

Developing a Successful System-Wide Tobacco Cessation Program—Clinicians

Clinicians

Physicians, pharmacists, nurses, physician's assistants, and other professions working with patients who use tobacco.

Clinicians should identify tobacco users at each visit and intervene with those individuals who are willing to quit (go to [Five Major Steps to Intervention \[The "5 A's"\]](#)). Tobacco users willing to make a quit attempt should receive both counseling and pharmacotherapy, except in the presence of special circumstances.

"In my view, a doctor isn't providing an appropriate standard of care for his or her patients if he or she doesn't ask two key questions —'Do you smoke?' and 'Do you want to quit?'—and then work with that individual to make it happen."

—Michael C. Fiore, MD, M.P.H., Director
Center for Tobacco Research and Intervention
University of Wisconsin Medical School

For patients not willing to make a quit attempt now, clinicians should motivate the patient to consider quitting (go to [Patients Not Ready To Make a Quit Attempt Now \[The "5 R's"\]](#)).

Because of the chronic nature of tobacco dependence, the guideline offers clinicians information on how to prevent relapse, especially in the first 3 months after cessation. All tobacco users have the potential to successfully quit, and every clinician should commit to delivering treatment that can help.

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