

PROVIDENCE THORACIC SURGERY Smoking Cessation Counseling Worksheet

{YES NO CAPITALIZED:23745} Ask (** minute) We discussed @NAME@ current tobacco use, @HE@ is currently smoking

{YES NO CAPITALIZED:23745} Advise (** minutes) We reviewed the impact of smoking on lung disease and on increasing the risk of future cancer and the impact on @HIS@ upcoming surgery and significantly increasing the risk of post-operative respiratory complications

{YES NO CAPITALIZED:23745} Assess (** minutes) @HE(CAPS)@ {IS/ IS NOT:21585} ready to attempt to quit at this time. **

o Offer motivational intervention to those not yet ready to quit using the 5 "R's" - Relevance, Risks, Rewards, Roadblocks, and Repetition.

{YES NO CAPITALIZED:23745} Assist (** minutes) We reviewed the following problem-solving methods and skills for cessation.

- o The Tobacco Cessation Program
- o Social support in the smoker's environment
- o Successful quitting techniques
- o Setting a quit date and help patient with the development of a quit plan
- o Provide self-help smoking cessation materials
- o Offer referral to more intensified counseling as appropriate, such as telephone counseling
- o Prescribe pharmacologic therapy as appropriate. (Nicotine replacement therapy and/or bupropion, if there are no contraindications)

{YES NO CAPITALIZED:23745} Arrange (** minute) Schedule follow-up either by office visit or telephone to periodically assess smoking status.

- o Prevent relapse by congratulating successes and reinforcing reasons for quitting.
- o Assess any difficulties with pharmacologic therapy.

I spent ** minutes in smoking/tobacco counseling {Blank single:19197::"99406: 3-10 minutes", "99407: >10 minutes"}

Electronically signed by: @ME@ @TD@ @NOW@
@LOCATION@