I. PURPOSE:
This guideline will address the assessment and treatment of tobacco abuse and nicotine addiction.

II. POPULATION:
This guideline applies to adults aged 18 years or older, including pregnant women. This guideline may apply to any form of nicotine/tobacco related substance/use.

III. GUIDELINE:
A. Tobacco dependence is a chronic disease. It may require repeated intervention and continual assessment to increase long-term abstinence.

B. Team Approach: Clinicians and other office/medical staff consistently identify and document tobacco use status and treat the tobacco user through the health care setting. Utilization of the 5 A’s is an example of an effective intervention for office visits and team approach.

C. The 5A’s of Identification and Assessment:
   1. Ask: Ask about tobacco use and status (current or past) for every patient.
   2. Advise: advise all tobacco users to quit. Use strong, clear and a personalized manner to urge every tobacco user to quit.
   3. Assess: assess willingness to quit. If the patient is willing to make an attempt to quit, provide/offer assistance.
   4. Assist: For those willing to make an attempt to quit, assist them by setting goals for a quit date. Give advice on successful quitting, make referrals to counseling or additional treatment to help them quit, provide brief intervention that will motivate a future quite attempt, etc.
   5. Arrange: Arrange for follow up. Colorado Quit Line is available to Members. Patients should be contacted or congratulated on their abstinence. Patients who are unable to quit or who relapse should be reassessed. For those who relapse, encourage them to set a new quit date.

D. Tobacco dependence treatments are effective across a broad range of populations. Clinicians should encourage every patient willing to make a quit attempt to use all resources available:
   1. Denver Health Medical Plan and Denver Health Medicaid members are eligible for smoking and tobacco chewing cessation counseling and have access to medications to help them quit. All members can receive smoking cessation counseling from Colorado Quit Line (1-800-QUIT-NOW), and from ACS Clinic based Certified Addictions Counselors.
   2. Medications are available to assist with cessation and abstinence but may differ depending on plan coverage. Please refer to member services for further information.

E. Pharmacological/Behavioral Interventions are effective. DHMP provides a variety of both behavioral and pharmacological resources (by service line as follows):
   1. Medicaid/CHP+

NOTE:
This guideline is designed to assist providers by providing an analytical framework for the evaluation and treatment of patients, and is not intended either to replace a clinician's judgment or to establish a protocol for all patients with a particular condition.
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IV.  Additional Resources:
A.  National QuitLine Network: 1800-QUIT-NOW
B.  Affordable Care Act Tobacco Cessation Guidance Toolkit: American Lung Association
C.  Freedom From Smoking: American Lung Association’s smoking cessation program
   http://www.lung.org/stop-smoking/join-freedom-from-smoking/
D.  Federal Online Program: USDHHS (NIH, CDC, NCI) sponsored online cessation program
NOTE:
This guideline is designed to assist providers by providing an analytical framework for the evaluation and treatment of patients, and is not intended either to replace a clinician's judgment or to establish a protocol for all patients with a particular condition.

V. REFERENCES:
https://www.aafp.org/pubs/afp/issues/2021/0615/od1.html


CDC Smoking & Tobacco Usage :https://www.cdc.gov/tobacco/quit_smoking/cessation/index.htm


Nicotine Replacement Therapy August 21, 2021

Signature: Christine Seals Messersmith MD
Christine Seals Messersmith MD (Nov 10, 2022 10:58 MST)

Email: christine.seals@dhha.org

https://www.smokefree.gov/

E. Fax-to-Quit Referral Form – Colorado QuitLine (ATTACHED)
### "Smoking Cessation 2022-needs signature" History

- **Document created by Jacqueline De La Torre (Jacqueline.DeLaTorre@dhha.org)**
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