QUANTITATIVE BIDS by Maritha Pottenger

When your partner opens or rebids 1NT or 2NT (or, when partner opens 2C and rebids 2NT or 3NT), you know how many high card points partner has within a very narrow range. Thus, you can invite partner to bid a small slam in NT or a grand slam in NT if s/he is at the top of that range with a quantitative bid. Quantitative bids are used when you have a balanced hand with no 4-card major and no 5-card minor. (If you have a 4-card major or a 5-card minor, it is worth exploring for a fit. With a fit, you can make slam in a suit with fewer high cards than you need for slam in NT.) Quantitative bids are based on simple arithmetic—if you and your partner have a combined total of 33 HCP, you probably want to bid 6NT. If you and your partner have a combined total of 37 HCP, you probably want to bid 7NT.

A quantitative bid of 4NT asks partner to bid 6NT if s/he has a maximum hand and to pass with a minimum hand. A quantitative bid of 5NT asks partner to bid 6NT with a minimum and 7NT with a maximum. NOTE: Kantar and many others use 5NT as a variation of Minor Suit Stayman (forcing to 6NT or 7 of a minor if a fit is found) believing that those hands come up more often than the hands that can invite 7NT. If you open a minor or major and partner bids at the one level and you rebid 1NT, you are showing 12-14 HCP, so 4NT by partner asks you to bid 6NT with 14 HCP. (Partner has 19 HCP.)

When your partner opens 1NT (promising 15-17 HCP), you can bid an immediate 4NT with 16-17 HCP (if you have a balanced hand with no 4-card major or 5-card minor). If you have only 15 HCP, you are unlikely to make slam without a fit. If you have 18-19 HCP, you can bid 6NT directly (as you and your partner are guaranteed to have a combined total of 33-36 HCP). If you have 20-21 HCP, you can bid 5NT (inviting 7NT with a maximum, otherwise 6NT)**. If you have 22 HCP, bid 7NT directly.

When your partner opens 2NT (promising 20-21 HCP), you can bid 4NT with 12 HCP. You can bid 6NT with 13-15 HCP. You can bid 5NT with 16 HCP** and you can bid 7NT with 17 or more HCP.

When your partner opens 2C and rebids 2NT (promising 22-24 HCP), you can bid 4NT with 9 or 10 HCP. You can bid 6NT with 11-12 HCP. You can bid 5NT with 13-14 HCP** and you can bid 7NT with 15 or more HCP.

When your **partner opens 2C and rebids 3NT** (promising 25-27 HCP) or if your partner's opening 3NT promises 25-27 HCP, you can **bid 4NT with 6-7 HCP**. Bid **6NT with 8-9 HCP**. Bid **5NT with 10-11 HCP**** and bid **7NT with 12 or more HCP**.

It is important to **discuss with your partners whether quantitative bids still apply after your partnership has used Stayman or Jacoby** (in which case you must use Gerber—4 clubs—or Super Gerber—5 clubs—to ask for Aces) or whether you wish to use 4NT as Roman Key Card Blackwood rather than a quantitative bid. For example, 1NT-P-2C-P-2H-P-4NT: is that a quantitative bid or is that Roman Key Card Blackwood with hearts as the agreed trump suit? [The most common answer is quantitative.]

If your partner makes a quantitative bid and you have the middle of your range (16 HCP when opening 1NT), evaluate your hand. If you have a 5-card suit, that is probably worth an extra point. If you have good texture (lots of 8's, 9's, and 10's), then upgrade your hand. If you have good controls (Aces and Kings), upgrade your hand. If you have the "death distribution" of 4-3-3-3, decline the invitation. If you like your hand, **Kantar** recommends the following:

A bid of a minor suit at the 5 level promises a 4-card suit (bidding up the line) looking for a fit and partner can bid a slam in that suit or sign off in NT at the appropriate level. (Often hands will generate one extra trick in a 4-4 trump fit as opposed to NT. Thus, 6 of a minor might make when only 5NT makes, or the minor might make 13 tricks while NT makes only 12.) I call this Kantar Adjunct.

**If you use 5NT as Minor Suit Stayman, bid 5NT over 1NT with 18 HCP (will play either in a minor or 6NT). Bid 5NT over 2NT with 13 HCP. Bid 5NT over jump shift to 2NT with 15 HCP, etc.