



A new opportunity to help cancer patients who smoke to quit

Goal: To change clinical culture and practice patterns to ensure that every patient being treated for cancer who uses tobacco is identified, advised to quit, and offered scientifically sound treatments.

How: Institute a policy within your system to automatically refer cancer patients who smoke to the Michigan Tobacco Quitline, or in-house cessation service. Clinicians can make a difference with even a minimal (less than 3 minutes) intervention.

Why it is important to your organization:

Assessing and treating tobacco use generally leads to greater patient satisfaction with health care.

When a cancer patient quits smoking:

- cancer treatment outcomes improve
- risk of cardiovascular complications and death decrease during and after treatment
- risk of cancer recurrence or development of new cancer is reduced
- look for cost savings for the system from decreased hospitalizations, ICU visits, wound healing

Talking points for patient interaction:

- Quit smoking now so you have a better chance of surviving cancer.
- Quit smoking now so you can decrease your risk of cardiovascular death during treatment and after treatment.
- Quit now so that your chances of getting cancer again are less.
- Now is the best time to quit.
- Quitting isn't easy, but with the right help you can succeed. There are free services to help you quit smoking through the Michigan Tobacco Quitline.

Outcomes for each patient are dependent on diagnosis. Please refer to the National Cancer Institute's Smoking Cessation and Continued Risk in Cancer Patients (PDQ®) if you would like further information on specific studies:

<http://www.cancer.gov/cancertopics/pdq/supportivecare/smokingcessation/HealthProfessional/page3>



**TOBACCO
REDUCTION
AND
PREVENTION**



PATIENT FAX REFERRAL FORM

Fax to: 1-800-261-6259

Today's Date _____

Use this form to refer patients who are ready to quit tobacco in the next 30 days to the Michigan Tobacco Quitline.

PROVIDER(S): Complete this section

Provider Name (Physician, PA, Nurse, Health Educator, etc.) _____

Office Contact Name (Person who can clarify patient demographics) _____

Clinic/Hosp/Dept _____

E-mail (optional) _____

Address _____

Phone () - _____

City/State/Zip _____

Fax () - _____

Please check this box if client agreed in person or over the phone to be referred to the Michigan Tobacco Quitline.

LICENSED MEDICAL PROVIDER: Please complete the section below if your patient is pregnant or has high blood pressure or heart disease and would like to use NRT. Patients with these conditions who want NRT must have the form signed by a provider licensed to prescribe in the state of Michigan.

Does patient have any of the following conditions: pregnant uncontrolled high blood pressure heart disease

If yes, please sign to authorize the Michigan Tobacco Quitline to send the patient free, over-the-counter nicotine replacement therapy if available. If provider does not sign and the patient has any of the above listed conditions, the Michigan Tobacco Quitline cannot dispense medication.

Provider Signature _____

PATIENT: Complete this section

____ Yes, I am ready to quit and ask that a quitline coach call me. I understand that the Michigan Tobacco Quitline will inform my provider about my participation.
Initial

Best times to call? morning afternoon evening weekend

May we leave a message? Yes No

Are you hearing impaired and need assistance? Yes No

Date of Birth? / / Gender M F

Patient Name (Last) _____ (First) _____

Address _____ City _____ State **MI**

Zip Code _____ E-mail _____

Phone #1 () - _____ Phone #2 () - _____

Language English Spanish Other _____

Patient Signature _____

Date _____

PLEASE FAX TO: 1-800-261-6259

Or mail to: Michigan Tobacco Quitline., c/o National Jewish Health®, 1400 Jackson St., S117A, Denver, CO 80206

Confidentiality Notice: This facsimile contains confidential information. If you have received this in error, please notify the sender immediately by telephone and confidentially dispose of the material. Do not review, disclose, copy or distribute.



TOBACCO REDUCTION AND PREVENTION

PATIENT FAX REFERRAL FORM

Today's Date _____

Fax to: 1-800-261-6259

Use this form to refer patients who are ready to quit tobacco in the next 30 days to the Michigan Tobacco Quitline.

Person who receives patient feedback or who can clarify patient contact information. This may be the provider or could be the receptionist, nurse or medical records staff.

PROVIDER(S): Complete this section

Provider name Physician, PA, Nurse, Health Educator, Etc. Contact Name

Clinic/Hosp/Dept E-mail (Optional)

Address Phone () -

City/State/Zip Fax () -

Does patient have any of the following conditions: pregnant uncontrolled high blood pressure heart disease

If yes, please sign to authorize the Michigan Tobacco Quitline to send the patient free, over-the-counter nicotine replacement therapy if available. If provider does not sign and the patient has any of the above listed conditions, the Michigan Tobacco Quitline cannot dispense medication.

You do not need to fill out this section unless the patient is pregnant or has high blood pressure or heart disease and wants NRT. Patients with these conditions who want NRT must have the form signed by a provider licensed to prescribe in the State of Michigan.

Provider Signature

Please Check: Patient agreed with clinician to be referred to the Michigan Tobacco Quitline. Check this box if your client agreed in person or by phone.

PATIENT: Complete this section

Initial Yes, I am ready to quit and ask that a quitline coach call me. I understand that the Michigan Tobacco Quitline will inform my provider about my participation.

Note here if patient agreed by phone.

Best times to call? morning afternoon evening weekend

May we leave a message? Yes No

Are you hearing impaired and need assistance? Yes No

Date of Birth? / / Gender M F

Patient Name (Last) (First)

Address City State

Zip Code E-mail (Optional)

Phone #1 *REQUIRED. Must be able to contact by phone. Phone #2 () -

Language English Spanish Other

Patient Signature Date

PLEASE FAX TO: 1-800-261-6259

Or mail to: Michigan Tobacco Quitline., c/o National Jewish Health®, 1400 Jackson St., S117A, Denver, CO 80206

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Enrolled Faxback



Michigan QuitLine Confidential Fax
Fax (800) 261-6259

To:	Hana Tomah
Fax:	313-875-4701
Pages:	1
Date:	5/11/2012
From:	Michigan QuitLine Staff
Patient's DOB:	[REDACTED]
Subject:	<p>Thank you for referring your patient [REDACTED] to the Michigan QuitLine. We are happy to announce that your patient has chosen to enroll in the Michigan QuitLine Telephonic Counseling Program. We look forward to our continued assistance in their effort to give up tobacco.</p> <p>If you have any questions or would like more information on the program, please call us at 800-784-8669. We appreciate your support of the Michigan QuitLine.</p>

<input type="checkbox"/> Review And Respond	<input checked="" type="checkbox"/> For Your Information
<input type="checkbox"/> Review And Discard	<input type="checkbox"/> Per Your Request
<input type="checkbox"/> Urgent	<input type="checkbox"/> Call Upon Receipt

Michigan Tobacco Quitline Fact Sheet

Hours: 7 a.m. to 1 a.m. daily

Callers can leave a message for a return call within 1 business day

The Quit Line's Free Services Include:

- Information and referrals to local quit-tobacco resources and services.
- Information for those concerned about a tobacco user.
- Telephone coaching for Michigan residents with Medicare, Medicaid, County Health Insurance Plans, Veterans Insurance or who are uninsured.
 - Enrollees will receive personalized advice on how to quit, information on medications, and assistance with choosing a quit date and creating a quit plan.
 - Enrollees receive four coaching calls during their quit attempt. They can also contact the Quitline between calls as needed.
- Eight weeks of free medication (nicotine patch, gum or lozenge) for qualified enrollees.

How to Reach Us:

- Call 1-800-QUIT-NOW (1-800-784-8669).
- Visit <http://www.njhcommunity.org/michigan/> and click on Enroll Now. A Quitline coach will call you shortly.

Helping Smokers Quit:

- Over 66,000 callers since October 2003.
- 38,500 people have taken the first step to a smokefree life since the Quitline opened.

The Quitline Saves Dollars:

The CDC estimates that Michigan saves \$1,623 per year in healthcare costs for each smoker that quits.

About the Quitline:

The Quitline is funded by the Michigan Department of Community Health. Quitline services are provided by National Jewish Health.

October 2011

QuitlineFactSheet.doc

Michigan Tobacco Quitline Protocol

First Counseling Session:

Coach will assess the caller's readiness to quit, establish rapport, and provide information about nicotine addiction and pharmaceuticals to help with quitting. Discuss the caller's concerns about quitting. Set a quit date with the caller.

Second Counseling Session:

Help the caller prepare to quit. Discuss whether caller has decided to use quit smoking medications and provide information on the correct use of medications. Help the caller identify potentially difficult situations and discuss how to cope with them. Discuss symptoms of withdrawal. Discuss behavior changes leading up to the quit date.

Third and Fourth Counseling Sessions:

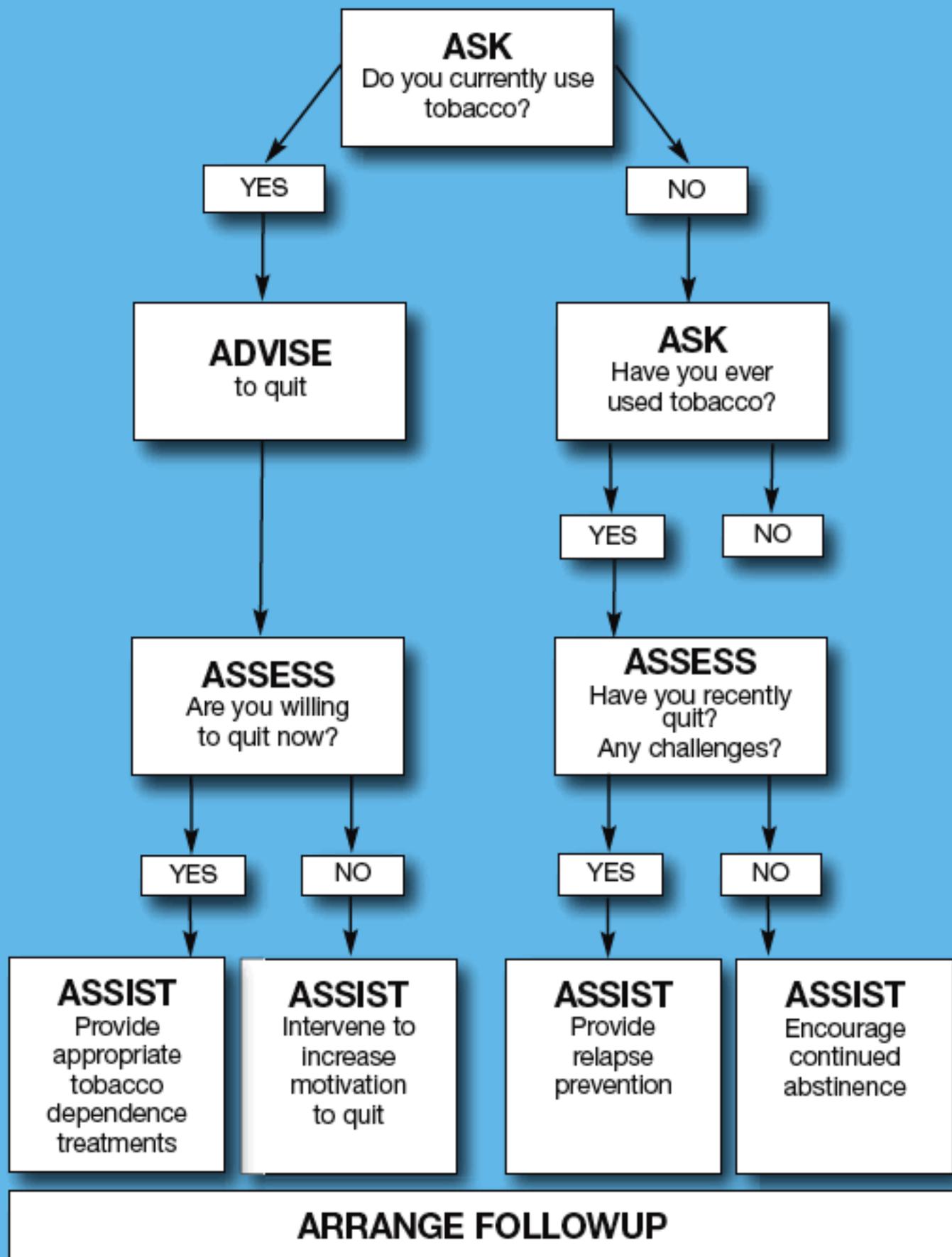
This is a post-quit date call. The coach will determine whether caller is quit yet and will provide counseling based on the caller's quit status. The coach will talk with the caller about any physical symptoms of withdrawal and coping mechanisms. The caller's emotional status will be assessed and the coach will discuss problem-solving and coping skills for distress. Future difficult situations will be discussed and the coach and caller will work on a plan for how the caller will deal with them. Caller's motivation will be reassessed and encouragement will be provided.

Relapse Session:

If caller has relapsed, the caller will be encouraged to set another quit date. Caller will be reassured that they are not a failure and that this is a simply a sign of the addictive nature of nicotine. A new quit plan will be developed.

Additional Support:

If additional support is needed between appointments, the participant may as needed. Call protocol will be similar to the third and fourth counseling sessions and usually focus on an immediate craving or trigger situation. Coping mechanisms will be stressed.





What to Tell Your Patients About Smoking

A Report of the Surgeon General: How Tobacco Smoke Causes Disease



Quitting Will Save Your Patients' Lives

Tobacco use remains the leading preventable cause of death and disease in the United States. Recent studies show that brief advice from a clinician about smoking cessation yielded a 66% increase in successful quit rates. Talk to your patients. Tell them that quitting smoking is the most important step they can take to improve their health. They will listen to you.

How to Help Patients Quit*

Assist the tobacco user to:

- Set a quit date, ideally within 2 weeks.
- Remove tobacco products from the environment.
- Get support from family, friends, and coworkers.
- Review past quit attempts—what helped, what led to relapse.
- Anticipate challenges, particularly during the critical first few weeks, including nicotine withdrawal.
- Identify reasons for quitting and benefits of quitting.

Give advice on successful quitting:

- Total abstinence is essential—not even a single puff.
- Drinking alcohol is strongly associated with relapse.
- Allowing others to smoke in the household hinders successful quitting.

Encourage use of medication:

- Recommend use of over-the-counter nicotine patch, gum, or lozenge; or give prescription for varenicline, bupropion SR, nicotine inhaler, or nasal spray, unless contraindicated.

Provide resources:

- Recommend 1-800-QUIT NOW (784-8669), the national access number to state-based quitline services.
- Refer to Web sites for free materials (www.smokefree.gov and www.ahrq.gov/path/tobacco.htm).

*Excerpted from *Helping Smokers Quit: A Guide for Clinicians* (Treating Tobacco Use and Dependence: 2008 Update, A Clinical Practice Guideline) found at www.ahrq.gov/path/tobacco.htm

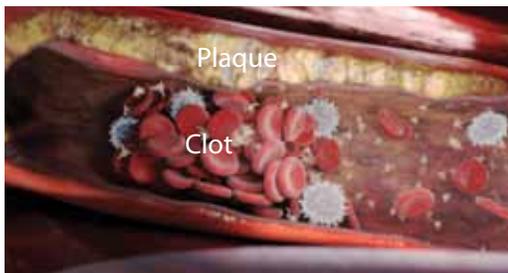


Summary of Findings from the 2010 Report of the Surgeon General

1. **There is no safe level of exposure to tobacco smoke.** Any exposure to tobacco smoke – even an occasional cigarette or exposure to secondhand smoke – is harmful.
2. **Damage from tobacco smoke is immediate.** Tobacco smoke contains more than 7,000 chemicals and chemical compounds, which reach your lungs every time you inhale. Your blood then carries the poisons to all parts of your body. These poisons damage DNA, which can lead to cancer; damage blood vessels and cause clotting, which can cause heart attacks and strokes; and damage the lungs, which can cause asthma attacks, emphysema, and chronic bronchitis.
3. **Smoking longer means more damage.** Both the risk and the severity of many diseases caused by smoking are directly related to how long the smoker has smoked and the number of cigarettes smoked per day.
4. **Cigarettes are designed for addiction.** The design and contents of tobacco products make them more attractive and addictive than ever before. Nicotine addiction keeps people smoking even when they want to quit.
5. **Even low levels of exposure, including exposure to secondhand tobacco smoke, are dangerous.** You don't have to be a heavy smoker or a long-time smoker to get a smoking-related disease or have a heart attack or asthma attack triggered by smoke.
6. **There is no safe cigarette.**

“ You can quit, and I can help. ”

What to Tell Your Patients About Smoking and Chronic Diseases



High Blood Pressure and Heart Disease

Smoking causes dangerous plaque buildup inside your arteries. Plaque clogs and narrows your arteries. Poisons from tobacco smoke also quickly damage blood vessels and make blood more likely to clot. This can block blood flow and lead to heart attack, stroke, or even sudden death.

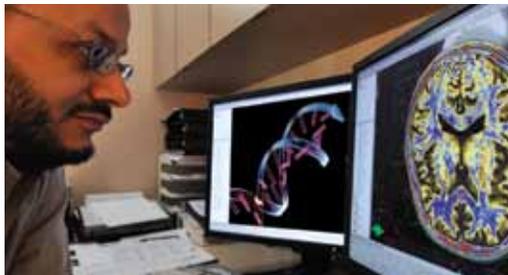
Quitting smoking will improve your heart health. After just one year your risk for a heart attack drops sharply, and *even if you've already had a heart attack, you cut your risk of having another one by a third to a half if you quit smoking*. Two to five years after you quit, your risk for stroke falls to about the same as a nonsmoker's.



Diabetes

If you have diabetes and smoke, your risk for kidney disease is 2 to 3 times higher than if you don't smoke. Smokers with diabetes also have higher risk for heart disease and eye disease that can cause blindness; nerve damage that causes numbness, pain, weakness, and poor circulation; and amputations. You will also have more difficulty recovering from surgery.

After you quit smoking, you will have better control over your blood sugar levels. When you quit, you will be less likely to have heart or kidney disease, blindness, or amputations.



Cancer

Tobacco smoke contains toxic chemicals that can damage your DNA and lead to cancer. *Nearly one-third of all cancer deaths are directly linked to smoking.* Continuing to smoke weakens the cancer-fighting systems of your body. It can also interfere with your cancer treatment.

Fertility and Pregnancy

Smoking reduces a woman's chance of getting pregnant and damages DNA in sperm. Damage to sperm could decrease fertility and lead to miscarriage or birth defects. Women who smoke during pregnancy have a higher risk for pregnancy complications, delivering their babies early, and stillbirth. Their babies are more likely to have low birth weight or to die from sudden infant death syndrome, or SIDS. Tobacco smoke also damages the tissues of your unborn baby's growing brain and lungs and could interfere with the growth of the placenta, the organ that feeds the baby in the womb. This could lead to miscarriage, premature delivery, or low birth weight.

Men and women who are planning to have children should not smoke. Pregnant women should avoid exposure to secondhand smoke.

Resources for Quitting

- Call 1-800-QUIT-NOW
- Nicotine replacement or prescription drugs (www.fda.gov/ForConsumers/ConsumerUpdates/ucm198176.htm)
- www.smokefree.gov
- www.women.smokefree.gov

Most people find a combination of resources works best. Many people do not quit on their first attempt. Many smokers need several tries to successfully quit. But the benefits are well worth it. Keep trying.

