My Quit Plan

1. Try to set your quit date within the next 10 to 15 days. If you smoke mostly when relaxing or socializing, pick a weekday. If you smoke mostly at work, pick a day on a weekend or during a vacation. Once set, allow nothing to change it. Celebrate the date you became a nonsmoker every year!
My Quit Date: __________________________________________________________________________

2. Identify your personal reasons for quitting. For some, those reasons are to feel better, to live longer, to set a good example for their children, to cut their risk of heart attack or to save money. Of all the reasons to quit, yours matter most.
My Reasons for Quitting: __________________________________________________________________________

3. Think of ways to change your routine to make smoking difficult, impossible or unnecessary. For example, ride your bike, go to the movies, walk the dog, try a new recipe, visit the dentist for a cleaning, get a manicure, start a garden, write a love letter . . .
My New Routines and Behaviors: __________________________________________________________________________

4. What sets off cravings? List as many as you can think of, such as drinking alcohol or coffee, being around other smokers or working under pressure. Plan ways to avoid these triggers and quell urges.
My Strategies for Overcoming Cravings: __________________________________________________________________________

5. Where can you find support and encouragement? Think of family members, friends and co-workers who are willing to help you if you need them to. Discuss your plans to quit with your doctor and other healthcare providers. Call 1-877-YES-QUIT for support and referrals to services in your community.
My Support Network: __________________________________________________________________________

6. Talk to your doctor about the right medications to ease your symptoms of withdrawal. For example, if you smoke steadily throughout the day, the nicotine patch might be right for you. If you smoke in response to cravings or stress, the gum or spray might suit you best. Your doctor can help find a combination that works for you.
My Medication Plan: __________________________________________________________________________

Committed to and Signed by: