

BEST PRACTICES & QUANTIFIERS FOR SENTINEL CONDITION: TOBACCO PREVENTION AND CESSATION FOR ADOLESCENTS

1. IDENTIFY RISK (see attachment)

NOT A PROBLEM – no tobacco or has tried tobacco once or twice

Action – positive reinforcement of tobacco abstinence

Strategy – promote self-esteem, encourage positive parental communication and support

MINOR PROBLEM – used tobacco more than one or two times

Action – strongly urge to quit

Strategy – discuss healthy alternative behaviors, praise current abstinence

MAJOR PROBLEM – smokes on a weekly or daily basis

Action – strongly urge to quit

Strategy – give clear, strong, personalized advice about why quitting is important

2. DETERMINE WILLINGNESS TO QUIT (see attachment)

If YES – use the “5 A’s” for brief intervention

ASK – systematically identify all tobacco users at every visit. (see stamp)

ADVISE – strongly urge all tobacco users to quit

ASSESS – determine willingness to make a quit attempt

ASSIST – aid the student in quitting

ARRANGE – schedule follow-up

AND

Assist in developing a quit plan

Set a quit date

Remove tobacco products from environment

Anticipate nicotine withdrawal symptoms

Request support and understanding from family and friends

If NO – promote motivation to quit by using the “5 R’s” for brief intervention

RELEVANCE – encourage the patient to indicate why quitting is personally relevant

RISKS – ask the patient to identify potential negative consequences of tobacco use

REWARDS – ask the patient to identify potential benefits of stopping tobacco

ROADBLOCKS – ask the patient to identify barriers or impediments to quitting

REPETITION – the motivational intervention should be repeated every time an unmotivated patient visits the clinic setting

3. PHARMACOTHERAPY

Nicotine replacement therapy is not recommended for young adolescents. For older adolescents who are physiologically addicted to nicotine and who are motivated to quit, clinicians can consider nicotine replacement therapy as they would for adults.

4. RECOMMENDED RESOURCES

CLINICAL GUIDELINES:

- ◆ Institute for Clinical Systems Improvement (ICSI), *Health Care Guideline: Tobacco Use Prevention and Cessation for Infants, Children and Adolescents*, 2001.
- ◆ United States Dept of Health & Human Services, Public Health Service, *Treating Tobacco Use and Dependence*.
- ◆ Illinois Academy of Family Physicians and the Illinois Chapter of the American Academy of Pediatrics, *Adolescent Tobacco Use – Prevention and Cessation Strategies for Primary Care Providers, Consensus from an Expert Panel*.

CLINICAL PROTOCOL:

- ◆ Proviso East, *Tobacco Cessation Flow Sheet and Plan*.
- ◆ SMOKING CESSATION PROGRAM: *American Lung Association, Not On Tobacco (N-O-T) Program, 2001*.