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CHAPTER 1: Introduction, Summary, and Conclusions

 How many levels of hierarchy for classifying the strength of causal inferences from available evidence are introduced in the report? One Two Three Four
2. Which of the following health consequences causally linked to smoking?A. CancersB. Chronic diseasesC. Ectopic PregnanciesD. All of the above
3. On the basis of more than 7,000 articles in the biomedical literature relating to smoking and disease that were available at the time, the Advisory Committee concluded that cigarette smoking is associated with higher all-cause mortality rates among men. A. 70% B. 60% C. 50% D. 40%
CHAPTER 2: Fifty Years of Change 1964-2014
4. In 1964, almost of U.S. adults were cigarette smokers and smoking was ubiquitous in many public places, including restaurants, theaters, and airplane cabins. A. $1/3$ B. $\frac{1}{2}$ C. $\frac{1}{4}$ D. $\frac{1}{8}$
 5. Beginning as early as the 1920s, the rise of prompted epidemiologic research on its causes that was carried out in the United States and Europe. A. Thyroid cancer B. Brain tumor C. Breast cancer D. Lung cancer
6. Tobacco smoke contains more than chemicals, and at least 69 of these can cause cancer. A. 700 B. 7,000 C. 500 D. 300
CHAPTER THREE: Producing the Surgeon General's Report From 1964–2014: Process and Purpose
7. Which of the following year did the first official report of the federal government on smoking and health published? A.1964 B.1967 C.1968 D.1969

8. Updated information that was presented in the 1967 report, estimated that smoking-related loss of life expectancy among young men as years for "heavy" smokers (more than 2 packs/day) and years for "light" smokers (less than ½ pack/day). A.15, 10 B.20, 10 C.8, 4 D.30, 15
9. In the health consequences of smoking report found that "Maternal smoking during pregnancy exerts a retarding influence on fetal growth." A.1971 B.1972 C.1973 D.1974
10. In 1974 the tenth anniversary report reviewed evidence on association between smoking and atherosclerotic brain infarction and on synergistic effect of smoking and asbestos exposure in causing
A. Thyroid cancer B. Brain tumor C. Breast cancer D. Lung cancer
11. A Special report of advisory committee appointed by the Surgeon General to study the health consequences of smokeless tobacco concluded that the use of smokeless tobacco can cause cancer in humans and can lead toaddiction. A. Alcohol B. nicotine C. Painkillers D. Marijuana
12. Which of the following year the study was done on Tobacco Use among U.S. Racial/ Ethnic Minority Groups? A. 1998 B. 2000 C. 2001 D. 2004
13. In year 2000, the first report to offer a composite review of the various methods used to reduce and prevent tobacco use. This report evaluated which of the following approaches to reducing tobacco use? A. educational and clinical B. regulatory and economic C. comprehensive D. All of the above
14. In year, concluded that the increased likelihood of lung cancer, cardiovascular disease, and reproductive health problems among female smokers make tobacco use a serious women's health issue. A. 2000 B. 2001 C. 2004 D. 2006
15. In 2004, the study concluded that smoking causes diseases in nearly every organ of the body and causally linked to which of the following?A. leukemia and cataractsB. pneumoniaC. Cancers of the cervix, kidney, pancreas, and stomachD. linked to all of the above

16. In 2006, the report found that even brief secondhand smoke exposure can cause immediate harm and the only way to protect nonsmokers from the dangerous chemicals in secondhand smoke is to eliminate smoking A. indoors B. outdoors C. designated smoking area D. all of the above
17. In 1994, the report addressed the crucial problems oftobacco use by providing a detailed look at the time of life when most tobacco users begin, develop, and establish their smoking behavior. A. Adult males B. Seniors C. Adult females D. adolescent
18. Which of the following year updated the 1994 report on youth and described the epidemic of tobacco use among youth 12–17 years of age and young adults 18–25 years of age, including the epidemiology, causes, and health effects of this tobacco use and interventions proven to prevent it? A. 2011 B. 2012 C. 2013 D. 2014
CHAPTER FOUR: Advances in Knowledge of the Health Consequences of Smoking: From 1964-2014
19. The 50-year span beginning in 1964 and ending in 2014 covers an era of remarkable advances in the under-standing of disease etiology and opportunities for which of the following? A. The pre-venation B. Diagnosis C. Treatment of disease. D. All of the above
20. Another important advance over the last several decades has been the incorporation of genetics into research on the etiology of noncommunicable diseases, especially in the use of genetics to identify those men and women who are particularly susceptible to certain extrinsic exposures, such as cigarette smoking.
A. TRUE B. FALSE
21. According to figure 4.3 in the report, which of the following cancers have high mortality rates among men in the United States, 1930–2008a?
A. Colon and rectum B. Prostate C. Lung and bronchus D. Pancreas
22. The involuntary inhalation of tobacco smoke by nonsmokers has been referred to in the Surgeon General's reports as: A. involuntary smoking B. passive smoking C. Both A and B D. None of the above
23. The 2001 report, Women and Smoking, had considered the relationship between exposure to secondhand smoke and, and that topic was discussed in the 2006 report as well. A. breast cancer B. uterine cancer C. endometrial cancer D. thyroid cancer

24. The 2012 report provided additional coverage of the effects of smoking on the health of which of the following populations? A. children B. adolescents C. young adults D. All of the above
25. According to the Conclusion(s) from the 2006 Surgeon General's report, "The evidence is sufficient to infer a causal relationship between maternal exposure to during pregnancy and a small reduction in birth weight." A. secondhand smoke B. pollution C. radiation D. alcohol
26. Which of the following year concludes "Cigarette smoking is associated with a 70 percent increase in the age specific death rates of males, and to a lesser extent with increased death rates of females? The total number of excess deaths causally related to cigarette smoking in the U.S. population cannot be accurately estimated. In view of the continuing and mounting evidence from many sources, it is the judgment of the Committee that cigarette smoking contributes substantially to mortality from certain specific diseases and to the overall death rate."? A. 1964 B. 1967 C. 1968 D. 1978
27. Which of the following year concludes that "Cigarette smokers have substantially higher rates of death and disability than their nonsmoking counterparts in the population? This means that cigarette smokers tend to die at earlier ages and experience more days of disability than comparable nonsmokers. A. 1964 B. 1967 C. 1968 D. 1978
28. In 1978, the report concluded that Overall mortality rates for cigarette smokers are about percent higher than those for nonsmokers. A. 50 B. 60 C. 70 D. 80
29. Which of the following year concluded that overall mortality ratios are higher for those who initiated their cigarette smoking at younger ages compared to those who began smoking later? A. 1964 B. 1967 C. 1968 D. 1979
30. According to 1980 conclusion, the mortality ratio for women who smoke cigarettes is about
A. 1.2 or 1.3 B. 2.2 or 2.3 C. 3.2 or 3.3 D. 4.2 or 4.3
31. Which of the following year concluded that "Smoking is responsible for more than one of every six deaths in the United States? Smoking remains the single most important preventable cause of death in our society." A. 1980 B. 1989 C. 2001 D. 2004

32. According to 2001 report conclusion, the excess risk for death from all causes among currer smokers compared with persons who have never smoked increases with both the number of ye smoking and the number of cigarettes smoked per day." A. TRUE B. FALSE	
33. Which of the following year concluded that "There have been more than 12 million premature deaths attributable to smoking since the first published Surgeon General's report on smoking at health in 1964? Smoking remains the leading preventable cause of premature death in the Unit States."? A. 2001 B. 2004 C. 2006 D. 2007	nd
34. According to 2006 report, secondhand smoke does not cause premature death and disease children and in adults who do not smoke. A. TRUE B. FALSE	in
35. According to the report, Women who smoke cigarettes during pregnancy tend to have babie which type of following birth weight? A. higher B. lower C. normal D. smoking does not affect birth weight	es of
36. The report states that smoking is associated with accidental deaths from fires in the home. conclusive information is available on the effects of smoking on traffic accidents. A. fires B. falls C. drowning D. none of the above	. No
CHAPTER FIVE: Nicotine	
37. The 1988 Surgeon General's report, The Health Consequences of Smoking: Nicotine Addicticoncluded that cigarettes and tobacco products are addicting and that "Nicotine is the drug in tobacco that causes addiction" A. TRUE B. FALSE	on,
38. Which of the following increases the potential for nicotine addiction? A. the dose delivery rate B. the rate of absorption C. the attained concentration of nicotine D. All of the above increases the risk for nicotine addiction	
39. According to the report, more than of nicotine absorbed into the body undergoes metabolism in the liver, principally by CYP2A6, UDP-glucuronosyltransferase, and flavin-contain monooxygenase. A. 60% B. 70% C. 80% D. 90%	ing
40. Nicotine, 3-(1-methyl-2-pyrrolidinyl) pyridine, is a volatile alkaloid with a molecular weight 162.23. The absorption and elimination via renal excretion of nicotine are highly dependent on .	of
A. pH B. Atomic number C. Atomic mass number D. All of the above	
41. The lag time between puffs on a cigarette until nicotine reaches the brain is seconds	

B. 10–20 C. 5-10 D. 25-30
42. Nicotine in tobacco smoke inhaled into the lung is rapidly absorbed because of theof the alveoli and small airways and the dissolution of nicotine in the fluid coating the lung's epithelial layer, which has a physiological pH that facilitates absorption. A. large surface area B. small surface area C. size D. shape
 43. Acute toxicologic data on nicotine is limited. Such information comes from which of the following sources? A. animal studies B. studies investigating nicotine as a therapeutic agent (including NRT) C. poisonings involving nicotine D. All of the above
 44. Nicotine exerts its effects via stimulation of the nicotinic acetylcholine receptors (nAChRs), which are located in the A. Central Nervous System B. Gastrointestinal System C. Respiratory System D. Urinary System
45. Although the nicotine intoxication syndrome is not fully characterized, symptoms of mild acute toxicity might include nausea and vomiting, progressing with increased exposure to cholinergic syndrome, which includes what? A. diarrhea B. increased salivation and respiratory secretions C. bradycardia D. all of the above
46. Dependence on nicotine is characterized by which of the following? A. the persistence of a drug-taking behavior B. the emergence of withdrawal symptoms upon the abrupt cessation of nicotine administration C. Sex of the person D. Both A & B
47. Nicotine is a highlycompound with effects ranging from being a natural pesticide in tobacco leaves that causes addiction in tobacco users. A. ionic B. bioactive C. binary D. covalent
48. According to the report, there is insufficient data to conclude that nicotine causes or contributes to cancer in humans, but there is evidence showing which of the following possible cancer risks? A. oral B. esophageal C. pancreatic D. All of the above
49. The 2004 Surgeon General's report concluded that "the evidence is sufficient to infer a causal relationship between maternal smoking during pregnancy and a reduction offunction in infants" A. lung B. liver C. kidney D. heart
50. The evidence supports the hypothesis that nicotine plays a key role in mediating adverse effects of smoking on which of the following?

A. 20-25

58. In which of the following year tobacco advertising on radio and televisio A. 1970 B. 1980	on was banned in U.S?
CHAPTER SIX: CANCER	
57. The evidence is already sufficient to provide appropriately cautious mess following populations about the use of nicotine-containing products such as electronic cigarettes, and newer forms of nicotine-containing tobacco products smoking? A. pregnant women B. women of reproductive age C. adolescents D. All of the above	smokeless tobacco and
56. Evidence shows that acute administration has some modest coin adult smokers during withdrawal. A. nicotine B. alcohol C. steroids D. all of the above	ognition-enhancing effects
55. Evidence of the tobacco industry's interest in the cognitive-enhancing procomes from which of the following year that provides review of publications of tobacco and nicotine on cognitive performance? A. 1996 B. 1997 C. 1998 D. 1999	
54. Tobacco industry documents indicate that the industry funded research of perpetuating the belief that smoking improves symptoms in patie exceptions for smoking in hospitalized psychiatric patients, and funded stud nicotine analogs to treat mental illnesses. A. schizophrenic B. cancer C. diabetic D. all of the above	nts, advocated for
53. In adults, the effects of nicotine withdrawal on cognitive function both humans and animals, and the administration of nicotine during withdrawal. A. positive B. negative C. neutral D. none of the above	
52. In the fetus, nicotine targets in the brain, potentially resulting proliferation and altering synaptic activity. A. neurotransmitter receptors B. hypothalamus C. olfactory nerves D. pituitary gland	g in abnormalities in cell
51. Researchers have suggested that smoking may have cognition-enhancing A. improvements in sustained attention B. reaction time C. memory D. All of the above	ng properties, such as:
A. reproductive health, B. preterm delivery C. stillbirth D. All of the above	

C. 1990

D. 2000
59. People begin to smoke cigarettes at a relatively age, typically have difficulty stopping, and may continue to smoke for decades. A. young B. middle C. old D. all of the above
60. Cigarette smoking is the predominant cause ofcancer in the United States, and it is the country's leading cause of cancer death. A. Liver B. lung C. Prostate D. Renal
61. Since the 1950s, cigarettes have undergone changes in their design and composition (Hoffmann and Hoffmann 1997; NCI 2001). The most prominent changes have been the addition of A. size B. thickness C. filters D. all of the above
62. Which of the following country sells most Cigarettes brands that are made primarily of a blend of air-cured tobaccos? A. Australia B. Canada C. United Kingdom D. United States
63. Low-tar cigarettes reduce risk of lung cancer. A. TRUE B. FALSE
64studies are a key source of evidence for assessing whether the risk of lung cancer associated with smoking has changed over time. A. Sociological B. Psychological C. Epidemiologic D. Economical
65. Which of the following type of lung cancer has been increasing in the United States since the 1970s? A. Adenocarcinoma B. Squamous cell carcinoma C. Small cell carcinoma D. Large cell carcinoma
66. According to the article, differences in the prevalence of current and former smoking and differences in the distribution of the duration of smoking and the duration of abstinence from smoking vary markedly across birth cohorts and contribute to differences in risks of A. lung cancer B. liver cancer C. brain cancer D. esophageal cancer
67. Within birth cohorts, an increasing proportion of smokers come from which of the following population groups? A. less education group B. lower income group C. higher income group D. A and B only
68has been increasing in the United States as a fraction of all lung cancers, becoming the most common histologic type of lung cancer.

A. Adenocarcinoma B. Squamous cell carcinoma C. Small cell carcinoma D. Large cell carcinoma 69. The flue-cured cigarettes of the type preferred in Australia, Canada, and the United Kingdom have substantially higher levels of tobacco-specific nitrosamines than do U.S.-style blended cigarettes and have higher levels of B[a]P. A. TRUE B. FALSE 70. In a population, which of the following are the principal determinants of risk for lung cancer? A. The prevalence of current smoking B. The distribution of the duration of smoking among current and former smokers. C. Sex of the smoker D. Only A and B 71. According to the report, smokers who shift to cigarette brands with nominally lower machinemeasured yields with _____change their smoking pattern to restore their nicotine delivery to the level needed to sustain their addiction. A. size B. thickness C. ventilated filters D. tobacco amount 72. The Surgeon General's report on smoking cessation noted an association between smoking and HCC that persisted after controlling for potentially confounding lifestyle factors, including consumption of A. Pain killers B. Other drugs C. Alcohol D. All of the above **CHAPTER SEVEN: Respiratory Diseases** 73. Smoking has long been linked to adverse effects on the respiratory system, causing which of the following? A. malignant and nonmalignant diseases B. exacerbating chronic lung diseases C. increasing the risk for respiratory infections D. All of the above 74. Asthma is the most common chronic disease of childhood and is also very common among adults. A. TRUE B. FALSE 75. A series of observations during the past decade indicate that women seem to develop more _at an earlier age, in comparison with men who smoked the same cumulative number of cigarettes. A. gastritis

77. Individuals that inherit two severe deficiency variants—most commonly genotype PI ZZ—are at substantially increased risk for early-onset of ______.

76. The role of genetic factors in COPD and susceptibility to cigarette smoke was reviewed in the

_____ Surgeon General's report.

B. COPD C. liver disease D. skin cancer

year _ A. 2009 B. 2010 C. 2011 D. 2012

A. gastritis B. COPD C. liver disease D. skin cancer
78. It is possible that genetic determinants of COPD risk may act through genetic effects which may increase addiction or smoking intensity. Additional research will be required to determine whether this addiction is the mechanism that links these genetic loci to COPD susceptibility. A. Alcohol B. Narcotics C. Nicotine D. all of the above
79is defined pathologically as the destruction of alveolar tissue with coalescence and enlargement of airspaces. A. Emphysema B. Tuberculosis C. Pneumothorax D. Cold
80. Small airway disease and emphysema form the basis for the largely irreversible airway obstruction that characterizes A. cold B. COPD C. tuberculosis D. cough
81 are the main inflammatory cells patrol-ling the normal lung parenchyma and their numbers are greatly expanded with long-term smoking. A. Macrophages B. Leukocytes C. Mast cells D. Endothelial cells
82. Cigarette smoke initiates a/an process that later becomes more complex and independent of smoking over time. A. fermentation B. viral C. inflammatory D. growth
83. The evolution of which of the following, over the past several decades, has created a robust technology for deriving image-based biomarkers that can be used to both visualize and quantify major COPD subtypes? A. MRI B. Ultrasound C. Chest CT D. Nuclear Medicine
84. The evidence is sufficient to infer that smoking is the dominant cause ofin men and women in the United States. A. asthma B. chronic obstructive pulmonary disease C. tuberculosis D. cough
85. Asthma is one of the most common chronic respiratory diseases, affecting approximately

 $86. \ The mechanisms by which active smoking could contribute to the causation of asthma include which of the following?$

A. chronic airways inflammation, B. impaired mucociliary clearance C. impaired growth of the lungs during childhood, and increased bronchial hyperresponsiveness D. All of the above
87. The evidence is suggestive but not sufficient to infer a causal relationship between active smoking and the incidence of in adults. A. asthma B. COPD C. cough D. cold
CHAPTER TEN: Other Specific Outcomes
88. Age-related macular degeneration (AMD) is the leading cause of blindness for persons years of age and older in the United States. A. 55 B. 65 C. 75 D. 85
89. The evidence is suggestive and sufficient to infer a causal relationship between current and past smoking, especially heavy smoking, with risk of exudative (neovascular) age-related macular degeneration. A. TRUE B. FALSE
90. In 2009, more than billion was spent on dental care in the United States (National Center for Health Statistics 2012), and acute dental conditions resulted in an estimated 1.6 million days of missed school and 2.4 million days of lost work annually. A. \$102 B. \$ 300 C. \$ 500 D. None of the above
91. The report concluded that the evidence was sufficient to infer a causal relationship between smoking and A. periodontitis B. inflammation around the tooth C. gum inflammation D. all of the above
92. According to the report, multiple lines of evidence from animals and humans strongly support the hypothesis that cigarette smoking and exposure to nicotine can adversely affect insulin action and the function of pancreatic cells, both of which play fundamental roles in the pathogenesis of A. pancreatitis B. gastritis C. diabetes D. high blood pressure
93. Smoking increases and impairs which of the following mechanisms that have been strongly implicated in the development of insulin resistance and irregularities in glucose metabolism? A. Inflammatory markers B. Oxidative stress C. Endothelial function D. All of the above
94. The risk of developing diabetes ishigher for active smokers than nonsmokers. A. 10-20% B. 20-30% C. 30-40% D. 45-50%

95. According to the report, the evidence is sufficient to infer a causal relationship between active smoking and respiratory symptoms in children and adolescents that includes which of the following?

- A. coughing
- B. phlegm
- C. wheezing and dyspnea
- D. All of the above
- 96. Active smoking causes which of the following injurious biologic processes that result in airway and alveolar injury? This injury, if sustained, ultimately leads to the development of chronic obstructive pulmonary disease.
- A. Oxidant stress
- B. Inflammation
- C. A protease-antiprotease imbalance
- D. All of the above
- 97. Cigarette smoke is a damaging and proinflammatory complex mixture that can also directly suppress innate and adaptive immune processes making it a highly unusual insult in the context of immunity.
- A. TRUE
- B. FALSE
- 98. Cigarette smoke disrupts the tight bonds at the adherent junctions between epithelial cells, compromising the integrity of the physical epithelial barrier and leading to _____ alveolar epithelial permeability.
- A. decreased
- B. increased
- C. obstructed
- D. none of the above
- 99. Smoking compromises airway epithelial host defense by altering the lining fluid, usually by doing which of the following between airway epithelial cells?
- A. Chemical or oxidative inactivation
- B. Paralyzing ciliary beating
- C. Damaging the tight junctions
- D. All of the above
- 100. Cigarette smoking increases the number of macrophages in the alveolar space of smokers and patients with COPD and activates ______to produce proinflammatory mediators, reactive oxygen species, and proteolytic enzymes.
- A. lymphocytes
- B. platelets
- C. Thrombocytes
- D. macrophages
- 101. ____are centrally important immune initiators, regulators, and effectors.
- A. T cells
- B. Mast cells
- C. Dendritic Cells
- D. NK and NKT Cells
- 102. Which of the following conclusions can be drawn from the current knowledge about the impact of cigarette smoke on the immune system?
- A. Smoking affects components of the innate and adaptive immune system
- B. Cigarette smoke activates certain facets of the immune system
- C. Cigarette smoke suppresses certain facets of the immune system
- D. All of the above
- 103. Cigarette smoke impacts several key antiviral host defense mechanisms that likely contribute to______ risk of respiratory viral infection.
- A. increased
- B. decreased
- C. zero
- D. lower
- 104. Consistent with the increased risk of bacterial infections, cigarette smoke can cause which of the following?
- A. Impairs the ability of macrophages to phagocytose

B. Decreases antibacterial defense proteins C. Impairs the ability of phagocytic cell to kill cellular pathogens D. All of the above
105. Which of the following bacterial agents compromise bacterial host defense that is associated with an increased risk of infection and with COPD exacerbation? A. S. pneumonia and NTHi B. Moraxella catarrhalis C. P. aeruginosa and M. tuberculosis D. All of the above
106. The ability ofto mount an inflammatory attack is counter regulated by regulatory T cells whose activity is diminished by chronic smoking. A. lymphocytes B. platelets C. Thrombocytes D. macrophages
107. Smoking cigarettes is a risk factor for developing which of the following autoimmune diseases?A. Rheumatoid arthritis and SLEB. Multiple sclerosis and Graves' hyperthyroidismC. Primary biliary cirrhosisD. All of the above
108. Smoking is not associated with the progression of HIV disease, as measured by CD4+ cell counts and viral load. However, smoking increases the risk of developing which of the following in people who have HIV? A. Oral candidiasis B. Bacterial pneumonia C. Skin cancer D. A and B only
109. The evidence is sufficient to infer that cigarette smoke compromises immune homeostasis and that altered immunity is associated with an/a risk for several disorders with an underlying immune diathesis. A. increased B. decreased C. zero D. lower
110. Cigarette smoking has been cited as the most conclusively established risk factor for seropositive RA (rheumatoid arthritis). A. psychological B. sociological C. environmental D. None of the above
 111 is the hallmark of RA, but its systemic nature is manifested by the involvement of many other organs including skin, eyes, lungs, blood vessels, and bone marrow. A. Deforming arthritis B. Bursitis C. Tendonitis D. All of the above
112. The evidence is sufficient to infer the presence or absence of a causal relationship between cigarette smoking and systemic lupus erythematosus (SLE), the severity of SLE, or the response to therapy for SLE. A. TRUE B. FALSE
113. The incidence of Crohn's disease in North America ranges betweencases per 100,000 compared with 4–10 in Northern Europe, 1–5 in Southern Europe, and 0–4 in Africa, Asia, and Latin America. A. 3-10 B. 5-10

- C. 4-16
- D. 6-20
- 114. The evidence is suggestive but not sufficient to infer a causal relationship between cigarette smoking and Crohn's disease.
- A. TRUE
- B. FALSE

CHAPTER 12: Smoking-Attributable Morbidity, Mortality, and Economic Costs

115. The average annual SAM for the United States for 2010–2014 (Table 12.15) is at least premature deaths caused by cigarette smoking and exposure to secondhand smoke. A. 350,000 B. 480,000 C. 550,000 D. 600,000
116. The future probability that a young adult smoker would die prematurely of a smoking-related cause was estimated to be A. 20% B. 25% C. 32% D. 40%
117. Evidence indicates that CHD is the underlying cause for approximatelyof CHF cases and that smoking is a major contributing factor in the atherosclerotic disease process that leads to CHD. A. 65% B. 70% C. 75% D. 80%
118. Internationally, it has been estimated that approximately 15% of acute myocardial infarction events could be caused by exposure to secondhand smoke. A. TRUE B. FALSE
119. Approximately million persons in the United States had an estimated 12.7 million smoking-attributable serious medical conditions in 2000. A. 5.6 B. 6.6 C. 7.6 D. 8.6
120. Although the prevalence of smoking continues to decline in the United States, smoking-related health care expenditures still account for an estimated % of the total health care expenditures in the United States. A. 5-14 B. 6-15 C. 7-16 D. 8-17