

## Smoking/Nicotine Use Questionnaire

Cory S. Brown, CMS-CHt, FIBH Labyrinth Hypnotherapy

1. Please rate your motivation for living a healthier lifestyle, with 1 being a very low commitment and 10 being extremely committed.

- 2. Tell me about when you started smoking (using nicotine).
- 3. For how many years have you smoked (used nicotine).
- 4. When and where do you smoke (use nicotine) most? Pease be specific.
- 5. Is there any certain time of day when you smoke (use nicotine) most?
- 6. Is there any certain situation where you always want to smoke (use nicotine)? If so, please describe.

7. Do you ever smoke (use nicotine) to avoid doing something? If yes, please describe.

## Smoking/Nicotine Use Questionnaire, cont'd

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8. Do you ever smoke (use nicotine) to distract yourself from experiencing certain emotions? If yes, please describe.

9. Have you ever attempted to quit smoking (using nicotine) before? If yes, when, and how many times?

10. Why did you go back to smoking (using nicotine)?

11. Do you have any fears or doubts about becoming a non-smoker (non-nicotine user)?

12. Please list ten reasons/benefits as to why you are choosing to quit smoking (using nicotine).

13. Has a physician warned you of a health issue due to your smoking (using nicotine)?

14. Do you have any fears of what might happen if you continue to smoke (use nicotine)?

## Smoking/Nicotine Use Questionnaire, cont'd

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15. Who else will benefit by your not smoking (using nicotine)? Please be specific.

16. Why is now the right time to quit?

17. When you end an unhealthy habit, it must be replaced with a health habit. What good habit(s) would you like to replace smoking (using nicotine) with?

18. Have chosen your quit date? If yes, what is it? Is there anything special about this date?

19. If you were able to save up some of the money you would spend on cigarettes (nicotine products) and gift yourself, what would that gift be? For example, a massage at the spa, a fun weekend get-away, or a set of new golf clubs, etc.

20. Have you told any of your friends/family who do smoke, that you have chosen to live a healthier lifestyle? If so, what was their response?

## Smoking/Nicotine Use Questionnaire, cont'd

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21. Please list 3 things you really, really don't like to do, and so you procrastinate doing them. For example, taxes, cleaning the toilet, folding laundry, etc.

22. Do or did either of your parents smoke? If yes, who?

23. List three goals you have achieved or accomplishments that you feel really good about. It doesn't matter how long ago, or how big or small the goal, just that you felt very good about having accomplished it.

24. List some of your higher values. For example, honesty, equality, service, family, freedom, religious values, etc.

25. List some healthy habits you already have and want to do more of, or that you had before you smoked (used nicotine), that you'd like to get back to.