A CLINICAL TOOLKIT FOR TREATING TOBACCO DEPENDENCE
WHY DO WE NEED TO REACH PROVIDERS?

- Tobacco use causes > 24,000 deaths/year in Texas
- Prevalence among Texas adults is 18%
  - Healthy People 2010 goal: <12%
- 70% smokers want to quit smoking completely – clinicians are in a unique position to help
  - 46% try to quit each year
  - >70% smokers visit a health care setting each year

MMWR 2001: 50(40); 869-873
A Clinical Practice Guideline for Treating Tobacco Use and Dependence.
JAMA 2000; 283: 3244-54
TOOLKIT CONTENTS

- Introductory Guide
- Pad of sticky notes
- 5A’s/5R’s Quick Guide
- Pharmacotherapy Quick Guide
- Resources & further reading for providers
- Tobacco user ID stickers for patient charts
- Staged patient brochures
- Quitline cards
TOOLKIT CONTENTS (continued)

- Treating Tobacco Use & Dependence Brochure
- Table tent display for provider’s office
- Brochure & Quitline card holders
- Patient resources bookmarks
- Fax referral forms
- Encounter checklist
- Brief information guide for providers who do not want entire binder
INTRODUCTORY GUIDE

- Front pocket
- Overview of binder contents
- Reimbursement info
- How to use the tools
- Info on Quitline counseling protocol
- Motivational strategies to help patients quit
BROCHURES & QUITLINE CARDS

- Clear zip pouch
- Five brochures address readiness to quit & special concerns
- English & Spanish
- Quitline cards refer to toll-free # in English & Spanish
5 A’s & R’s CARD

- Binder pocket, front
- Tools to identify and assess tobacco use effectively
- 5 A’s Quick Guide: Treat tobacco users willing to quit
- 5 R’s Quick Guide: Treat tobacco users unwilling to quit

**5A’s Quick Guide:**

- **Ask** about tobacco use at every visit
  - "Do you currently use tobacco?"
  - Document tobacco-use status using these tools: Visit Sign, Breath Test
- **Advise** all tobacco users to quit
  - "As your healthcare provider, I strongly advise you to quit."
  - "The single most important thing you can do to protect your health is to stop smoking and I can help you."
- **Assess** patient’s willingness to quit
  - "Are you ready to make a quit attempt in the next 30 days?"
  - If "yes," proceed to the next step
- **Assist** patient in quitting
  - Set quit date and form a quit plan
  - Use the Referral Form to initiate Quitline counseling process
  - Emphasize the support of family, friends, co-workers
  - Anticipate challenges and triggers
  - Give patient his/her Quick Tips for Staying Smoke Free
  - Review lessons from past quit attempts
  - Emphasize the importance of pharmacotherapy where appropriate
  - Consent for brief Pharmacotherapy quick Guide, Treating Tobacco Use and Dependence
- **Arrange** follow-up
  - Schedule phone or office visit, preferably within the first weeks after patient’s quit date.
  - Congratulate success or
  - Review circumstances that caused lapses
  - Ask for reassessment to total abstinence
  - Consider referral to more intensive treatment
- **Assess** pharmacotherapy use, and advise or combine as necessary

**5R’s Quick Guide:**

- **R**eady to quit
- **R**esource list
- **R**eward for progress
- **R** eview of medications
- **R** etain contact for follow-up

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[Image of a guide with additional details]
PHARMACOTHERAPY GUIDE

- Binder pocket, front
- List of medication options & dosage
- Information on special considerations
- Information about effectiveness of medication

5A's QUICK GUIDE
Helping tobacco users willing to quit

- ASK about tobacco use at every visit
  - "Do you currently use tobacco?"
  - Document tobacco use status using these tools: Visit, Sign, Offer

- ADVISE all tobacco users to quit
  - "As your healthcare provider, I strongly urge you to quit."
  - "The single most important thing you can do to protect your health is to stop smoking, and I can help you."

- ASSESS patient's willingness to quit
  - "Are you ready to make a quit attempt in the next 30 days?"
  - If "yes," proceed to the next step: ASSIST
  - If "no," ask this question in follow-up: "I urge you to quit. Are you ready to quit now?"

- ASSIST patient in quitting
  - Set a quit date and form a quit plan. Give patient this tool: Yes, I'm Ready to Quit
  - Use Five ReFrame Form to initiate Quitline counseling process
  - Enlist support of family, friends, co-workers
  - Anticipate challenges and triggers
  - Give patient Nicotine: Quick Spot foraying Smoke Free
  - Review lessons from past quit attempts
  - Discuss the use of pharmacotherapy unless contraindicated

- ARRANGE follow-up
  - Schedule phone or office visit, preferably within the first week after patient's quit date.
    - Congratulate success
    - Review circumstances that caused lapses
    - Ask for commitment to total abstinence
    - Consider referral to more intense treatment
  - Assess pharmacotherapy use, and review or combine as necessary

Page generated by: [Tool Name]
- Binder pocket, front
- Information on CME programs; web site list
- Stickers for patient charts to readily identify current & former tobacco users
U.S. PUBLIC HEALTH SERVICE BOOKLET

- Binder pocket, back
- Recommendations from the U.S. Public Health Service
- Designed to assist providers in providing effective treatment for tobacco users
- Summarizes appropriate treatments for all patients
ADDITIONAL MATERIAL

- Binder pocket, back
- Fold-out counter display to attract patients’ attention
- Fold-out brochure holder & Quitline card display
- “Treating Tobacco Use and Dependence” booklet
- Bookmarks with patient resources
**ENCOUNTER CHECKLIST**

- In binder
- Guides providers through counseling process
- Documents patient’s treatment & progress

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**ENCOUNTER CHECKLIST for Tobacco Users**

<table>
<thead>
<tr>
<th>Name:</th>
<th>[Name]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Record Number:</td>
<td>[Record Number]</td>
</tr>
<tr>
<td>DOB:</td>
<td>[DOB]</td>
</tr>
<tr>
<td>Encounter Date:</td>
<td>[Date]</td>
</tr>
<tr>
<td>Visit #</td>
<td>1</td>
</tr>
</tbody>
</table>

**ADVICE session to stop:** “As your healthcare provider, I strongly advise you to quit smoking. It’s the single most important thing you can do to protect your health and (do help you).”

<table>
<thead>
<tr>
<th>Are they ready to quit?</th>
<th>[Ready to quit]</th>
<th>[Ready to quit]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Likely to quit</td>
<td>[Likely to quit]</td>
<td>[Likely to quit]</td>
</tr>
<tr>
<td>Likely not to quit</td>
<td>[Likely not to quit]</td>
<td>[Likely not to quit]</td>
</tr>
</tbody>
</table>

**Relevant Measures:**

- [ ] Brief counseling using FBT
- [ ] [ ] [ ] [ ] [ ]

**Risk:**

- [ ] [ ] [ ] [ ]

**Screening:**

- [ ] [ ] [ ]

**Quitline:**

- [ ] [ ] [ ]

**AGHT smoker to quit:**

<table>
<thead>
<tr>
<th>Smoking History:</th>
<th>[Number of days]</th>
<th>[Number of days]</th>
<th>[Number of years]</th>
<th>[Number of Cigarettes]</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Number of Smokers]</td>
<td>[Number of Nonsmokers]</td>
<td>[Number of Children]</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SYMPTOMS:**

- [ ] [ ] [ ]

**Abnormal Systems:**

- [ ] [ ] [ ]

**Withdrawal Symptoms:**

- [ ] [ ] [ ]

**Medications:**

- [ ] [ ] [ ]

**Enrollment:**

- [ ] [ ] [ ]

**Referrals to local cessation programs:**

- [ ] [ ]

[URL: www.tobacco.org]

[URL: www.texas.gov]

[URL: www.texas.gov]
FAX REFERRAL FORMS

- Back pocket
- Physicians can fax to Quitline for patient to receive limited supply of free NRT
- Patient also MUST pass a medical screening given over the phone by the Quitline to receive NRT
INFORMATION GUIDE

- Separate from toolkit
- Tri-fold brochure
- Explains toolkit contents and benefits of using it
- Can leave with contacts who are not sure if they want the entire toolkit

A CLINICAL TOOLKIT FOR TREATING TOBACCO DEPENDENCE
For teens, pregnant women and adult populations

Information Guide

“As clinicians, you are in a frontline position to help your patients by asking two key questions: ‘Do you smoke?’ and ‘Do you want to quit?’”

—David Satcher, M.D.
M.D., former U.S. Surgeon General

Texas Department of State Health Services
CONSULTATION STRATEGIES: CLINICAL SETTINGS

- Consult with different types of health professionals: doctors, dentists, nurses, instructors, public health practitioners, etc.

- Talk to the “gatekeeper” in the office - the person who has access to the providers, their schedules & mail.

- It’s better if you can get face time with the provider, but support staff can give you access and help make your case.

- Educate staff in believing that asking the smoking status is as important as taking blood pressure.

- Smoking status should be the 5th vital sign taken in the office.
CONSULTATION STRATEGIES:
THINK OUTSIDE THE BOX

- Educate other providers, students & support staff
- School nurses, occupational nurses, student nurses
- Dental hygiene students, dental assistants
- Medical assistants, office receptionists, community health workers
- Physician assistants
- Pharmacy students, psychology graduate students
- Mental health providers, substance abuse treatment facilities
- Military medical staff
CONSULTATION STRATEGIES: PROFESSIONAL ORGANIZATIONS

- Look for other opportunities to reach clinicians through presentations to professional organizations, CEU programs

- Nurse Oncology Education Program (NOEP)
  1-800-515-6770

- Physician Oncology Education Program (POEP)
  512/370-1673

- Dental Oncology Education Program (DOEP)
  512/467-2803
CONSULTATION STRATEGIES: WORKSITES

- Consult with HR representative or worksite wellness department manager
- Educate the HR representative or wellness department on the advantages of helping workers quit smoking to reduce health risk and improve productivity
- Train HR and wellness department on clinical toolkit to have resources available to employees who are willing to make a quit attempt
- Assist worksites that are planning health fairs by training on clinical toolkit and providing educational materials to distribute to employees
- Encourage worksites to purchase tobacco education materials like “Mr. Gross Mouth,” lungs with cancer, etc. to provide visual impact
QUESTIONS?

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