

QuitWorks-RI Generic Tobacco Screening and Referral Policy

In-Patient Process

Hospitalized patients are temporarily in a smoke-free environment and may be more motivated given their condition, particularly if they are informed that smoking hinders bone/wound healing and exacerbates conditions.

1. Upon admission, screen each patient, thirteen years of age or older, for nicotine use disorder.
2. Advise patient to quit and offer cessation counseling and pharmaceutical support (nicotine replacement therapy or cessation medications) as deemed appropriate by the provider. Cessation counseling will include, but not be limited to, referral to QuitWorks-RI.
3. **QuitWorks Referral:**
 - a. Get patient's permission to refer.
 - b. Fax referral form to QuitWorks-RI.
 - c. Include the name and contact information for the patient's primary care provider name on the referral form to enable follow-up report to be sent.
4. During the hospital stay, monitor and document patient's readiness level and quit status.
5. If the patient was not referred to QuitWorks-RI during the hospital stay, do so at discharge as appropriate.

Out-Patient Process

Physician recommendation to quit significantly improves quit rates. Besides being good for patient care, documenting tobacco screening and counseling is also part of many current pay-for-performance programs.

1. Ask patient about nicotine use. If actively using nicotine, advise patient to quit. Document responses.
2. Assess readiness level/willingness to engage in cessation therapies.
3. Recommend Nicotine Replacement Therapy or cessation medication, as appropriate.
4. **QuitWorks Referral:**
 - a. Get patient's permission to refer.
 - b. Fax referral form to QuitWorks-RI.
5. Document patient status reports received from QuitWorks-RI in patient record and address at next office visit. Monitor readiness level and quit status at each visit and through feedback reports from QuitWorks-RI.
6. If patient relapses, re-evaluate and re-refer to QuitWorks-RI when appropriate.