

Study ID Number _____

Name _____

	Other _____			
--	-------------	--	--	--

MHH 2 What is the longest time (duration) that you took herbs in your life?

- ☐ less than a week ☐ a week to a month ☐ a month to a year ☐ more than a year ☐ do not know

MHH 3 When did you last take the herbs

- ☐ taking now ☐ less than one month ago ☐ about one month to one year ago ?
☐ more than a year ago
☐ do not know