

MAY2016-07-01 - Tobacco Questionnaire Data Dictionary

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Document Summary

Property	Value
Document Title	MAY2016-07-01 - Tobacco Questionnaire: Data Dictionary
Date Created	08/11/2025
Sections	3
Entries	45
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MAY2016-07-01 - Tobacco Questionnaire: Data Dictionary

Section 1: Identifiers

Class	Variable	Label	Description	Format Text
01. Principal	SUBJECT	Participant Identifier		Char

Section 2: Study-wide

Class	Variable	Label	Description	Format Text
01. Principal	CYCLE	Visit Number		Numeric
01. Principal	FOLDERINSTAN CENAME	Dataset Folder Name		"Month 6 or Early Termination of Follow-up (1)"="Month 6 or Early Termination of Follow-up (1)" "Month 6 or Early Termination of Follow-up"="Month 6 or Early Termination of Follow-up"
01. Principal	MAXUPDATED	Last Updated		SAS Date
01. Principal	MINCREATED	Created Time		SAS Date
01. Principal	PAGEREPEATNU MBER	Page Repeat Number		Numeric
01. Principal	PROJECT	Protocol		"MAY2016-07-01"="MAY2016-07-01"
01. Principal	RAVEID	Rave ID		Numeric
01. Principal	RECORDPOSITIO N	Record Position		Numeric
01. Principal	SITE	Site		"Cleveland Clinic Foundation"="Cleveland Clinic Foundation" "Huntsman Cancer Institute/University of Utah"="Huntsman Cancer Institute/University of Utah" "M D Anderson Cancer Center"="M D Anderson Cancer Center" "Mayo Clinic in Arizona"="Mayo Clinic in Arizona" "Mayo Clinic"="Mayo Clinic" "University of Michigan Comprehensive Cancer Center"="University of Michigan Comprehensive Cancer Center" "University of Pittsburgh Cancer Institute (UPCI)"="University of Pittsburgh Cancer Institute (UPCI)" "University of Puerto Rico"="University of Puerto Rico"
01. Principal	SITENUMBER	Site Number		"AZ020"="AZ020" "MI014"="MI014" "MN026"="MN026" "OH027"="OH027" "PA015"="PA015" "PR008"="PR008" "TX035"="TX035" "UT003"="UT003"
01. Principal	TARGETDAYS	Target Days From Baseline		Numeric

Section 3: Tobacco Questionnaire

Class	Variable	Label	Description	Format Text
01. Principal	CHOSENOTANS	Choose Not To Answer		0="Unchecked" 1="Checked"
01. Principal	CIG17DAYTX	Cigarette In The Last 1-7 Days		2="No"
01. Principal	CIG1MONTHTX	Cigarette In Less Than 1 Month		1="Yes" 2="No"
01. Principal	CIG1YEARTX	Cigarette In Less Than 1 Year		1="Yes" 2="No"
01. Principal	CIGDAYSTX	Number Of Days Since Last Cigarette		Numeric
01. Principal	CIGMONTHSTX	Number Of Months Since Last Cigarette		Numeric
01. Principal	CIGMORE1YEARTX	Cigarette In More Than 1 Year		1="Yes" 2="No"
01. Principal	CIGNUMYEARSTX	Number Of Years Since Last Cigarette		Numeric
01. Principal	CIGSPDAYTX	On Average, When You Smoked, About How Many Cigarettes Do You Smoke A Day?		Numeric
01. Principal	CIGSPDAYTXSP	Cigarettes Per Day Specify		Numeric
01. Principal	CIGTODAYTX	I Smoked A Cigarette Today		1="Yes" 2="No"
01. Principal	CIGWEEKSTX	Number Of Weeks Since Last Cigarette		Numeric
01. Principal	COM	Tobacco Questionnaire Comments		Char
01. Principal	CURRENTSMOKE	Do You Now Smoke Cigarettes?		1="Everyday" 2="Some Days" 3="Not At All"
01. Principal	DONTKNOWTX	Don't Know/Don't Remember		1="Yes" 2="No"
01. Principal	FLUFF	How Long Has It Been Since You Last Smoked A Cigarette		1="Checked"
01. Principal	FLUFF2	How Often Do You/Did You Use Other Forms Of Tobacco?		1="Checked"
01. Principal	FLUFF3	Since Your Last Visit, Which Of The Following Products Have You Used?		1="Checked"

Class	Variable	Label	Description	Format Text
01. Principal	FLUFF4	During Each Of The Following Time Frames, Please Indicate Whether You Smoked Cigarettes Every Day, Some Days, Or Not At All.		1="Checked"
01. Principal	OTH	Since Your Last Visit, Have You Used Other Forms Of Tobacco, Not Including Cigarettes?		1="Yes" 2="No"
01. Principal	OTHTOBCHONOTANS	Choose Not To Answer		0="Unchecked"
01. Principal	OTHTOBEVERYDAYTX	Other Tobacco Use Every Day		1="Yes"
01. Principal	OTHTOBNUMDAYSSPTX	Other Tobacco Use Per		
01. Principal	OTHTOBNUMDAYSTX	Other Tobacco Use Number Of Days		Numeric
01. Principal	OTHTOBPERDAYTX	Other Tobacco Use Number Of Times Per Day		Numeric
01. Principal	OTHTOBSOMEDAYSTX	Other Tobacco Use Some Days		
01. Principal	OTHTOBSP	Other Tobacco Use, Specify		Char
01. Principal	SMOKEFU	Smoke After The End Of Study Treatment?		2="Smoked Some Days" 3="Did Not Smoke At All" 4="Not Applicable (I Have Not Completed The Study Treatment)" 8="Choose Not To Answer" 9="Don't Know/Not Sure"
01. Principal	SMOKELASTVISIT	Smoke Since Your Last Visit To This Clinic?		1="Smoked Every Day" 2="Smoked Some Days" 3="Did Not Smoke At All" 4="Not Applicable (This Is My First Visit To This Clinic)" 8="Choose Not To Answer" 9="Don't Know/Not Sure"
01. Principal	SMOKETX	Smoke During Study Treatment?		1="Smoked Every Day" 2="Smoked Some Days" 3="Did Not Smoke At All" 4="Not Applicable" 8="Choose Not To Answer"
01. Principal	TIMESINCEOTHTOBTX	If You Do Not Currently Use Other Forms Of Tobacco, But Did In The Past, How Long Has It Been Since You Last Used Other Forms Of Tobacco Regularly?		

Class	Variable	Label	Description	Format Text
01. Principal	TOBPROD	Tobacco Product		1="Cigarettes" 2="Traditional Cigars, Cigarillos Or Filtered Cigars" 3="Hookah" 4="Bidis" 5="Snus" 6="E-Cigarettes Or Other Electronic Nicotine Delivery System" 7="Pipes" 8="Clove Cigarettes Or Kreteks" 9="Smokeless Tobacco (Like Dip, Chew, Or Snuff)" 10="Paan With Tobacco, Gutka, Zarda, Khaini" 11="Other" 12="Water Pipe"
01. Principal	TOBPRODYN	Tobacco Use		1="Yes" 2="No"