

# Helping Smokers Quit: Available Resources

**Corinne G. Husten, MD, MPH**  
Office on Smoking and Health

**DoD Tobacco Planning Meeting**  
**January 26-27, 2004**



**DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
**CENTERS FOR DISEASE CONTROL AND PREVENTION**  
**SAFER • HEALTHIER • PEOPLE™**





*Tobacco is a Readiness Issue*

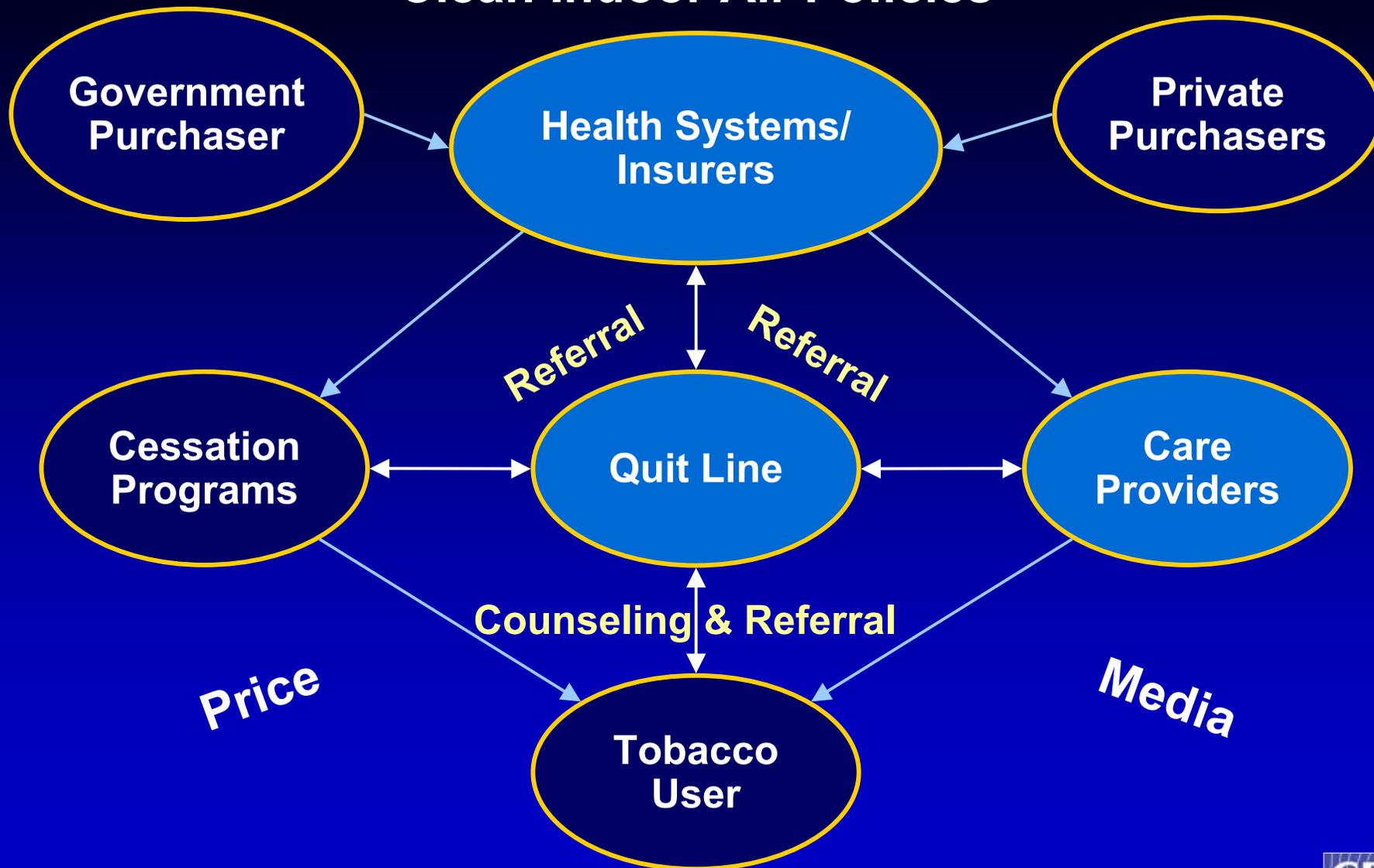


*United States Army Dental Command*

# Vision of a Comprehensive Approach

- ✓ All tobacco users have barrier-free access to a selection of effective treatments
- ✓ Basis for treatments guided by scientific evidence
- ✓ Services readily available at low or no out-of-pocket costs
- ✓ Details about services and how to gain access are promoted and easy to do
- ✓ Social norm change to help tobacco users quit

# Clean Indoor Air Policies



Source: Oregon Department of Human Services-Tobacco Prevention and Education Program



# Resources Available

- ✓ Guidelines
- ✓ Strategic planning documents
- ✓ Toolkits
- ✓ Provider education materials
- ✓ Patient education materials

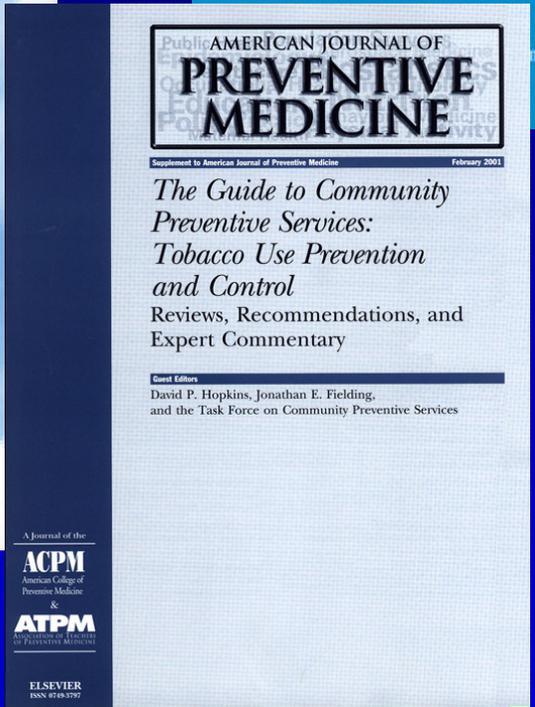
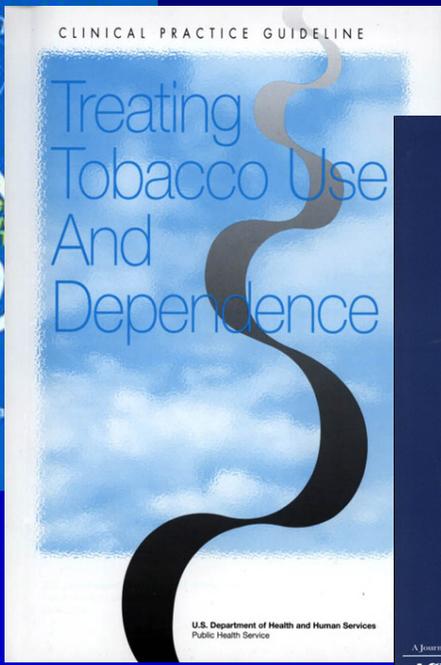
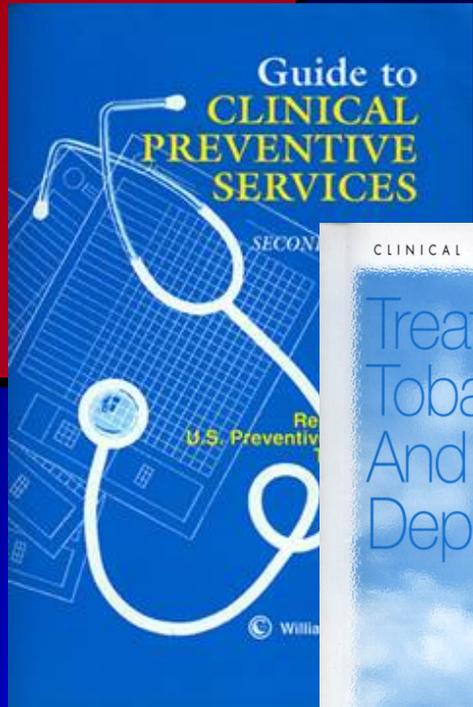
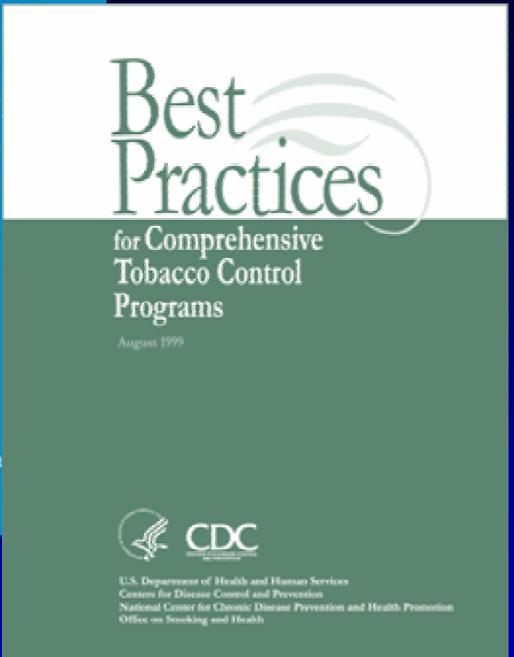
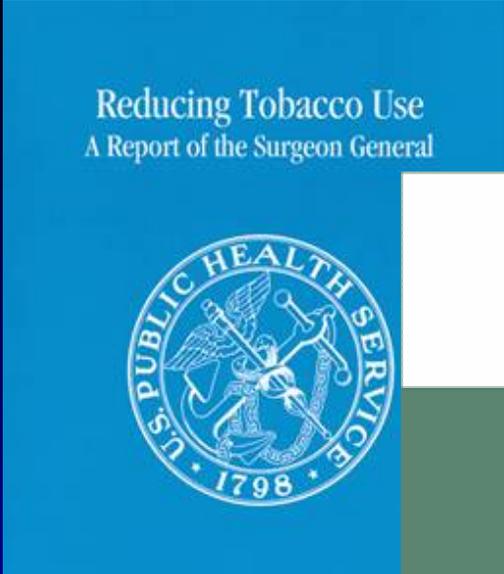
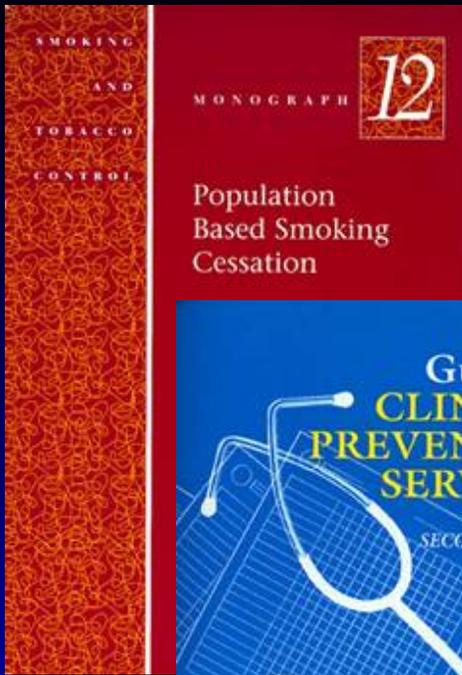
# Caveat

- ✓ **Not all-inclusive compilation**
  - ✓ **Wealth of materials from state programs**
  - ✓ **Civilian resources**

# Guidelines

# Three Levels of Cessation Interventions

- ✓ Individuals
- ✓ Health Care Systems
- ✓ Populations



**Tobacco Use Treatment  
Interventions for Individuals:  
What does the Evidence Tell Us?**

CLINICAL PRACTICE GUIDELINE

# Treating Tobacco Use And Dependence

U.S. Department of Health and Human Services  
Public Health Service

[www.surgeongeneral.gov/tobacco/treating\\_tobacco\\_use.pdf](http://www.surgeongeneral.gov/tobacco/treating_tobacco_use.pdf)



**DEPARTMENT OF DEFENSE  
VETERANS ADMINISTRATION**



**Tobacco Use Cessation**

**Clinical Practice Guideline Development Meeting**

**January 2003**

# **What do Model Programs Tell Us about the Potential for Clinical Interventions to Increase Cessation?**

# **Effectiveness of Health Care System Changes: What does the Evidence Tell Us?**

# U.S. Army Dental Command Annual Exam Stamp



## PERIODIC ORAL EVALUATION

BP \_\_\_\_\_ / \_\_\_\_\_

BWX \_\_\_\_\_ PAX \_\_\_\_\_ PANX \_\_\_\_\_

SOFT TISSUE WNL : Yes / No

CARIES RISK: Low Mod High

TOBACCO: No Smoke Chew Both

PSR

|  |  |  |
|--|--|--|
|  |  |  |
|  |  |  |

Public Health  
Education  
Policy  
Practice  
Prevention  
Quality  
Improvement  
Research  
Community  
Medicine  
Equity

AMERICAN JOURNAL OF  
**PREVENTIVE  
MEDICINE**

Supplement to American Journal of Preventive Medicine

February 2001

*The Guide to Community  
Preventive Services:  
Tobacco Use Prevention  
and Control*

Reviews, Recommendations, and  
Expert Commentary

**Guest Editors**

David P. Hopkins, Jonathan E. Fielding,  
and the Task Force on Community Preventive Services

A Journal of the

**ACPM**  
American College of  
Preventive Medicine  
&

**ATPM**  
ASSOCIATION OF TEACHERS  
OF PREVENTIVE MEDICINE

ELSEVIER  
ISSN 0749-3797

# Cessation Interventions In Health Care Systems

| <b>Goal</b>               | <b>Recommended Interventions</b>   |
|---------------------------|--|
| <b>Increase cessation</b> | <b>Provider reminder systems*</b><br><b>Provider reminders systems combined with provider education</b><br><b>Telephone Quit Lines*</b><br><b>Reduce patient costs for treatment (NRT)</b> |
| <b>Goal</b>               | <b>Interventions with Insufficient Evidence</b>  |
| <b>Increase cessation</b> | <b>Provider education programs (alone)</b><br><b>Provider feedback systems</b>   |

\* When combined with other interventions



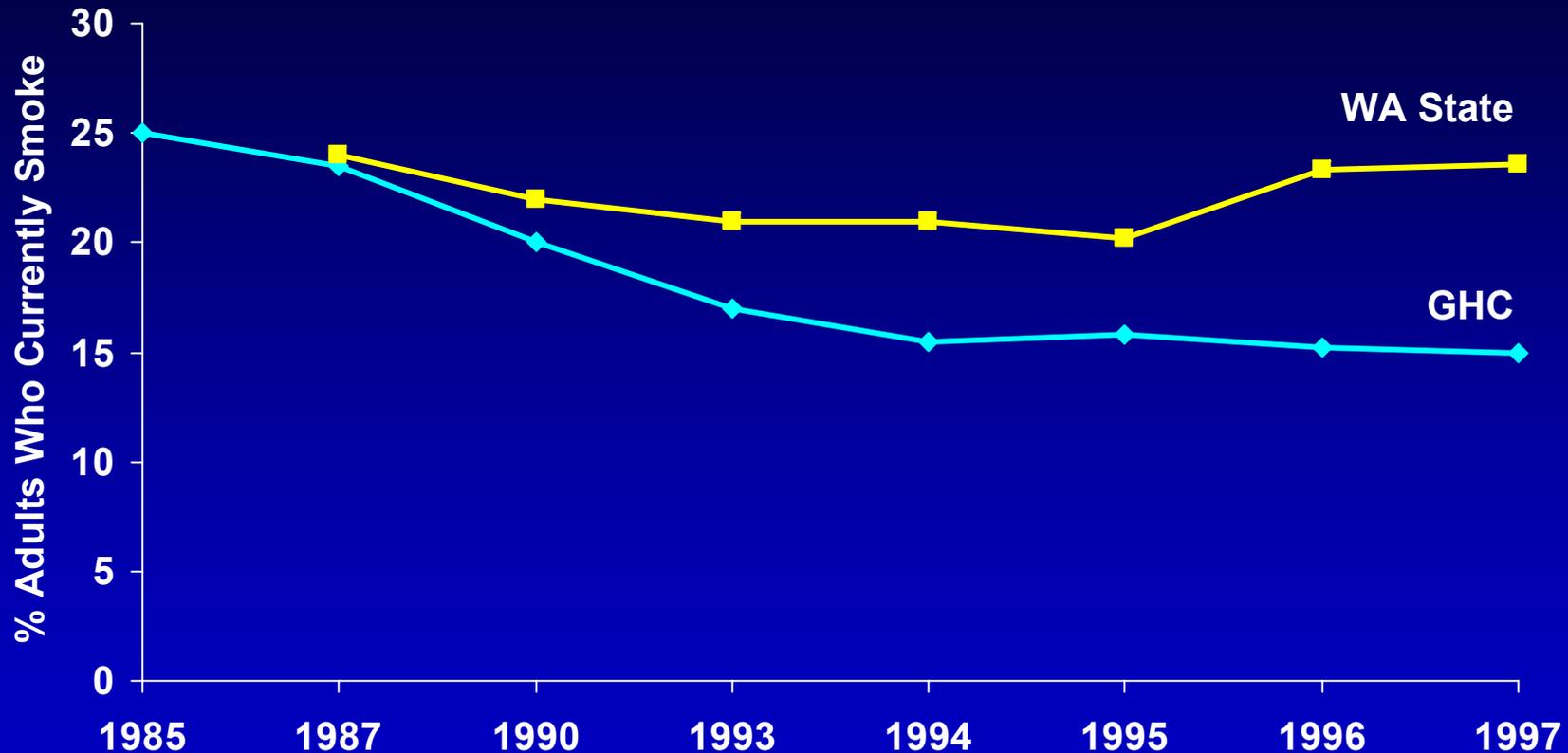
**What do Model Programs Tell Us about  
the Potential for System Changes  
to Increase Cessation?**

# **Model Program: Group Health Cooperative of Puget Sound**

- ✓ **Primary care screening and advice system**
- ✓ **Behavioral support program: group program or telephone counseling**
- ✓ **Behavioral support program is free**
- ✓ **NRT is a covered benefit (usual pharmacy co-pay); behavioral support required**
- ✓ **Extensive effort to recruit smokers into treatment**
- ✓ **10% of smokers use intensive services each year**
- ✓ **30% cessation rate**

# Trends in Smoking Prevalence 1985-1997

## Washington State & Group Health Cooperative



Source: McAfee et al. HMO Practice. 1995, 9(3):138-143; McAfee unpublished data

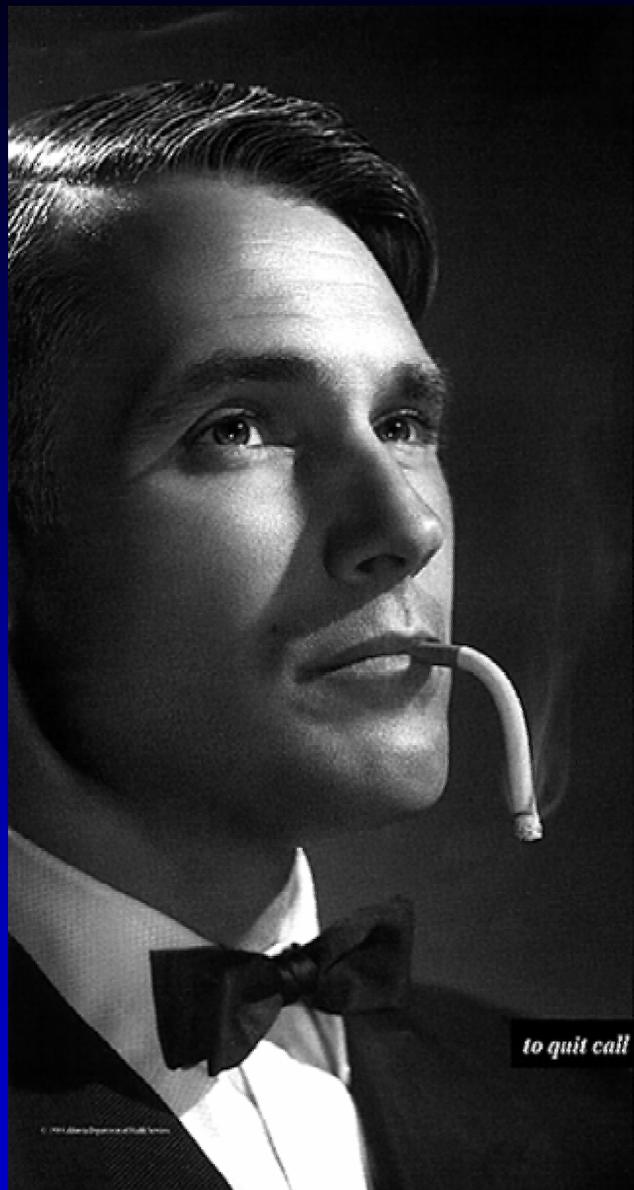


# Cost Issues

## Group Health of Puget Sound Model

- ✓ Cost \$0.70 per smoker in the panel per month
- ✓ Cost savings in reduced health care use more than pays for cessation program within 3-4 years

**Effective Population-based Approaches  
to Increasing Cessation:  
What Does the Evidence Tell Us?**



Recent medical  
studies indicate  
cigarettes are one of  
the leading causes  
of impotence.

**Cigarettes.**  
*Still think they're sexy?*

to quit call **1-800-7-NO-BUTTS**

Printed by the California Department of Health Services.  
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# The Need for Population-based Approaches

- ✓ Non-clinical population approaches have a broad reach
- ✓ Some tobacco users either can not or will not utilize clinical services
- ✓ The health care system is not treating all smokers seen

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**Impact = Efficacy x Reach**

Public Health  
Education  
Policy  
Practice  
Prevention  
Community  
Medicine  
Quality  
Improvement  
Equity  
Justice

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*The Guide to Community  
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# Cessation Interventions In Communities

| <b>Goal</b>               | <b>Recommended Interventions</b>   |
|---------------------------|--|
| <b>Increase cessation</b> | <b>Increase in price of tobacco products (tax)</b><br><b>Mass media campaigns*</b><br><b>Telephone quit lines*</b> |

| <b>Goal</b>               | <b>Interventions with Insufficient Evidence</b>                                |
|---------------------------|--|
| <b>Increase cessation</b> | <b>Smoking cessation contests</b><br><b>Broadcast smoking cessation series</b> |

\* When combined with other interventions



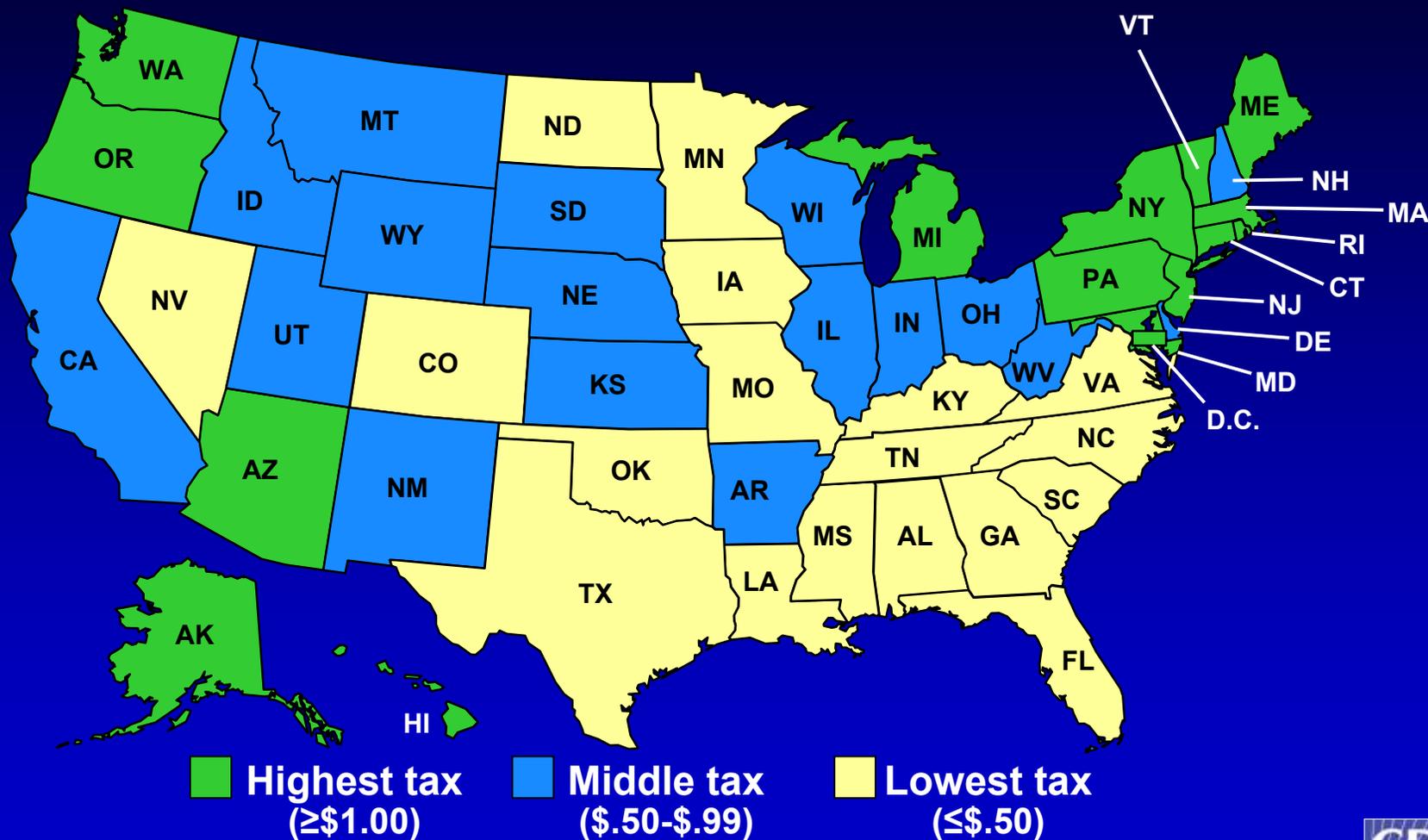
# **What do Model Programs Tell Us About the Potential for Population-Based Interventions to Increase Cessation?**

# California

- ✓ The Quitline has served over 100,000 tobacco users
- ✓ Media was the most important referral source (50%), followed by health care providers (20%)
- ✓ About 1/3 of callers were ethnic minorities and 17% were 24 years of age or younger
- ✓ Compared with CA smokers overall, callers were more dependent on nicotine, more likely to live with other smokers, more likely to have tried to quit recently, and more ready to try again
- ✓ Randomized trials of the California quitline shows doubling of cessation rates for telephone counseling compared with self-help materials alone

# State Cigarette Excise Taxes, 2003

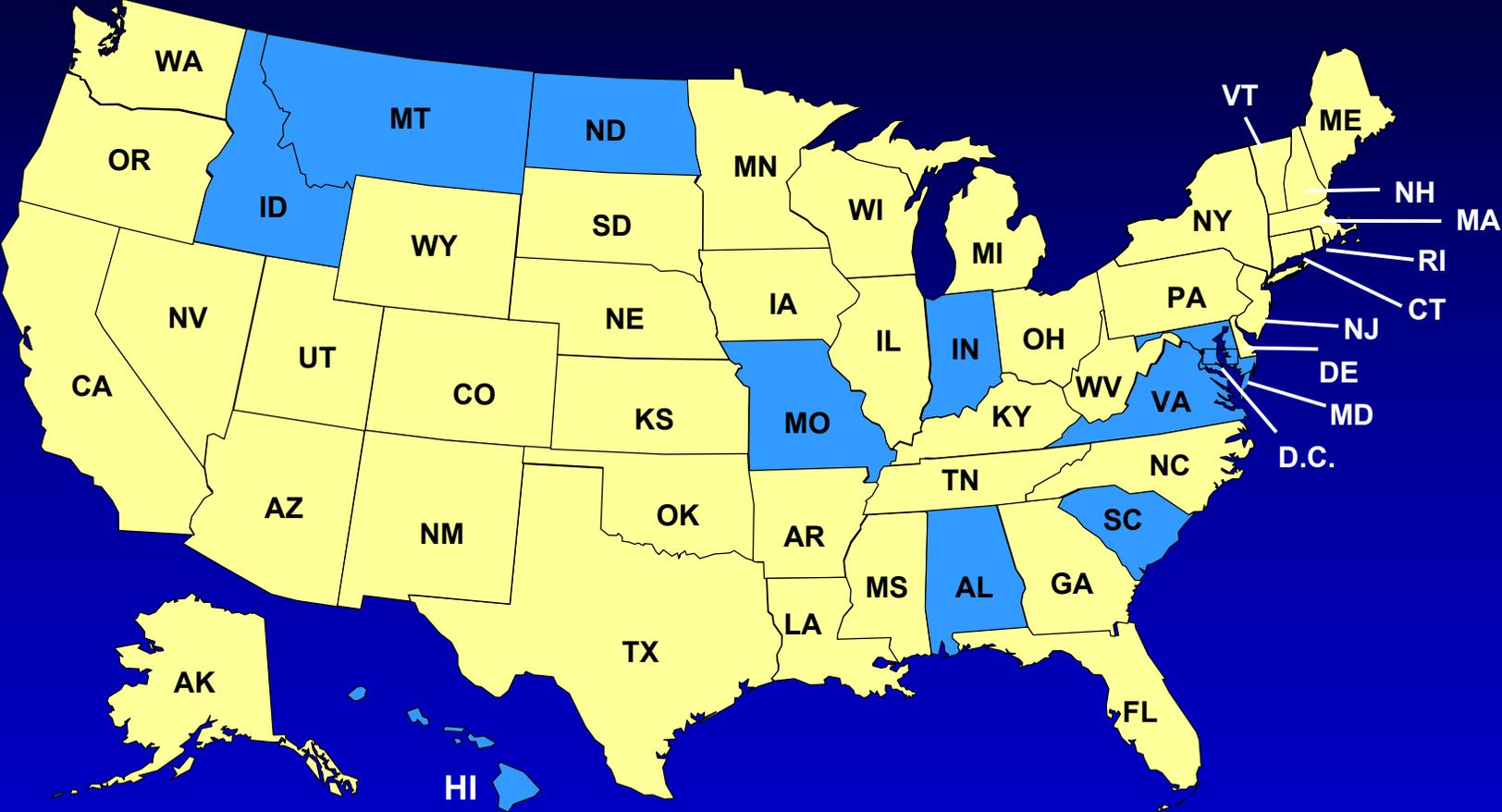
## (Range 2.5¢ to \$1.51 per Pack)



Source: Campaign for Tobacco Free Kids, June 26 2003



# State Sponsored Telephone Quitlines, 2004



 No quitline       Some form of quitline service

# Strategic Planning Documents

**Preventing 3 Million Premature Deaths**  
**Helping 5 Million Smokers Quit**  
**A National Action Plan for Tobacco Cessation**

Prepared by the Subcommittee on Cessation  
Michael C. Fiore, M.D., M.P.H., Chair  
Interagency Committee on Smoking and Health

Final Draft dated February 13, 2003

Final Draft-2/13/03

[ctcinfo.org/upload/National\\_Action\\_Plan\\_Tobacco\\_Cessation.pdf](http://ctcinfo.org/upload/National_Action_Plan_Tobacco_Cessation.pdf)



**A National Blueprint  
for Disseminating and Implementing  
Evidence-Based Clinical and Community  
Strategies to Promote Tobacco-Use Cessation**

September 2002  
*Final Draft Document*

[ctcinfo.org/tools/blueprints.asp](http://ctcinfo.org/tools/blueprints.asp)



EXECUTIVE SUMMARY



# From Challenge to Opportunity

Organizing, Financing and Delivering Statewide  
Tobacco Cessation Services and Activities

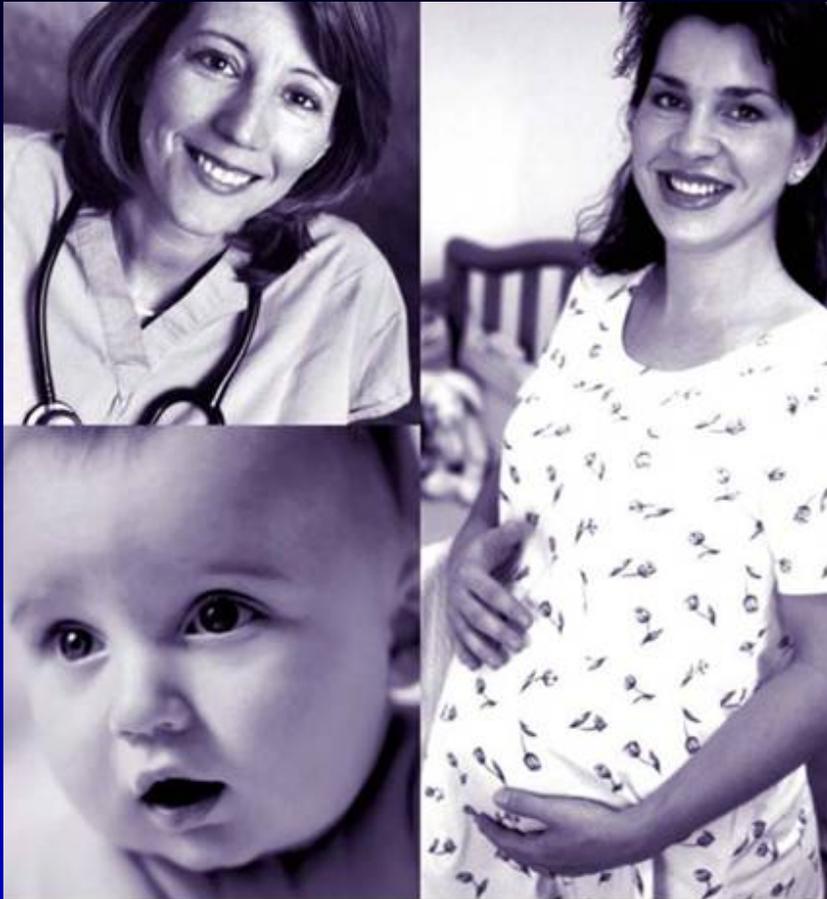
Center for Tobacco Cessation  
Policy Roundtable on Statewide Cessation Services

**Editors**

Linda A. Bailey, William L. Furmanski, Elizabeth W. Edsall

[ctcinfo.org/pubs\\_press/reports.asp](http://ctcinfo.org/pubs_press/reports.asp)





## National Partnership to Help Pregnant Smokers Quit

The National Partnership To Help Pregnant Smokers Quit

ACTION PLAN

May 2002

[www.helppregnantsmokersquit.org/documents/Actionplan.pdf](http://www.helppregnantsmokersquit.org/documents/Actionplan.pdf)



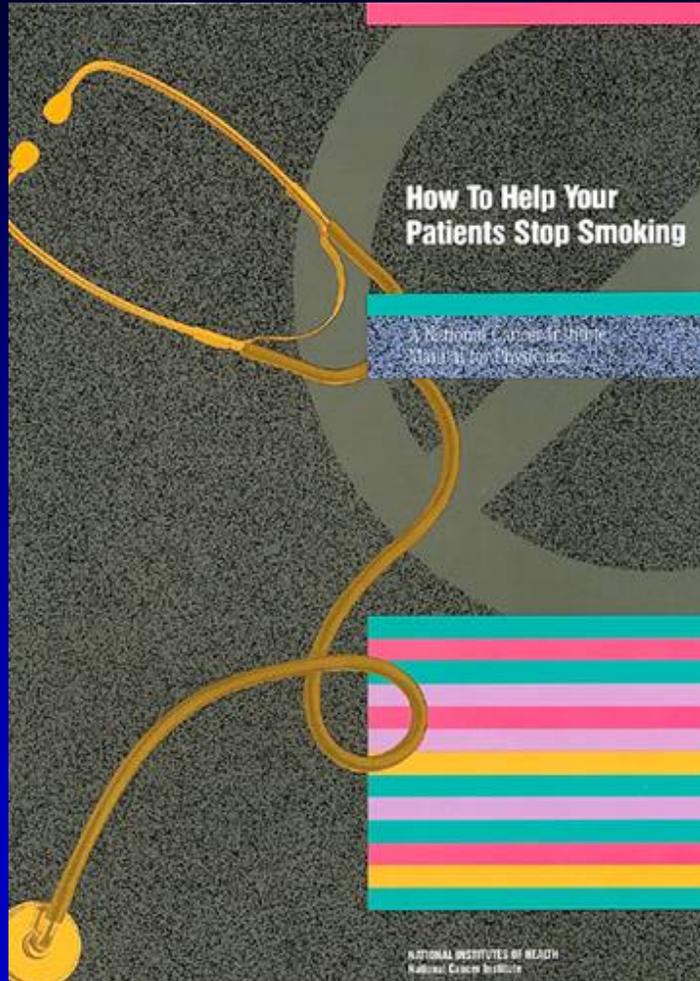
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# Toolkits

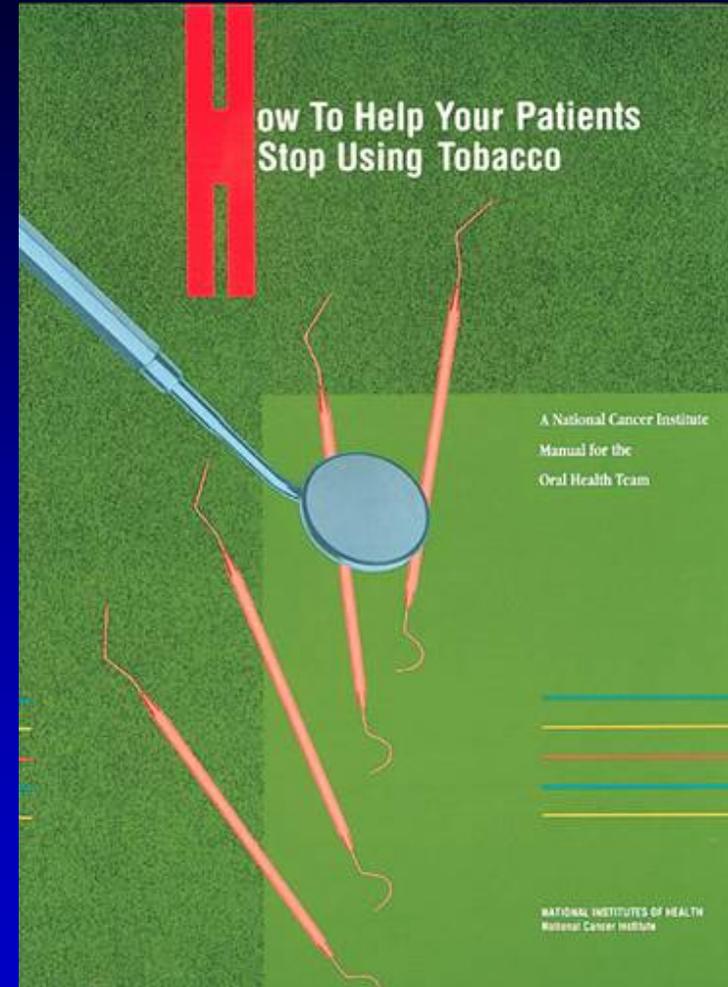
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# Toolkits for Providers

## Doctors



## Dentists



# Toolkits for Providers

**QUITWORKS™**

Provider Guide

## QuitWorks At A Glance

A SIMPLE, STATE-OF-THE-ART STOP-SMOKING SOLUTION

- QuitWorks is a free, evidence-based stop-smoking service to which health care providers may refer any Massachusetts patient, regardless of health insurance status.
- QuitWorks offers free, evidence-based services that include multi-session proactive telephone counseling, self-help information, referral to community tobacco treatment services provided by certified tobacco treatment specialists, and follow-up to support the quit attempt. As a convenience to you, QuitWorks also provides guidance on pharmacotherapy choices and dosing.
- QuitWorks has a simple enrollment process, endorsed by all the major health plans in the state.
- QuitWorks provides everything you need to put the program in place: office systems tools and guidance, referral forms, information for patients who agree to quit, and take-home advice for those who are not ready.

## Easy Steps

Linking your patients to QuitWorks is a simple and seamless process. First, advise your patients who smoke to quit and emphasize that effective treatments are available. If appropriate, make a strong case for pharmacotherapy. If the patient is not yet ready to commit to QuitWorks, provide the Think About It pamphlet, and make a note to revisit the subject at the next visit. When the patient takes your advice to quit, provide the QuitWorks Welcome Guide and have the patient sign an enrollment form before leaving the office. Finally, fax the signed form, and QuitWorks will take it from there.

## Inside, We Show You The Way

This Provider Guide and the Office Practice Kit, delivered by a participating health plan provider representative, contain the information and the tools you need to fully implement QuitWorks in your practice setting.

Dear Colleague,

It is with great pleasure that I announce the launch of QuitWorks, a new stop-smoking service that allows you to link your Massachusetts patients to the full range of our state's evidence-based tobacco treatment resources. More than a year in development, QuitWorks is the result of an unparalleled collaboration between the Massachusetts Department of Public Health and major health plans across the state.

Current clinical practice guidelines for tobacco treatment stress the pivotal effect of provider advice to quit on a patient's decision to act. That advice, along with appropriate pharmacotherapy and behavior-focused tobacco treatment, greatly increases the odds that your patient will succeed.

I think you will agree that QuitWorks is a simple way to ensure that all of your patients who wish to quit smoking receive the most effective interventions that they need and deserve. I hope that this Provider Guide will answer any questions you may have about the program.

Sincerely,

*Howard K. Koh*  
Howard K. Koh, MD, MPH  
Commissioner  
Massachusetts Department of Public Health

QUICK REFERENCE GUIDE FOR CLINICIANS

# Treating Tobacco Use And Dependence

U.S. Department of Health and Human Services  
Public Health Service

Treating Tobacco Use and Dependence • First Clinical Practice Guideline

## Counseling Patients To Quit

Effective smoking cessation counseling can be divided into practical and supportive counseling advice.

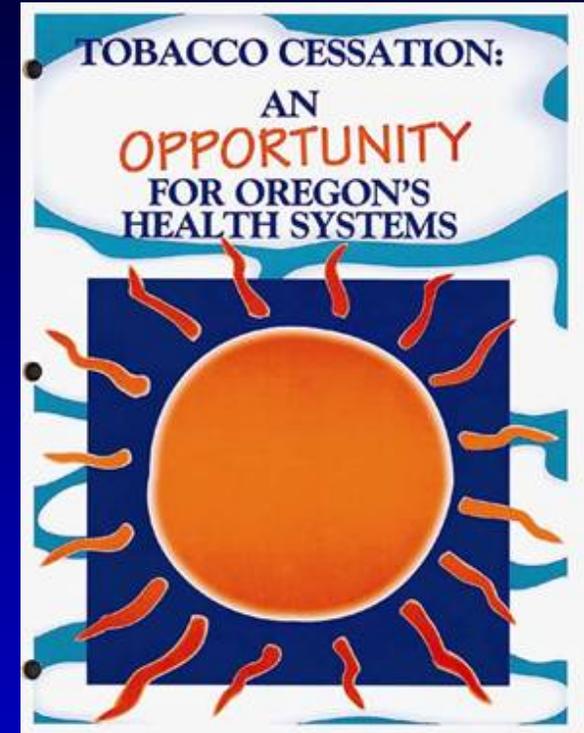
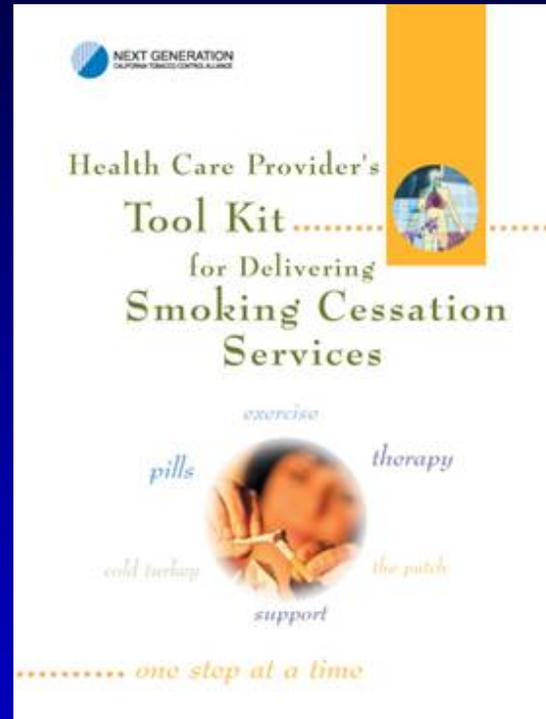
| Practical counseling advice (problemsolving/skills training)   | Examples   |
|--|--|
| <b>Recognize danger situations.</b> Identify events, internal states, or activities that increase the risk of smoking or relapse.                          | <ul style="list-style-type: none"> <li>Negative affect</li> <li>Being around other smokers</li> <li>Drinking alcohol</li> <li>Experiencing urges</li> <li>Being under time pressure</li> </ul>   |
| <b>Develop coping skills.</b> Identify and practice coping or problem-solving skills. Typically, these skills are intended to cope with danger situations. | <ul style="list-style-type: none"> <li>Learning to anticipate and avoid temptation</li> <li>Learning cognitive strategies that will reduce negative mood</li> <li>Accomplishing lifestyle changes that reduce stress, improve quality of life, or produce pleasure</li> <li>Learning cognitive and behavioral activities to cope with smoking urges (e.g., distracting attention)</li> </ul> |
| <b>Provide basic information.</b> Provide basic information about smoking and successful quitting.   | <ul style="list-style-type: none"> <li>Any smoking (even a single puff) increases the likelihood of full relapse.</li> <li>Withdrawal typically peaks within 1-3 weeks after quitting</li> <li>Withdrawal symptoms include negative mood, urges to smoke, and difficulty concentrating</li> <li>Smoking is addictive</li> </ul>  |
| Supportive counseling advice   | Examples   |
| <b>Encourage the patient in the quit attempt.</b>  | <ul style="list-style-type: none"> <li>Communicate belief in the patient's ability to quit</li> <li>Note that effective tobacco dependence treatments are now available</li> <li>Note that half of all people who have ever smoked have now quit</li> </ul>  |
| <b>Communicate caring and concern.</b>   | <ul style="list-style-type: none"> <li>Ask how the patient feels about quitting</li> <li>Directly express concern and willingness to help</li> <li>Be open to the patient's expression of fears of quitting, difficulties experienced, and ambivalent feelings</li> </ul>  |
| <b>Encourage the patient to talk about the quitting process.</b>   | <p>Ask about:</p> <ul style="list-style-type: none"> <li>Reasons the patient wants to quit</li> <li>Concerns or worries about quitting</li> <li>Success the patient has achieved</li> <li>Difficulties encountered while quitting</li> </ul>   |

Counseling Patients To Quit

[www.quitworks.org](http://www.quitworks.org)  
[www.ahrq.gov/clinic/tobacco/tobaqrg.pdf](http://www.ahrq.gov/clinic/tobacco/tobaqrg.pdf)  
[www.ahrq.gov/clinic/tobacco/counsel.pdf](http://www.ahrq.gov/clinic/tobacco/counsel.pdf)



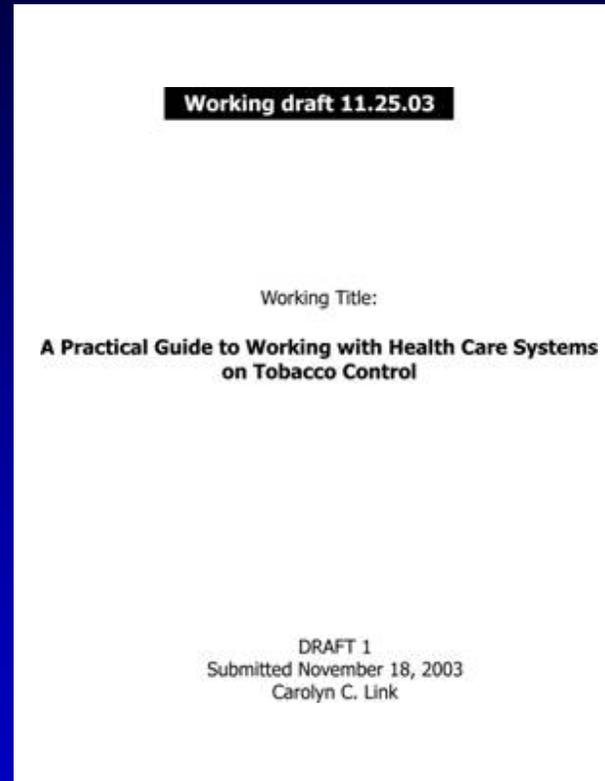
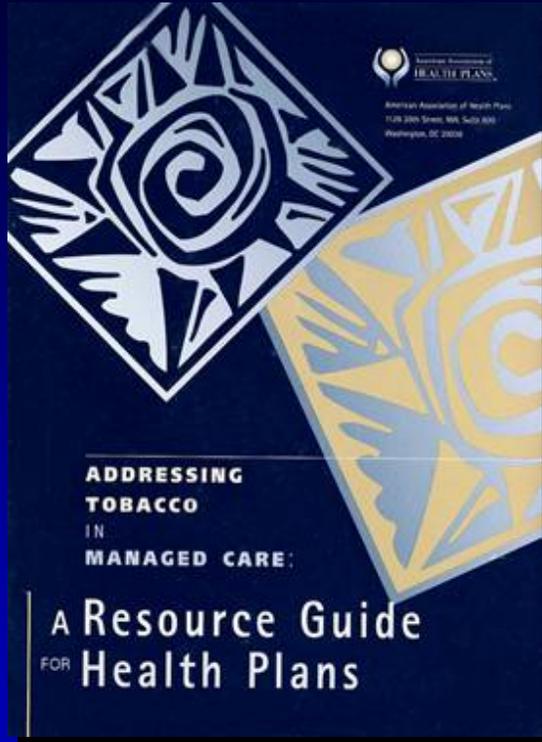
# Toolkits for Health Care Systems



[www.quitworks.org](http://www.quitworks.org)  
[www.cessationcenter.org/pdfs/NGAToolkit\\_FINAL\\_FORWEB.pdf](http://www.cessationcenter.org/pdfs/NGAToolkit_FINAL_FORWEB.pdf)  
[www.ohd.hr.state.or.us/tobacco/cess/imp.cfm](http://www.ohd.hr.state.or.us/tobacco/cess/imp.cfm)



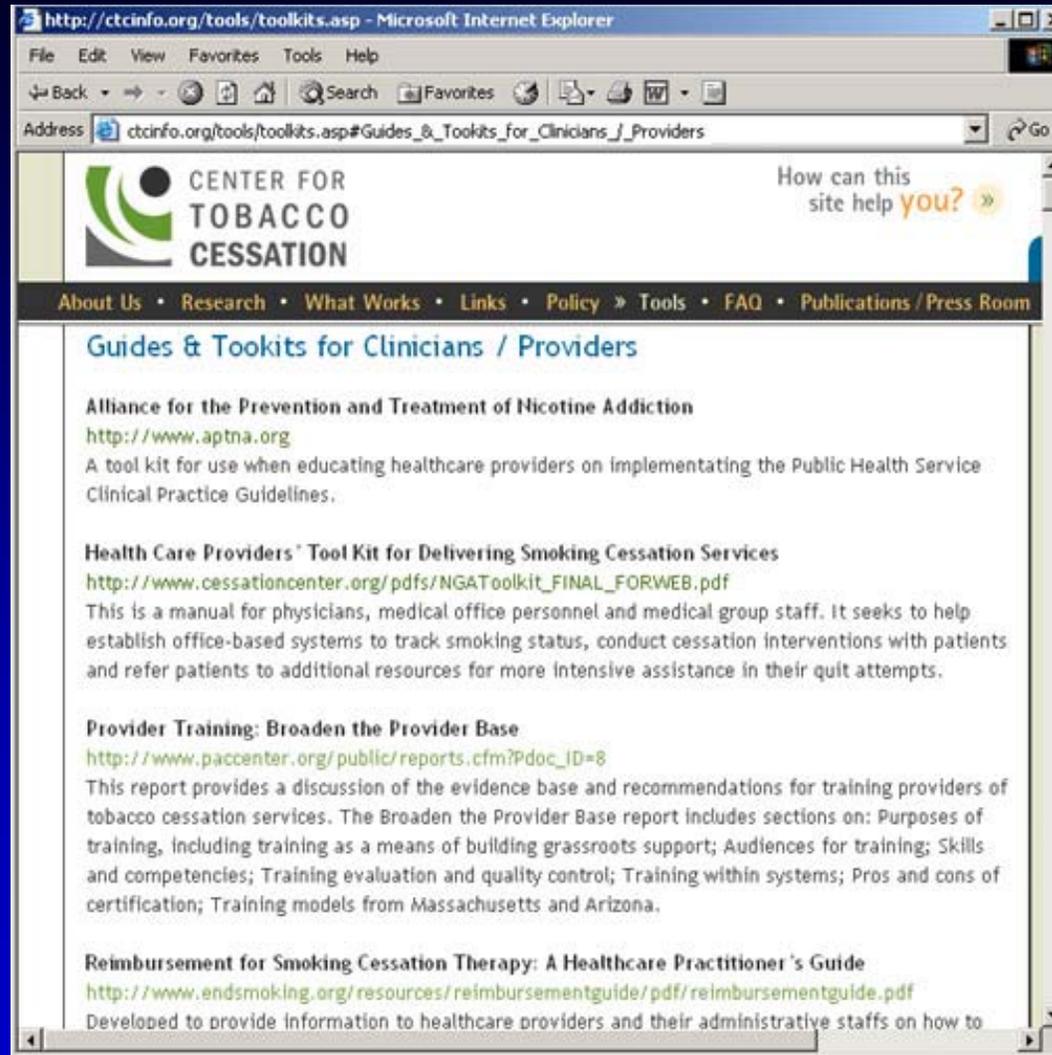
# Toolkits for Health Care Systems



[www.aahp.org/atmc/ATMC\\_Toolkit.pdf](http://www.aahp.org/atmc/ATMC_Toolkit.pdf)  
[www.ahrq.gov/clinic/tobacco/systems.pdf](http://www.ahrq.gov/clinic/tobacco/systems.pdf)



# Toolkits for Health Care Systems



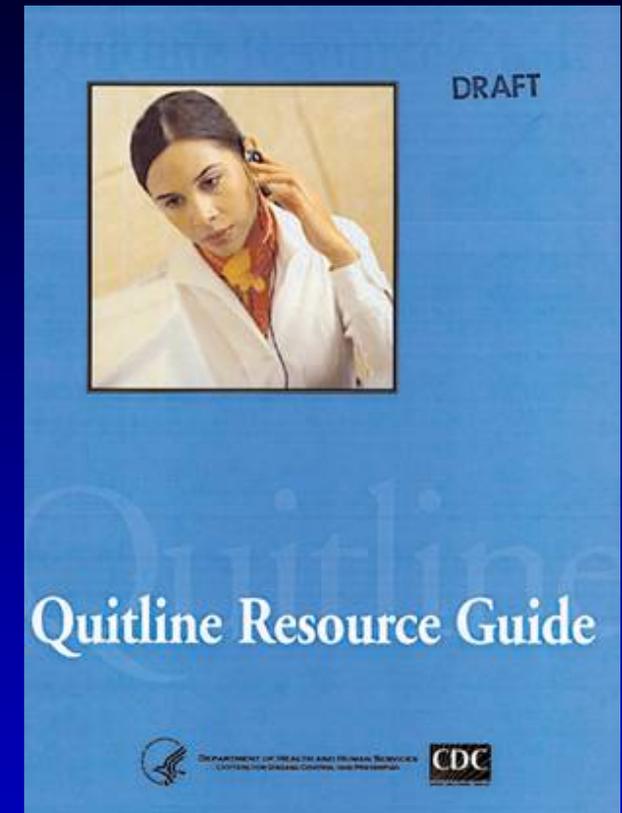
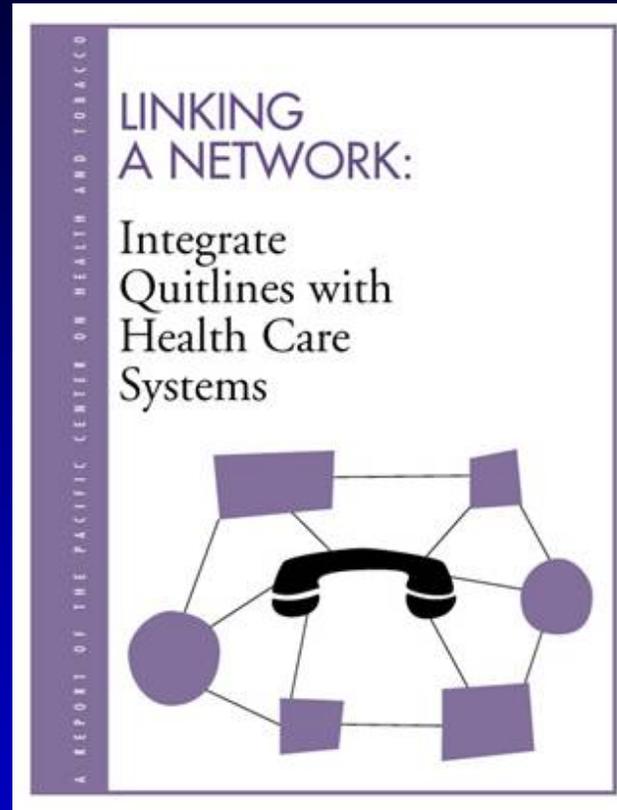
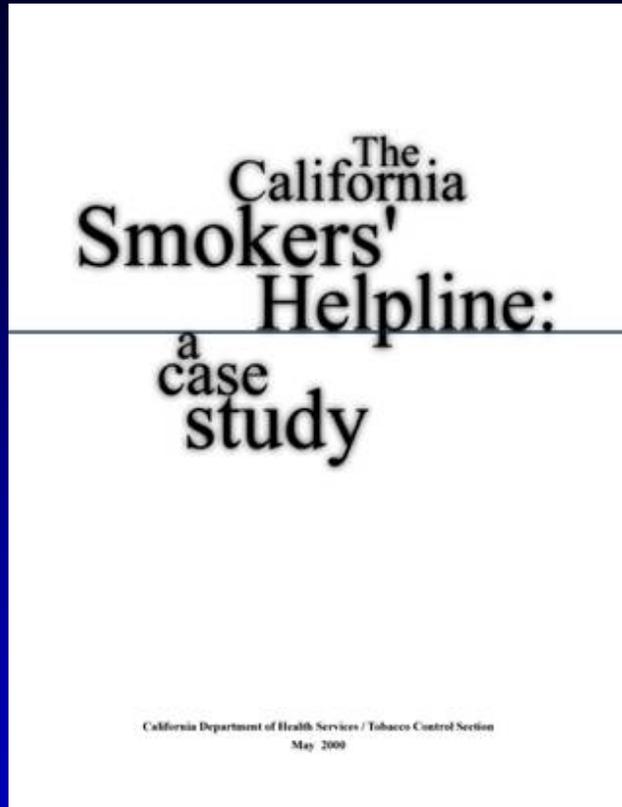
The screenshot shows a Microsoft Internet Explorer browser window displaying the website [http://ctcinfo.org/tools/toolkits.asp#Guides\\_&\\_Toolkits\\_for\\_Clinicians\\_/\\_Providers](http://ctcinfo.org/tools/toolkits.asp#Guides_&_Toolkits_for_Clinicians_/_Providers). The page header features the logo for the Center for Tobacco Cessation and a navigation menu with links for About Us, Research, What Works, Links, Policy, Tools, FAQ, and Publications / Press Room. The main content area is titled "Guides & Toolkits for Clinicians / Providers" and lists four resources:

- Alliance for the Prevention and Treatment of Nicotine Addiction**  
<http://www.aptna.org>  
A tool kit for use when educating healthcare providers on implementing the Public Health Service Clinical Practice Guidelines.
- Health Care Providers' Tool Kit for Delivering Smoking Cessation Services**  
[http://www.cessationcenter.org/pdfs/NGAToolkit\\_FINAL\\_FORWEB.pdf](http://www.cessationcenter.org/pdfs/NGAToolkit_FINAL_FORWEB.pdf)  
This is a manual for physicians, medical office personnel and medical group staff. It seeks to help establish office-based systems to track smoking status, conduct cessation interventions with patients and refer patients to additional resources for more intensive assistance in their quit attempts.
- Provider Training: Broaden the Provider Base**  
[http://www.paccenter.org/public/reports.cfm?Pdoc\\_ID=8](http://www.paccenter.org/public/reports.cfm?Pdoc_ID=8)  
This report provides a discussion of the evidence base and recommendations for training providers of tobacco cessation services. The Broaden the Provider Base report includes sections on: Purposes of training, including training as a means of building grassroots support; Audiences for training; Skills and competencies; Training evaluation and quality control; Training within systems; Pros and cons of certification; Training models from Massachusetts and Arizona.
- Reimbursement for Smoking Cessation Therapy: A Healthcare Practitioner's Guide**  
<http://www.endsmoking.org/resources/reimbursementguide/pdf/reimbursementguide.pdf>  
Developed to provide information to healthcare providers and their administrative staffs on how to

[ctcinfo.org/tools/toolkits.asp#Guides\\_&\\_Toolkits\\_for\\_Clinicians\\_/\\_Providers](http://ctcinfo.org/tools/toolkits.asp#Guides_&_Toolkits_for_Clinicians_/_Providers)



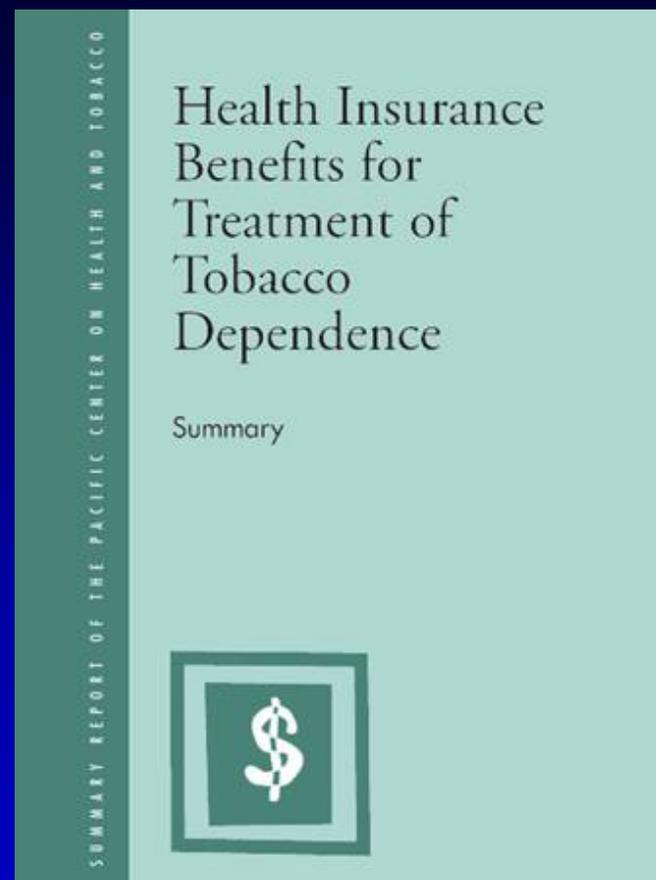
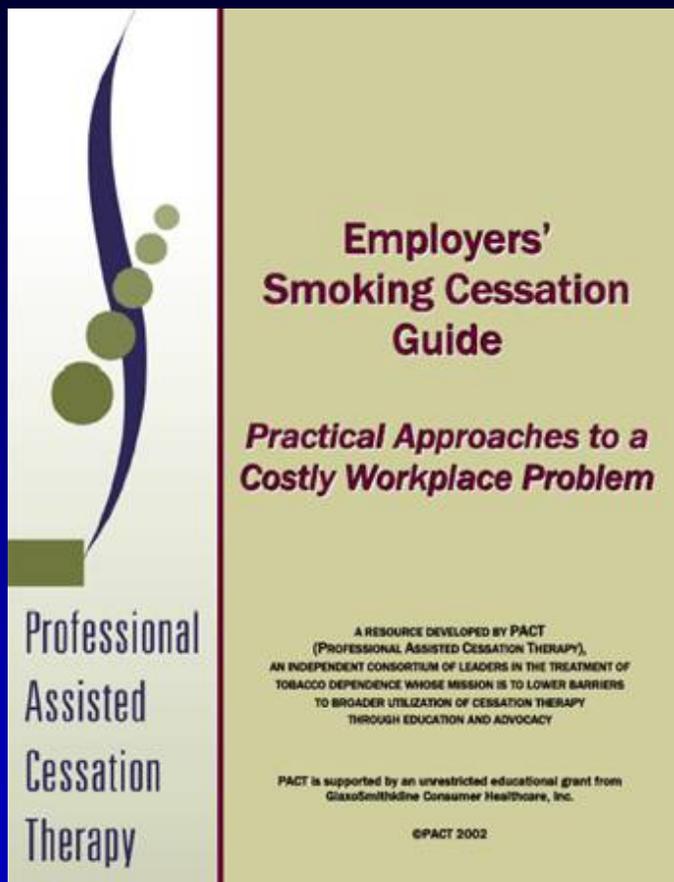
# Toolkits for Quitlines



[www.dhs.ca.gov/ps/cdic/ccb/tcs/documents/HelpLineCaseStudy.pdf](http://www.dhs.ca.gov/ps/cdic/ccb/tcs/documents/HelpLineCaseStudy.pdf)  
[www.paccenter.org/public/reports\\_folder/linking\\_broch\\_web.pdf](http://www.paccenter.org/public/reports_folder/linking_broch_web.pdf)



# Toolkits for Employers



<http://www.endsmoking.org/>  
[www.paccenter.org/public/reports\\_folder/insurance\\_flier\\_web.pdf](http://www.paccenter.org/public/reports_folder/insurance_flier_web.pdf)



# Toolkits for Employers

This year alone, over 430,000 Americans will die prematurely because of dependence on tobacco.<sup>1</sup> Thousands more will become terribly ill with tobacco-related cancer, heart, or respiratory disease. Some of these people work for you. Others are the spouse, child, parent or friend of someone who works for you. Tobacco costs—physically, emotionally and economically. You can cut these costs and improve your employees' health and productivity by helping people quit tobacco.

*"American business is awakening to the growing importance of its 'human capital'—the capabilities, knowledge, experience, willpower, and full potential of its people," according to HHPM, a non-profit that links employer health to corporate success. "Yet many employers do not realize the relationship of the employees' health to corporate performance. While striving to contain the rising medical costs that put them at a disadvantage against global competitors, they are missing the competitive advantage their company can gain from investing wisely in the health—and thereby, the productivity—of their work force."*

—Health & Productivity Management, March/April 2001

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  14. Schaeffer III, D. Defining Benefits and Progress for Smoking Cessation Treatments. *Tobacco Control*. 1997; 6 Suppl 1:540-5.



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Invest in Tobacco Cessation for a Healthy, Productive Workforce.

**MAKE IT YOUR BUSINESS:**  
Insure a tobacco-free workforce

**EMPLOYER'S TOOL KIT**

**TOFCO**

May 5, 2003

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# Toolkits for Employers

Center for Tobacco Cessation : Tools - Microsoft Internet Explorer

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Address [http://ctcinfo.org/tools/toolkits.asp#Guides\\_&\\_Toolkits\\_for\\_Employers](http://ctcinfo.org/tools/toolkits.asp#Guides_&_Toolkits_for_Employers) Go

## Guides & Toolkits for Employers

**Employers' Smoking Cessation Guide: Practical Approaches to a Costly Workplace Problem**  
<http://www.endsmoking.org/resources/employersguide/pdf/employersguide.pdf>  
Developed as a tool to help employers, large and small, enact affordable, effective smoking cessation programs in their companies. This guide makes the "business case" for employer involvement in smoking cessation, highlighting the enormous direct and indirect costs—both in health care and lost productivity—of smoking.

**Health Insurance Benefits**  
[http://www.paccenter.org/public/reports.cfm?Pdoc\\_ID=14](http://www.paccenter.org/public/reports.cfm?Pdoc_ID=14)  
At-a-glance summary from the "Build a Financial Infrastructure." This summary is intended to help guide discussions to employers and purchasers and can be tailored to each state

**Healthy Workforce 2010: An Essential Health Promotion Sourcebook for Employers, Large and Small**  
[http://www.prevent.org/publications/Healthy\\_Workforce\\_2010.pdf](http://www.prevent.org/publications/Healthy_Workforce_2010.pdf)  
This Partnership for Prevention publication designed for employers presents a set of national health objectives, with 10-year targets. The goal is to help explain objectives to employers so they can work on helping the nation achieve these targets.

**Preventive Services: Helping Employers Expand Coverage**  
[http://www.prevent.org/publications/Preventive\\_Services\\_Helping\\_Employers\\_Expand\\_Coverage.pdf](http://www.prevent.org/publications/Preventive_Services_Helping_Employers_Expand_Coverage.pdf)  
Developed by the Partnership for Prevention, this guide provides employers with information on return-on-investment data, health research and various health plans. The goal is to give employers the information they need to provide quality health coverage at a reasonable cost.

[ctcinfo.org/tools/toolkits.asp#Guides\\_&\\_Toolkits\\_for\\_Employers](http://ctcinfo.org/tools/toolkits.asp#Guides_&_Toolkits_for_Employers)



# Toolkits for Purchasers/Insurers

## COVERAGE FOR TOBACCO USE CESSATION TREATMENTS

**Why,**

**What,**

**and**

**How**

**Why Is Health Insurance Coverage for Tobacco Use Treatments So Important?**

- Smoking is costly to employers both in terms of smoking-related medical expenses and lost productivity.
  - Ten percent of smokers alive today are living with a smoking-related illness.\*
  - Men who smoke incur \$15,800\* (in 2002 dollars) more in lifetime medical expenses and are absent from work 4 days more per year than men who do not smoke.\*
  - Women who smoke incur \$17,500\* (in 2002 dollars) more in lifetime medical expenses and are absent from work 2 days more each year than nonsmoking women.\*
  - In 1999, each adult smoker cost employers \$1,760 in lost productivity and \$1,625 in excess medical expenditures.\*
  - Smoking causes heart disease, stroke, multiple cancers, respiratory diseases, and other costly illnesses. Secondhand smoke causes lung disease and lung cancer.\*\*
  - Smoking increases costly complications of pregnancy, such as pre-term delivery and low birth-weight infants.\*
- Smoking is the leading preventable cause of death in the United States.\*\* Smokers who quit will, on average, live longer and have fewer years living with disability.\*\*
- About 23% of American adults and 28% of men smoke.\*\* More than 70% want to quit, but few succeed without help.\*\* Tobacco use treatment double quitting success rates.\*\*

*Paying for tobacco use cessation treatments is the single most cost-effective health insurance benefit for adults that can be provided to employers.\*\**<sup>10, 11</sup>

**What Treatments Are Available? How Effective Are They?**

Smoking cessation treatments have been found to be safe and effective. These include counseling and medications, or a combination of both.

- Both on-line counseling and intensive telephone counseling are more effective than services that only provide educational or self-help materials.\*\*
- The effectiveness of counseling services increases as their intensity (the number and length of sessions) increases.\*
- Smokers are more likely to use telephone counseling than to participate in individual or group counseling sessions.\*\*

A REPORT OF THE PACIFIC CENTER ON HEALTH AND TOBACCO

## BUILD A FINANCIAL INFRASTRUCTURE:

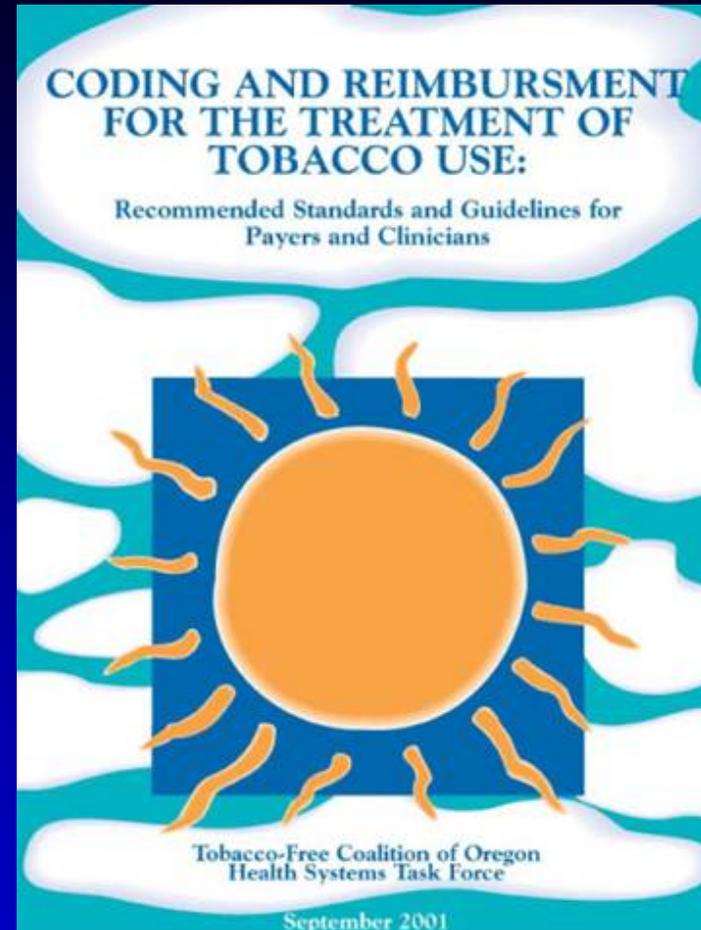
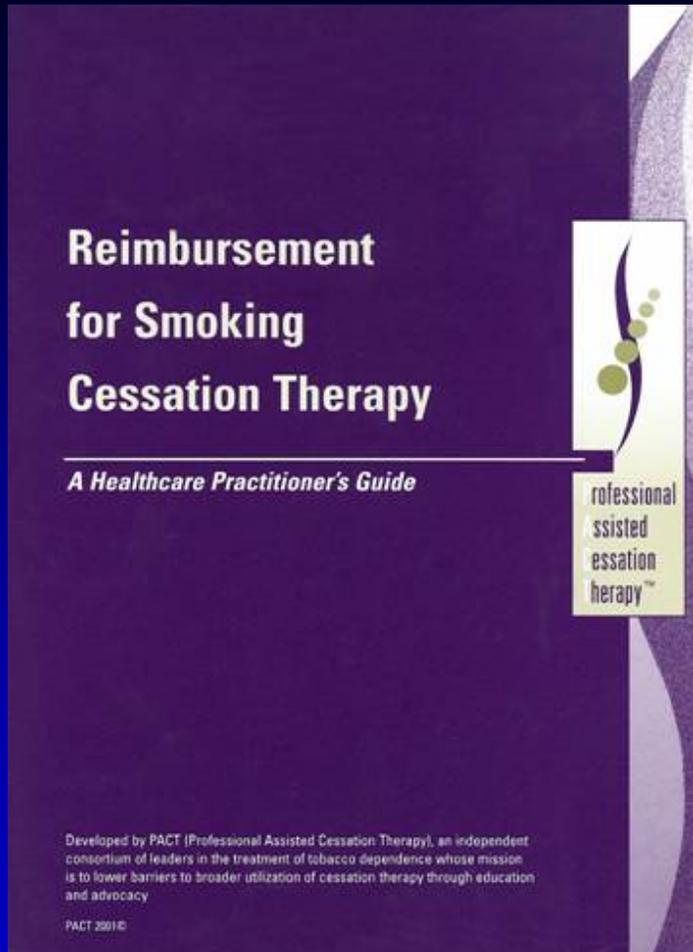
### Health Plan Benefits and Provider Reimbursement



[www.cdc.gov/tobacco/educational\\_materials/cessation/ReimbursementBrochureFull.pdf](http://www.cdc.gov/tobacco/educational_materials/cessation/ReimbursementBrochureFull.pdf)  
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# Toolkits for Purchasers/Insurers



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# Provider Education Materials



The  
TOBACCO  
DEPENDENCE  
TREATMENT  
Handbook

RC567.T634 2003

A GUIDE TO BEST PRACTICES

David B. Abrams   Raymond Niaura  
Richard A. Brown   Karen M. Emmons  
Michael G. Goldstein   Peter M. Monti



# Training and Certification

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Address [http://ctcinfo.org/tools/toolkits.asp#Resources\\_for\\_Cessation\\_Certification\\_&\\_Training](http://ctcinfo.org/tools/toolkits.asp#Resources_for_Cessation_Certification_&_Training)

**CENTER FOR TOBACCO CESSATION** How can this site help you? »

About Us • Research • What Works • Links • Policy » Tools • FAQ • Publications / Press Room

## Resources for Cessation Certification & Training

**Center for Tobacco Research and Intervention**  
<http://www.cme.uwisc.org>  
Based at the University of Wisconsin School of Medicine, offers five web based modules for continuing medical education to help clinicians implement the clinical practice guidelines for treating tobacco use and dependence.

**Mayo School of Continuing Education - Nicotine Dependence Seminar**  
<http://www.mayoclinic.org/ndc-rst/conference.html>  
Seminar hosted by the Mayo Clinic offers an in-person training seminar for patient care for nicotine dependence and education in all areas of tobacco intervention.

**Online Continuing Education**  
<http://www.MedEdCME.com>  
Internet-based educational program offers ongoing continuing medical education including a course for health care professionals on tobacco cessation treatment.

**The Association for Addiction Professionals**  
<http://www.smokersreatmentcenter.com>  
Offers a credentialing program for a tobacco addiction specialist designation through a partnership with the University of Florida and Patient Support International.

**Tobacco Outreach Education Program Course: Nicotine Dependence Across the Lifespan**

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## RELATED LINKS

Listed here are websites with online courses for healthcare providers and others interested in helping people stop smoking or using tobacco products. Some courses offer CE/CME credits. (Website listing is for information only, inclusion does not constitute endorsement.)

**Treating Tobacco Use and Dependence**  
Free (for limited time) 1-hour CME course from the University of Wisconsin Medical School, based on the PHS clinical practice guideline "Treating Tobacco Use and Dependence." [www.cme.uwisc.org/index.pl?op=showid=9075;isa=Category](http://www.cme.uwisc.org/index.pl?op=showid=9075;isa=Category)

**Tobacco CME**  
Funded by NHLBI and managed by Clinical Tools, Inc.; offers free online CME courses (Tobacco Cessation Overview, Pharmacotherapy, case studies, Pediatric Treatment Issues, Counseling Women, Reproductive Health Effects, etc., with many other topics in development). [www.TobaccoCME.com](http://www.TobaccoCME.com)

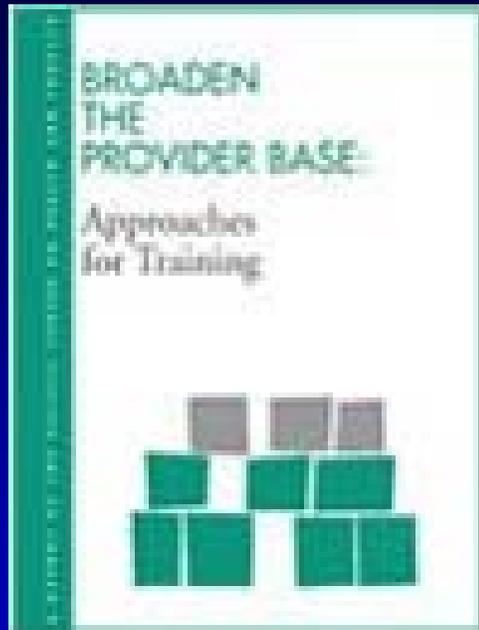
**Tobacco Free Patients**  
Funded by NCI and managed by Clinical Tools, Inc.; offers free online CME courses (Basic Interventions, Drug Therapy, Team Approach, Counseling Techniques, Special Populations, Health Effects, etc., with several other topics in development). [www.TobaccoFreePatients.com](http://www.TobaccoFreePatients.com)

**Integrated Approach to Prenatal Smoking Cessation Interventions**  
2.0 hr CE from the Nursing Center website: *The American Journal of Maternal/Child Nursing*, July/August 2001; Clinical Topics: Lifestyle modification / Obstetrics; Expires 9/1/04. [www.nursingcenter.com/prodev/ce\\_article.asp?tid=53538](http://www.nursingcenter.com/prodev/ce_article.asp?tid=53538)

[ctcinfo.org/tools/toolkits.asp#Resources\\_for\\_Cessation\\_Certification\\_&\\_Training](http://ctcinfo.org/tools/toolkits.asp#Resources_for_Cessation_Certification_&_Training)  
[www.aptna.org/Online\\_Courses.html](http://www.aptna.org/Online_Courses.html)



# Training and Certification

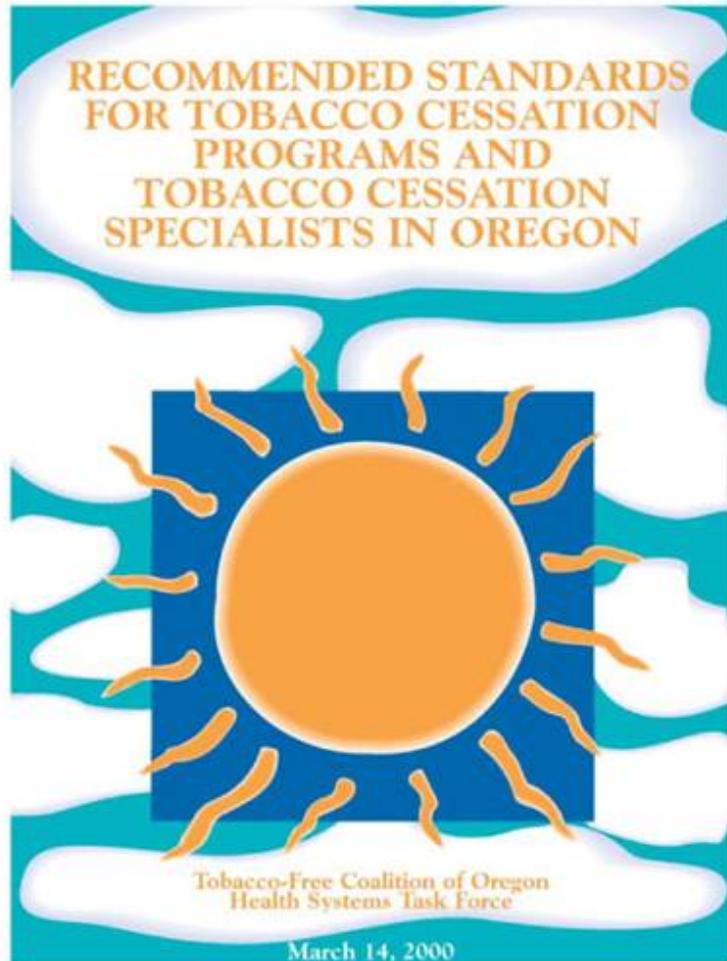


## Broaden the Provider Base: Approaches for Training

[www.paccenter.org/pages/pub\\_reports.htm](http://www.paccenter.org/pages/pub_reports.htm)



# Training and Certification



Next Generation California Tobacco Control Alliance | Online Cessation Resource Center | Resour - Microsoft Internet Explorer

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Address [http://www.cessationcenter.org/Resources.htm#Free\\_CME\\_Courses](http://www.cessationcenter.org/Resources.htm#Free_CME_Courses)

NEXT GENERATION CALIFORNIA TOBACCO CONTROL ALLIANCE  
Online Cessation Resource Center

Home Tool Kits Resources Links About the Alliance

## Resources

This section contains links to free, Continuing Medical Education (CME) courses on smoking cessation as well as tools and materials to make delivering cessation interventions to patients more effective and efficient.

- [Free CME Courses](#)
- [Free Cessation Counseling Training](#)
- [Free Patient Counseling and Resources](#)
- [Instituting Tobacco as a Vital Sign \(TVS\)](#)
- [Sticker Templates for Charting](#)
- [Prescribing Guide for Pharmacotherapies](#)
- [Patient Resources - Multiple Languages](#)

### Free CME Courses

Advising and counseling smoking patients to quit is an important and effective action that health care providers can take in helping patients. Studies have shown that high patient satisfaction occurs from brief, interactive, group for

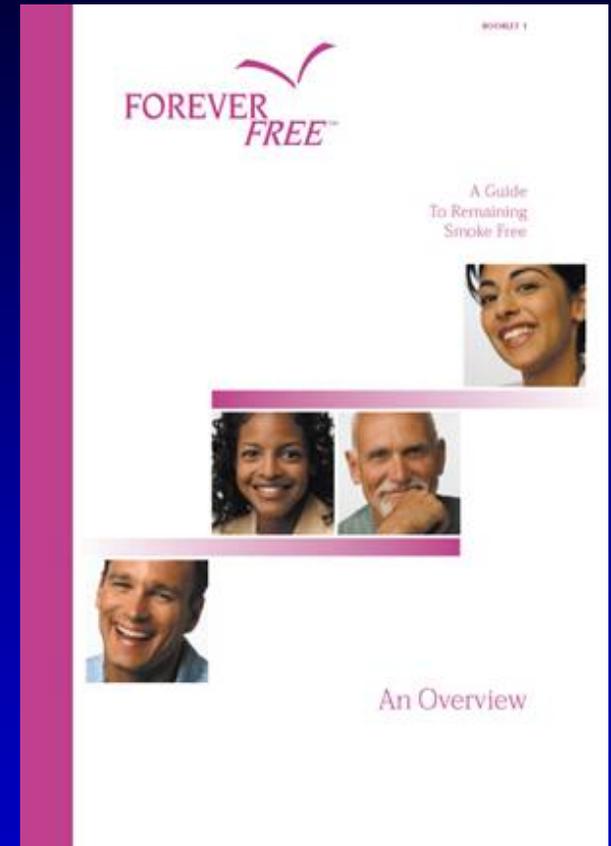
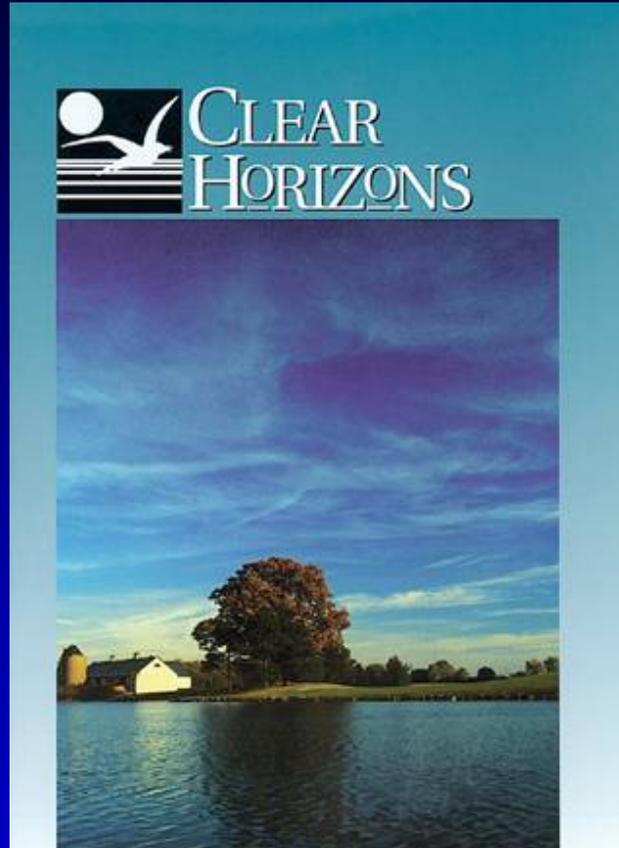


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[www.cessationcenter.org/Resources.htm#Free\\_CME\\_Courses](http://www.cessationcenter.org/Resources.htm#Free_CME_Courses)



# Patient Education Materials

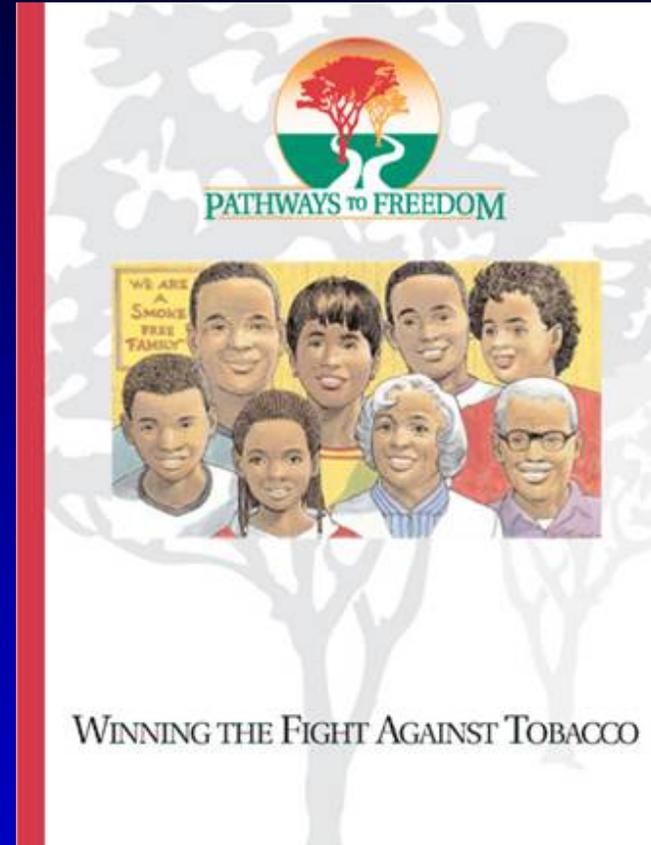
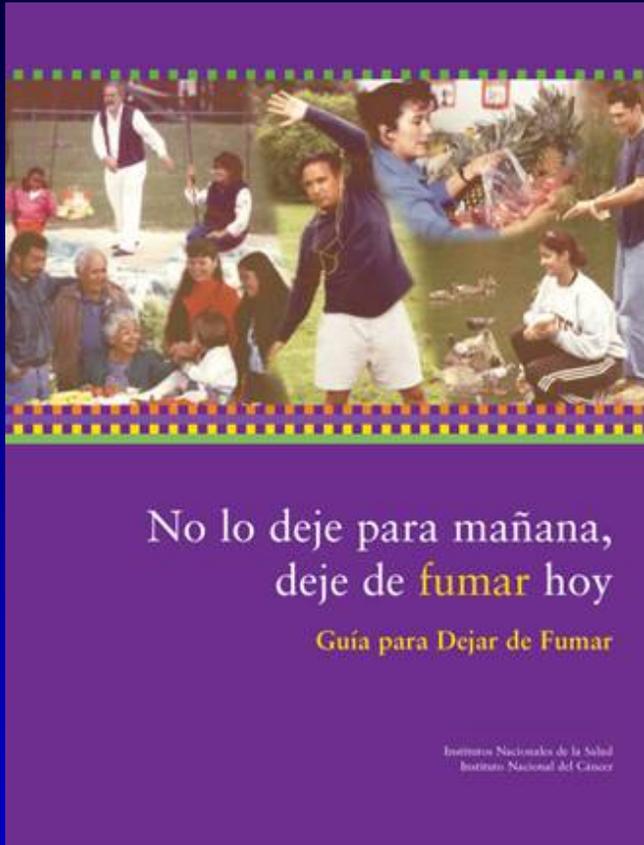
# Patient Education Materials



[www.smokefree.gov/info.html](http://www.smokefree.gov/info.html)



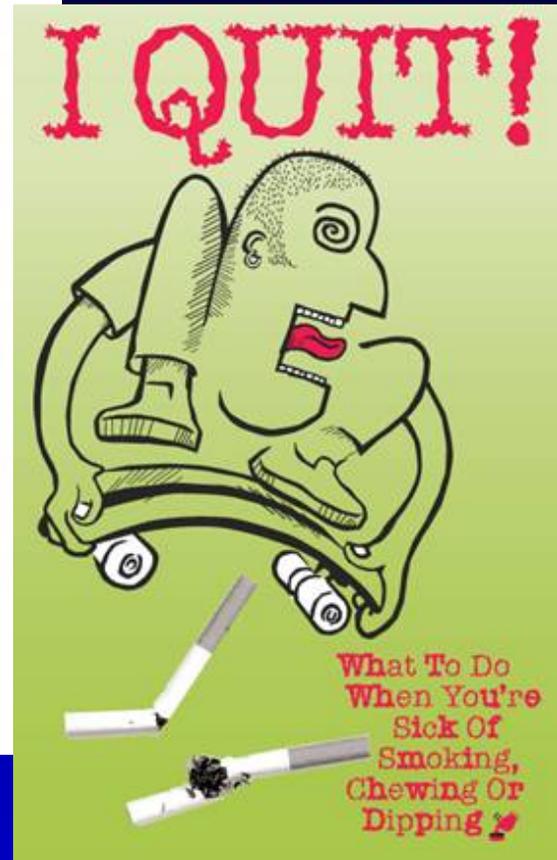
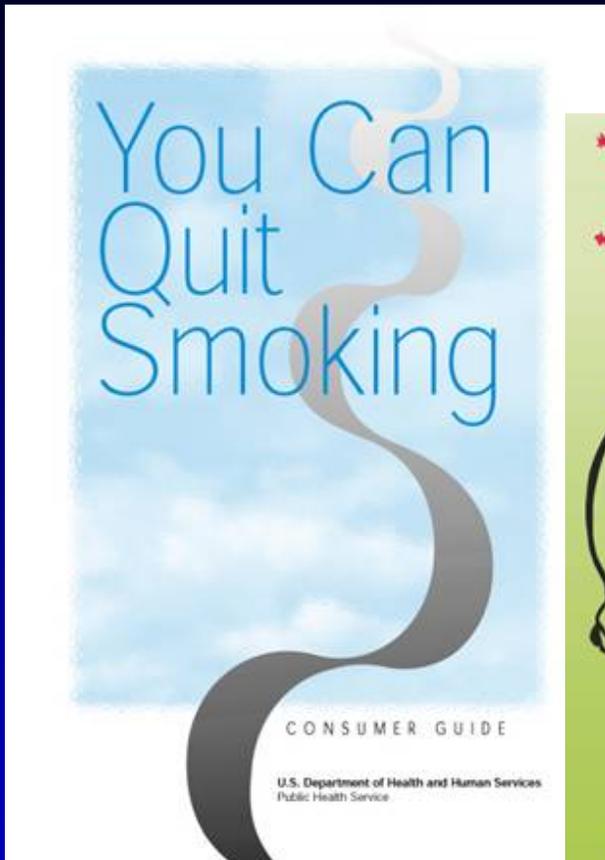
# Patient Education Materials



[www.smokefree.gov/info.html](http://www.smokefree.gov/info.html)



# Patient Education Materials



[www.ahrq.gov/consumer/tobacco/quits.pdf](http://www.ahrq.gov/consumer/tobacco/quits.pdf)  
[www.cdc.gov/tobacco/quit/IQuit.pdf](http://www.cdc.gov/tobacco/quit/IQuit.pdf)  
[www.nidcr.nih.gov/health/newsandhealth/spitTobacco/](http://www.nidcr.nih.gov/health/newsandhealth/spitTobacco/)



# Paradigm of Tobacco-Use Treatment

- ✓ Higher price for tobacco
- ✓ Reducing cost of treatment
- ✓ Counter-advertising
- ✓ Clean indoor air policies

