

Subject No. Subject Initials

EXIT INTERVIEW QUESTIONNAIRE SNUS VERSION

SWITCHING FROM USUAL BRAND CIGARETTES TO A TOBACCO-HEATING CIGARETTE OR SNUS
– A MULTI-CENTER EVALUATION OF HEALTH-RELATED QUALITY OF LIFE ASSESSMENTS AND
BIOMARKERS OF EXPOSURE AND HARM

Covance Study No. 6270-229

For

R.J. Reynolds Tobacco Company
PO Box 1487
Winston-Salem, NC 27102

By

Bellomy Research, Inc.
2150 Country Club Road
Winston-Salem, NC 27104

For office use only: I confirm that this subject has been consented to complete this questionnaire and the questionnaire was received on the following date:

Study Coordinator (or designee): _____ Date: _____

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Your opinion counts! Please give us your opinion of the study product you used, as well as your feedback on the study. Answer each question by circling the number beside the best answer. Circle only one choice unless indicated otherwise. When completed, please return your questionnaire to the study coordinator.

- 1) Before participating in this study, had you ever used a smokeless tobacco product? (Circle one)

Yes 1
No 2

- 2) While participating in this study, what other tobacco products, if any, did you use besides the study-provided snus smokeless tobacco product? (Circle all that apply)

Cigarettes 1
Moist snuff or dip in a round can 2
Chewing tobacco 3
Pipe tobacco 4
Cigars or little cigars 5
Tobacco tablets 6
Other (Specify) 7
None 8

- 3) If you used any **cigarettes** while participating in this study, would you say that the number of cigarettes you smoked during the study was average, above average, or below average compared to the number of cigarettes you smoked before the study? (Circle one)

Average 1
Above average 2
Below average 3
Did not use cigarettes during the study 4

- 4) While participating in this study, what nicotine replacement products, if any, did you use? (Circle all that apply)

Nicotine patch 1
Nicotine gum 2
Nicotine lozenges 3
Nicotine nasal spray 4
Nicotine inhaler 5
Other (Specify) 6
None 7

- 5) About how long did it take you to get used to the study-provided snus smokeless tobacco product? (Circle one)

1 week or less 1
2 to 3 weeks 2
4 weeks / 1 month 3
Between 1 and 2 months 4
2 months or more 5
I never got used to using snus 6

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- 6) On average, how often did you use the study-provided snus smokeless tobacco product while participating in this study? (Circle one)

Every day 1
 5 or 6 days per week..... 2
 3 or 4 days per week..... 3
 1 or 2 days per week..... 4
 Less than one day a week 5

- 7) When you used the study-provided snus smokeless tobacco product, where in your mouth did you typically place the pouch? (Circle one)

In the front between upper lip and gum 1
 In the front between lower lip and gum 2
 On the upper side between teeth and cheek 3
 On the lower side between teeth and cheek..... 4
 Under your tongue 5
 Different places 6
 Did not use enough to have a pattern..... 7

- 8) Did you typically move the snus pouch around or reposition it while you were using it? (Circle one)

Yes 1
 No..... 2

- 9) How long did you typically keep the snus pouch in your mouth? (Circle one)

Less than 5 minutes 1
 5 to 9 minutes..... 2
 10 to 30 minutes 3
 Longer than 30 minutes 4

- 10) When you used the study-provided snus smokeless tobacco product, did you ever have the urge to spit? (Circle one)

Yes 1
 No..... 2 **(SKIP TO Q. 13)**

- 11) Did you find that the urge to spit decreased with time? (Circle one)

Yes 1
 No..... 2 **(SKIP TO Q. 13)**

- 12) About how long did it take for the urge to spit to go away? (Circle one)

1 week or less 1
 2 to 3 weeks..... 2
 4 weeks / 1 month..... 3
 More than 1 month..... 4

- 13) Did you ever swallow a snus pouch? (Circle one)

Yes 1
 No..... 2 **(SKIP TO Q. 16)**

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14) About how many times did you swallow a snus pouch? (Circle one)

- 1 time 1
 2 times..... 2
 3 to 4 times..... 3
 5 or more times 4

15) When you first swallowed a snus pouch, would you say you were...? (Circle one)

- Very concerned 1
 Somewhat concerned 2
 Neither concerned nor unconcerned 3
 Somewhat unconcerned 4
 Not at all concerned 5

16) Did you ever try using multiple pouches of snus at the same time? (Circle one)

- Yes 1
 No..... 2 **(SKIP TO Q. 21)**

17) When you used multiple pouches of snus, how many did you use at one time? (Circle one)

- 2 pouches..... 1
 3 pouches..... 2
 More than 3 pouches 3

18) What percent of the time would you say you used multiple pouches of snus at the same time? (Circle one)

- Less than 25% of the time 1
 25% to 50% of the time 2
 More than 50% of the time 3

19) Did you ever mix more than one flavor of snus at the same time? (Circle one)

- Yes 1
 No..... 2 **(SKIP TO Q. 21)**

20) Which of the following snus flavor combinations did you try? (Circle one)

- Original and Spice..... 1
 Original and Frost 2
 Frost and Spice 3

21) Did you ever drink a beverage while using the snus smokeless tobacco product? (Circle one)

- Yes 1
 No..... 2

22) Did you keep the study-provided snus smokeless tobacco product in the freezer? (Circle one)

- Yes 1
 No..... 2

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23) How convenient was it for you to keep the study-provided snus smokeless tobacco product in the freezer? (Circle one)

- Very convenient 1
 Somewhat convenient..... 2
 Neither convenient nor inconvenient 3
 Somewhat inconvenient..... 4
 Very inconvenient 5

24) How long did it take you to use one tub of the study-provided snus smokeless tobacco product? (Circle one)

- 1 day 1
 2 days..... 2
 3 days..... 3
 4 days..... 4
 5 days..... 5
 6 days..... 6
 7 days or more 7

25) How did you dispose of the used snus smokeless tobacco pouches? (Please specify all the ways you disposed of them.)

26) Did disposing of the used snus smokeless tobacco pouches present any difficulties for you? (Circle one)

- Yes 1
 No..... 2 **(SKIP TO Q. 28)**

27) What difficulties did you encounter with disposing the snus smokeless tobacco pouches? (Please be as specific as possible.)

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- 28) Where PRIMARILY did you use the study-provided snus smokeless tobacco product? (Circle one) Where ELSE did you use it? (Circle all that apply)

	Primarily Used	Other Locations Used
	(Circle one)	(Circle all that apply)
At work	1	1
At home	2	2
In my car	3	3
In a restaurant	4	4
In a bar/club	5	5
Around friends/others	6	6
At a sporting event	7	7
In a plane	8	8
On public transportation (bus/subway)	9	9
Other public areas that ban smoking	10	10
Other (Specify) _____	11	11

- 29) Which flavors of the study-provided snus smokeless tobacco product did you try? (Circle all that apply) And which ONE flavor was your favorite? (Circle one)

	Flavor(s) Tried	Favorite Flavor
	(Circle all that apply)	(Circle one)
Frost	1	1
Original	2	2
Spice	3	3

- 30) Did you primarily stick to one flavor of the study-provided snus smokeless tobacco product throughout the study or did you frequently change flavors? (Circle one)

Primarily stuck with one flavor 1

Changed flavors throughout study 2

- 31) On a scale from 1 to 10, with 1 being "Not Satisfied At All" and 10 being "Completely Satisfied," how satisfied were you with the study-provided snus smokeless tobacco product? (Please circle a number from 1 to 10.)

Not Satisfied At All									Completely Satisfied
1	2	3	4	5	6	7	8	9	10

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32) Did you find using the study-provided snus smokeless tobacco product was an enjoyable alternative to smoking a cigarette? (Circle one)

Yes 1
No..... 2

33) Did you miss some of the rituals of smoking a tobacco-burning cigarette, such as tapping the ashes? (Circle one)

Yes 1
No..... 2

34) Did you notice any change in the study-provided snus smokeless tobacco product's taste from the first pouch in the tub to the last pouch in the tub? (Circle one)

Yes 1
No..... 2

35) Did you notice any change in the study-provided snus smokeless tobacco product's taste throughout the study? (Circle one)

Yes 1
No..... 2

36) Did you notice any change in the study-provided snus smokeless tobacco product's appearance from the first pouch in the tub to the last pouch in the tub? (Circle one)

Yes 1
No..... 2

37) Would you say that the study-provided snus smokeless tobacco product ...? (Circle one)

Greatly exceeded your expectations..... 1
Somewhat exceeded your expectations 2
Met your expectations..... 3
Somewhat failed to meet your expectations 4
Did not at all meet your expectations..... 5

38) Taking into consideration everything you know about the study-provided snus smokeless tobacco product and your experience with the product, what specifically did you **like** about it? (Please be as specific as possible.)

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- 39) What specifically did you **dislike** about the study-provided snus smokeless tobacco product?
(Please be as specific as possible.)

- 40) How well or poorly do you think the study-provided snus smokeless tobacco product fits into your lifestyle? (Circle one)

Fits extremely well 1
 Fits somewhat well..... 2
 Fits neither well nor poorly 3
 Fits somewhat poorly 4
 Fits very poorly..... 5

- 41) Have you spoken with any other adult smokers about the study-provided snus smokeless tobacco product? (Circle one)

Yes 1
 No..... 2 **(SKIP TO Q. 43)**

- 42) How many adult smokers have you spoken to about the study-provided snus smokeless tobacco product? (Circle one)

1 to 3 1
 4 to 6 2
 7 to 9 3
 10 or more..... 4

- 43) Did you offer any of the study-provided snus smokeless tobacco product to an adult friend who smokes? (Circle one)

Yes 1
 No..... 2

- 44) How likely would you be to recommend the study-provided snus smokeless tobacco product to an adult friend who smokes? (Circle one)

Definitely would recommend..... 1
 Probably would recommend 2
 Might or might not recommend 3
 Probably would not recommend 4
 Definitely would not recommend..... 5

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45) How likely would you be to continue using the study-provided snus smokeless tobacco product if it were available in your local store? (Circle one)

- Extremely likely..... 1
 Very likely 2
 Somewhat likely..... 3
 Not very likely 4
 Not at all likely 5

46) Why would you continue or not continue using the study-provided snus smokeless tobacco product if it were available? (Please be as specific as possible.)

47) If you were to continue to use the study-provided snus smokeless tobacco product, would you use it in combination with cigarettes or other tobacco products? (Circle one)

- Would use in combination with cigarettes only..... 1
 Would use in combination with cigarettes and other tobacco products 2
 Would only use the study-provided snus smokeless tobacco product..... 3
 Would not continue using the study-provided snus smokeless tobacco product..... 4

In these last few questions, we would like your opinion about the study in which you participated.

48) How did you initially hear about the study? (Circle one)

- Through the mail..... 1
 Phone 2
 Responded to a TV ad..... 3
 Responded to a print ad 4
 Responded to a radio ad 5
 Online 6
 Word of mouth 7
 Other (Specify) 8

49) Did you discuss the study with anyone else and/or encourage them to participate? (Circle one)

- Yes 1
 No..... 2

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50) Below is a list of activities that were required of you during the course of the study. On a scale of 1 to 7, with 1 being "Extremely Unappealing," 4 being "Neither Appealing nor Unappealing" and 7 being "Extremely Appealing," how appealing were each of the following activities to you? (Circle one rating for each item.)

	(Circle one rating for each)						
	Extremely Unappealing			Neither Appealing nor Unappealing			Extremely Appealing
Overnight stays at the clinic	1	2	3	4	5	6	7
Visits every 2 weeks	1	2	3	4	5	6	7
Daily telephone diary calls	1	2	3	4	5	6	7
Travel to and from the clinic	1	2	3	4	5	6	7
Compensation	1	2	3	4	5	6	7
Length of the study	1	2	3	4	5	6	7
Medical procedures	1	2	3	4	5	6	7
Product you were assigned to use	1	2	3	4	5	6	7
Completing questionnaires	1	2	3	4	5	6	7

51) How would you rate each of the following characteristics of the study? (Circle one rating for each item.)

	(Circle one rating for each)				
	Poor	Fair	Good	Very Good	Excellent
Convenience of the clinic location	1	2	3	4	5
Cleanliness of the facilities	1	2	3	4	5
Quality of the food	1	2	3	4	5
Convenience of the smoking area	1	2	3	4	5
Comfort of the smoking area	1	2	3	4	5
Security of the clinic	1	2	3	4	5
Sleeping accommodations	1	2	3	4	5
Comfort with the study team members	1	2	3	4	5
Encouragement and motivation of the study team members	1	2	3	4	5

52) Would you consider participating in a similar study in the future? (Circle one)

Yes 1
No 2

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53) Why or why not would you consider participating in a similar study in the future? (Please be as specific as possible.)

54) Do we have your permission to contact you in the future to ask some questions about your tobacco use at that time? (Circle one)

Yes 1

No..... 2

55) Did you enjoy participating in this study? Why or why not? (Please be as specific as possible.)

56) Do you have any additional comments or suggestions that you would like to share with us about the study or study product? (Please be as specific as possible.)

Thank you for your help and your opinions as part of our research!