1. Did you smoke a cigarette, cigar or pipe in the last 24 hours?
   ____yes→go to question 1a  ____no→go to question 2

   1a. How many of each did you smoke?
   _____cigarettes  _____cigars  _____bowls of tobacco

2. Did you drink any alcoholic beverages in the last 24 hours?
   _____yes→answer questions 2a to 2c  ____no→go to question 3

   2a. How many glasses of wine did you have? _____

   2b. How many shots of whiskey did you have? _______

   2c. How many beers did you have? _____ What size beers?* _______ oz.
   *Generally, regular-sized cans and bottles of beer are 12 ounces, large-sized cans and bottles are 16 ounces, and glasses of draft beer are 10 ounces.

3. Do you feel rested from last night’s sleep?
   ____yes  ____no

4. Did you have difficulty falling asleep last night?
   ____yes  ____no

5. Did you awaken earlier than usual this morning?
   ____yes  ____no