37. Have you ever smoked?  1. ___ Yes  2. ___ No
   (Cigarettes, cigars, pipe. Record NO if subject has never smoked as much as one cigarette a day, or 1 oz. of tobacco a month, for as long as one year.)

If YES to (33) or (34); what have you smoked for how many years? (Write in specific number of years in the appropriate square)

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<td>5-9</td>
<td>10-14</td>
<td>15-19</td>
<td>20-24</td>
<td>25-29</td>
<td>30-34</td>
<td>35-39</td>
<td>&gt;40</td>
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41. If cigarettes, how many packs per day? Write in number of cigarettes
   ______  Less than 1/2 pack
   ______  1/2 pack, but less than 1 pack
   ______  1 pack, but less than 1 1/2 packs
   ______  1-1/2 packs or more

42. Number of pack years:
   __________________

43. If an ex-smoker (Cigarettes, cigar or pipe), how long since you stopped? (Write in number of years.)
   __________________
   ______  0-1 year
   ______  1-4 years
   ______  5-9 years
   ______  10+ years