

PATIENT COMMUNICATION

Starting a conversation about tobacco use can sometimes be difficult or may leave you feeling discouraged by patient response, but remember, as a healthcare provider you have the unique opportunity to influence patient behavior for the better. You can advocate for healthy behaviors, advise patients to quit smoking, support patients as they attempt to quit, and refer patients to medical and community resources that may help them. The Public Health Services' 2008 Clinical Practice Guideline recommends using the 5 A's model (Fiore et al., 2008).

The 5 A's Model for Brief Tobacco-Use Treatment in Healthcare

Ask	Implement a system to ensure that every patient's tobacco-use status (i.e., current, former, or never) is identified and documented at every visit.
Advise	Provide each patient who uses tobacco with a clear, strong, and personalized recommendation to quit.
Assess	Determine the patient's willingness to make a quit attempt at this time (e.g., within the next 30 days).
Assist	Help the patient create a quit plan; provide brief practical counseling (problem solving and skills training), intra-treatment social support, and supplementary patient education materials as appropriate; and offer medication unless contraindicated. Provide or refer to more intensive treatment if the patient is interested. For patients not ready to make a quit attempt, provide brief counseling using the 5R's, which is designed to promote the motivation to quit, as well as motivational interviewing techniques. (See p. 9)
Arrange	Schedule follow-up contact with the patient (either in person or by telephone), preferably within the first week after the quit date, and provide or refer to more intensive treatment if tobacco use has occurred after the quit date. This follow-up can also be done through the Illinois Tobacco Quitline (1-866-QUIT-YES).

IF YOU HAVE LESS THAN 3 MINUTES

If you have less than 3 minutes to counsel a patient, use this procedure based on the 5 A's model:

Ask every patient if they use tobacco.

“Have you used tobacco in the past 30 days?”

If no: “Congratulations, quitting tobacco is one of the best things you can do for your health.”

If yes:



Advice patients to quit.

“Quitting tobacco is one of the best things you can do for your health. I strongly encourage you to quit.”



Refer patients to a resource for additional support.

Ready to Quit

Provide direct referral to a support resource that will complete the “Assess, Assist and Arrange” steps, e.g., the Illinois Tobacco Quitline.

“Congratulations on your decision to quit tobacco. This is a resource that I recommend. They will provide you with support, help you create a quit plan, and help you overcome urges.”

Not Ready to Quit

Provide self-help materials and let patients know you are available for future support.

“When you are ready to quit, I am here to support you and have resources that can assist you.”

Chart adapted from: Systems Training and Outreach Program. *2As + R Tobacco Intervention Pocket Card*. Arkansas Department of Health. Retrieved from <http://tinyurl.com/c7z272d> Used with permission.