_qlineatsession_chw_g234_g2345_v2_v34 Show the field ONLY if: [session_qline_chw_g234_g2345_v2_v34] = '1'	Did the participant call the Quit Line during this session?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH	1	Yes	0	No
1	Yes						
0	No						
2138	session_qlinenoatsession_chw_g234_g2345_v2_v34 Show the field ONLY if: [session_qlineatsession_chw_g234_g2345_v2_v34] = '0'	Why not?	notes, Required Custom alignment: LH				
2139	session_qlinesched_chw_g234_g2345_v2_v34 Show the field ONLY if: [session_qlineatsession_chw_g234_g2345_v2_v34] = '0'	Was a Quit Line call scheduled?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH	1	Yes	0	No
1	Yes						
0	No						
2140	session_qlinenosched_chw_g234_g2345_v2_v34 Show the field ONLY if: [session_qlinesched_chw_g234_g2345_v2_v34] = '0'	Why not?	notes, Required Custom alignment: LH				
2141	session_qlinetime_chw_g234_g2345_v2_v34 Show the field ONLY if: [session_qlineatsession_chw_g234_g2345_v2_v34] = '1'	Date/time Quit Line call	text (datetime_mdy), Required Custom alignment: LH				
2142	session_qline_chwinvolv_g234_g2345_v2_v34 Show the field ONLY if: [session_qlineatsession_chw_g234_g2345_v2_v34] = '1'	Was the CHW involved in the Quit Line call?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LH	1	Yes	0	No
1	Yes						
0	No						
2143	session_qlinecall_chw_g234_g2345_v2_v34 Show the field ONLY if: [session_qlineatsession_chw_g234_g2345_v2_v34] = '1'	Describe session/call	notes, Required Custom alignment: LH				
2144	session_qlinenrt_chw_g234_g2345_v2_v34 Show the field ONLY if: [session_qlineatsession_chw_g234_g2345_v2_v34] = '1'	Did the participant/CHW request NRT? Please explain	notes, Required Custom alignment: LH				
2145	session_qlinenrtuse_chw_g234_g2345_v2_v34 Show the field ONLY if: [session_qlineatsession_chw_g234_g2345_v2_v34] = '1'	Did the participant use the NRT? Please explain	notes, Required Custom alignment: LH				

2146	session_qlineable_chw_g234_g2345_v2_v34 Show the field ONLY if: [session_qlineat session_chw_g234_g2345_v2_v34] = '1'	Did the quitline staff seem able to work with people with SMI? Please explain	notes, Required Custom alignment: LH																										
2147	session_qlinefu_chw_g234_g2345_v2_v34 Show the field ONLY if: [session_qlineat session_chw_g234_g2345_v2_v34] = '1'	Was a follow up call scheduled?	notes, Required Custom alignment: LH																										
2148	session_qlinecom_chw_g234_g2345_v2_v34	Quit line Notes	notes Custom alignment: LH																										
2149	session_descript_chw_g234_g2345_v2_v34	Brief description of the session	notes, Required Custom alignment: LH																										
2150	session_next_goals_chw_g234_g2345_v2_v34	Goals for next session	notes, Required Custom alignment: LH																										
2151	next_visit_all_chw_g234_g2345_v2_v34	Next visit will be	text (datetime_mdy), Required Field Annotation: @HIDEBUTTON																										
2152	name_chw_g234_g2345_v2_v34	CHW	radio, Required <table><tr><td>1</td><td>Alexandra Fortune</td></tr><tr><td>2</td><td>Ashley Newman</td></tr><tr><td>3</td><td>Aysha Peralta</td></tr><tr><td>4</td><td>Erin Hanrahan</td></tr><tr><td>5</td><td>John Dowd</td></tr><tr><td>6</td><td>Karlie Marrs</td></tr><tr><td>7</td><td>Leeza Rojas</td></tr><tr><td>8</td><td>Madalyn Davis</td></tr><tr><td>9</td><td>Madeleine Fontaine</td></tr><tr><td>10</td><td>Megan Donnelly</td></tr><tr><td>11</td><td>Morgan Boudreau</td></tr><tr><td>12</td><td>Nina Cherilus</td></tr><tr><td>13</td><td>Carlos Taveras</td></tr></table>	1	Alexandra Fortune	2	Ashley Newman	3	Aysha Peralta	4	Erin Hanrahan	5	John Dowd	6	Karlie Marrs	7	Leeza Rojas	8	Madalyn Davis	9	Madeleine Fontaine	10	Megan Donnelly	11	Morgan Boudreau	12	Nina Cherilus	13	Carlos Taveras
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12	Nina Cherilus																												
13	Carlos Taveras																												
2153	contact_sheet_all_visits_chw_141_160_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete																				
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2	Complete																												
Instrument: Qualitative Interview Outreach Tracking (chw_qualitative_interview_outreach_tracking) ^ Collapse																													
2154	screen_id	Screening ID	text, Required																										
2155	qi_outreach_name	Name	text, Required, Identifier																										
2156	enrollee_type	Category of qualitative enrollee:	dropdown, Required <table><tr><td>1</td><td>Participant</td></tr><tr><td>2</td><td>CHW</td></tr><tr><td>3</td><td>PCP</td></tr><tr><td>4</td><td>Stakeholder</td></tr><tr><td>5</td><td>Other</td></tr></table>	1	Participant	2	CHW	3	PCP	4	Stakeholder	5	Other																
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2	CHW																												
3	PCP																												
4	Stakeholder																												
5	Other																												
2157	enrollee_type_other Show the field ONLY if: [enrollee_type]='4'	Other (explain):	text																										
2158	safety_contact_qi	Safe/able to contact?	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																						
1	Yes																												
0	No																												
2159	outreach_date Show the field ONLY if: [safety_contact_qi] = '1'	Date of outreach	text (datetime_mdy)																										

2160	contact_method Show the field ONLY if: [safety_contact_qi] = '1'	Method of contact	radio <table border="1"> <tr><td>1</td><td>Email</td></tr> <tr><td>2</td><td>Phone</td></tr> <tr><td>3</td><td>Verbal (in person)</td></tr> <tr><td>4</td><td>Letter</td></tr> </table>	1	Email	2	Phone	3	Verbal (in person)	4	Letter														
1	Email																								
2	Phone																								
3	Verbal (in person)																								
4	Letter																								
2161	who_contacted Show the field ONLY if: [safety_contact_qi] = '1'	Who contacted?	dropdown <table border="1"> <tr><td>1</td><td>Sophia Allen</td></tr> <tr><td>2</td><td>Melissa Maravic</td></tr> <tr><td>3</td><td>Gladys Pachas</td></tr> <tr><td>4</td><td>Kristina Schnitzer</td></tr> <tr><td>5</td><td>Diana Arntz</td></tr> <tr><td>6</td><td>Bianca Deeb</td></tr> <tr><td>7</td><td>Other agency staff (specify in notes)</td></tr> <tr><td>8</td><td>Nate Phillips</td></tr> </table>	1	Sophia Allen	2	Melissa Maravic	3	Gladys Pachas	4	Kristina Schnitzer	5	Diana Arntz	6	Bianca Deeb	7	Other agency staff (specify in notes)	8	Nate Phillips						
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6	Bianca Deeb																								
7	Other agency staff (specify in notes)																								
8	Nate Phillips																								
2162	who_contacted_other Show the field ONLY if: [who_contacted] = "Other"	Who contacted?	text																						
2163	outreach_outcome Show the field ONLY if: [safety_contact_qi] = '1'	What was the outcome of the outreach?	radio <table border="1"> <tr><td>1</td><td>Scheduled</td></tr> <tr><td>2</td><td>Not scheduled, will reach out again</td></tr> <tr><td>10</td><td>No response, will reach out again</td></tr> <tr><td>11</td><td>No response, do not contact again</td></tr> <tr><td>3</td><td>Refused temporarily, contact again</td></tr> <tr><td>4</td><td>Refused, do not contact again (please explain reason in notes)</td></tr> <tr><td>5</td><td>Did Not Contact - Deceased (ineligible)</td></tr> <tr><td>6</td><td>Did Not Contact - Hospitalized (ineligible)</td></tr> <tr><td>7</td><td>Did Not Contact - Too ill/ psychiatric (ineligible)</td></tr> <tr><td>8</td><td>Did Not Contact - Refused recontact in Y3 survey</td></tr> <tr><td>9</td><td>Did Not Contact - Other reason</td></tr> </table>	1	Scheduled	2	Not scheduled, will reach out again	10	No response, will reach out again	11	No response, do not contact again	3	Refused temporarily, contact again	4	Refused, do not contact again (please explain reason in notes)	5	Did Not Contact - Deceased (ineligible)	6	Did Not Contact - Hospitalized (ineligible)	7	Did Not Contact - Too ill/ psychiatric (ineligible)	8	Did Not Contact - Refused recontact in Y3 survey	9	Did Not Contact - Other reason
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7	Did Not Contact - Too ill/ psychiatric (ineligible)																								
8	Did Not Contact - Refused recontact in Y3 survey																								
9	Did Not Contact - Other reason																								
2164	nocontact_reason Show the field ONLY if: [outreach_outcome] = 9	Reason for no contact	text																						
2165	date_scheduled Show the field ONLY if: [outreach_outcome] = "Scheduled"	Interview date	text (date_mdy)																						
2166	other_notes	Other notes	notes																						
2167	chw_qualitative_interview_outreach_tracking_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																
0	Incomplete																								
1	Unverified																								
2	Complete																								
Instrument: Qualitative Interview Enrollment (qualitative_interview_enrollment)			^ Collapse																						
2168	screen_id_v2	Screening ID	text, Required																						
2169	enrollee_type_v2	Category of qualitative enrollee:	dropdown, Required <table border="1"> <tr><td>1</td><td>Participant</td></tr> <tr><td>2</td><td>CHW</td></tr> <tr><td>3</td><td>Stakeholder</td></tr> <tr><td>4</td><td>PCP</td></tr> <tr><td>5</td><td>Other</td></tr> </table>	1	Participant	2	CHW	3	Stakeholder	4	PCP	5	Other												
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3	Stakeholder																								
4	PCP																								
5	Other																								
2170	enrollee_type_other_v2 Show the field ONLY if: [enrollee_type_v2]='4'	Other (explain):	text																						

2171	qi_cell_block	Cell Number	dropdown <div><div>11</div><div>22</div><div>33</div><div>44</div><div>55</div><div>66</div><div>77</div><div>88</div><div>99</div></div>
2172	completed_consent_v2	Was consent completed?	yesno <div><div>1Yes</div><div>0No</div></div>
2173	why_not_consent_qi Show the field ONLY if: [completed_consent_v2] = '0'	Why not?	dropdown, Required <div><div>1Failed consent comprehension test</div><div>2Did not want to participate</div><div>3Poses safety risk</div><div>4Deceased</div><div>5Could not locate</div><div>6Discharged</div><div>7Too symptomatic</div></div>
2174	consent_date_v2 Show the field ONLY if: [completed_consent_v2] = '1'	Date of consent	text (date_mdy), Required
2175	enrollment_id_v2 Show the field ONLY if: [completed_consent_v2] = '1'	Enrollment ID	text, Required
2176	interview_conducted_v2 Show the field ONLY if: [completed_consent_v2] = '1'	Was the interview conducted?	yesno, Required <div><div>1Yes</div><div>0No</div></div>
2177	date_of_interview_v2 Show the field ONLY if: [interview_conducted_v2] = '1'	Date the interview was conducted?	text (date_mdy), Required
2178	interviewer_name_v2 Show the field ONLY if: [interview_conducted_v2] = '1'	Interviewer name	dropdown, Required <div><div>1Diana Arntz</div><div>2Kristina Schnitzer</div><div>3Melissa Maravic</div><div>4Gladys Pachas</div></div>
2179	general_notes	Notes	notes
2180	qualitative_interview_enrollment_complete	Section Header: <i>Form Status</i> Complete?	dropdown <div><div>0Incomplete</div><div>1Unverified</div><div>2Complete</div></div>
Instrument: Contact Information (contact_information) <div>^ Collapse</div>			
2181	participant_first_name	Section Header: <i>Participant Information</i> Participant First Name	text, Required, Identifier Custom alignment: LV
2182	participant_last_name	Participant Last Name	text, Identifier Custom alignment: LV
2183	address	Address	text, Identifier Custom alignment: LV
2184	city	City	text Custom alignment: LV
2185	state	State (2 letter abbreviation)	text Custom alignment: LV

2186	zip	Zip Code	text (zipcode) Custom alignment: LV						
2187	primary_phone	Primary Phone	text (phone), Identifier Custom alignment: LV						
2188	secondary_phone	Secondary Phone	text (phone), Identifier Custom alignment: LV						
2189	contact_times	Best Contact Times	notes Custom alignment: LV						
2190	participant_home	is this a group home?	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: LV	1	Yes	0	No		
1	Yes								
0	No								
2191	participant_home_contact_name Show the field ONLY if: [participant_home] = '1'	group home contact name	text Custom alignment: LV						
2192	participant_home_contact_phone Show the field ONLY if: [participant_home] = '1'	group home contact phone	text Custom alignment: LV						
2193	first_contact_name	Section Header: <i>First Contact</i> Name	text Custom alignment: LV						
2194	first_primary_phone	Primary Phone	text (phone) Custom alignment: LV						
2195	first_secondary_phone	Secondary Phone	text (phone) Custom alignment: LV						
2196	second_relationship	Relationship	text Custom alignment: LV						
2197	contact_information_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete
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