

Document Title:	Smoking Cessation: 5 A's of tobacco control Project 3.b.i
Approving Committee:	Cardiovascular Committee (Informational only)
Approval Date:	NA
Document Objective/Summary:	This document serves to outline general responsibilities of providers in the adoption of 5 A's protocols.

The PPS recognizes the importance of smoking cessation because smoking is related to:

- cancer almost anywhere in the body (including in the lung, colon, rectum, liver, bladder, pancreas, uterus, and head and neck)
- Type 2 diabetes
- Heart disease and stroke
- Chronic obstructive pulmonary disease (COPD)
- Erectile dysfunction
- Age-related macular degeneration

The Cardiovascular (3.b.i) project requires the integration of the 5 A's for tobacco cessation into the provider standard of clinical care and electronic documentation processes.

The PPS will adopt jointly agreed upon protocols. Participating providers in this project will utilize these 5 A guidelines in the management of tobacco control.

5 A's of Tobacco Cessation	
Ask	Identify and document tobacco use status for all patients
Advise	Urge patients who utilize tobacco to quit
Assess	Determine if the patient is willing to attempt to quit at this time
Assist	If the assessment determines patient is willing to attempt cessation, utilize counseling and pharmacotherapy to aide in process
Arrange	Schedule follow-up contact for patient – ideally within 1 week of quitting

Protocol	
<ul style="list-style-type: none"> • Assessment and Management of people with a tobacco use disorder <ul style="list-style-type: none"> ○ If the screening indicates a tobacco use disorder ○ Implement the 5A Model and use motivational interviewing. ○ Make a referral to: NY State QUIT Line. 1-866-NY-QUITS (1-866-697-8487). 	