

Integrated Primary Care Tobacco Use Cessation Sample CPRS Appointment Progress Note Templates

Appointment 1: *Preparing for the Quit Attempt*

- Date: _____
- Visit Duration:
 - 15 minutes
 - 30 minutes
 - 45 minutes

Patient referred by _____ and seen in a brief, initial consultation for tobacco cessation in Primary Care.

Introduction and Verification Patient Interested in Assistance with Quitting.

- Patient not interested in tobacco cessation at this time: Provided written and verbal patient information on treatment options available. Can be reconnected with Primary Care Behavioral Health Provider for future assistance if needed/desired. *(D/C note)*
- Patient initially ambivalent about changing tobacco use: Reviewed reasons and benefits for quitting, discussed pros and cons of changing behavior, treatment options available, and provided motivational interviewing (MI).
 - *After brief MI intervention, pt. interested in making quit attempt. (Go to next section)*
 - *After brief MI intervention, pt. not interested in making quit attempt:* Provided written and verbal patient information on treatment options available. Encouraged to contact Primary Care Behavioral Health Provider or Primary Care Provider for future assistance if needed/desired. *(D/C note)*
- Patient verified interest in setting a goal to quit: Provided with tobacco cessation brochure.

Assessment of Tobacco Use (what, when, exactly how much, and why)

- Kind of tobacco used: _____
- Amount used: _____
- Frequency of use: _____
- Factors that predispose use were reviewed with patient (affective, social, and environmental triggers/cues): _____

History of Prior Quit Attempts

- Number of prior attempts: _____
- Date of last attempt: _____
- Longest amount of time remained tobacco-free: _____
- Prior therapies/treatments/strategies used:

Stress Management Strategies Assessed

- Patient has strategies
(list): _____
- Patient in need of additional resources for stress management. Will provide at future visit(s).

Developed Plan for Quitting

- Reviewed "Tobacco Cessation: How to Change" handout with patient and set Quit Date
 1. Quit Date: _____
 2. Pt's specific change plan:
 - 1.
 - 2.
 - 3.
- Verbal and written patient education provided on cessation medications (NRT patch, gum, lozenge; Zyban; Chantix/Varenicline)
- Veteran interested in medications (NRT patch, gum, lozenge; Zyban; Chantix/ Varenicline)
 1. Behavioral Health Provider to consult with Primary Care Provider or Pharmacist about medications (NRT patch, gum, lozenge; Zyban; Chantix/Varenicline)
- Veteran interested in Chantix/Varenicline (Following items must be completed)
 1. Are you feeling hopeless about the future?
 - Yes
 - No
 2. Have you ever had a suicide attempt?
 - Yes
 - No
 3. Have you had thoughts about taking your life or harming others in the past 12 months? (If yes ask question 4)
 - Yes
 - No
 4. Do you have a plan to take your life?
 - Yes
 - No

If YES to any question, do not prescribe or recommend varenicline. Complete comprehensive risk assessment. Note that any patient with active suicidality should receive an emergent evaluation. (These 4 items must be documented in progress notes for each varenicline prescription and refill request, every 28 days).

RTC: (On or before the Quit Date)

- Phone Call scheduled for: _____
- Face-to-Face appointment scheduled for: _____

Appointment 2:

- Date: _____
- Type of Contact:
 - Phone Call
 - Face-to-Face appointment
- Visit Duration:
 - 15 minutes
 - 30 minutes
 - 45 minutes

Patient is seen in a brief follow-up consultation for tobacco cessation in Primary Care.

Reviewed benefits of quitting with patient.

Reviewed quit plan with patient using "Tobacco Cessation: How to Change" handout. Patient provided written and verbal education on 4 A's.

- Patient plans to:
 - 1.
 - 2.
 - 3.

Discussed patient's concerns/fears surrounding confidence and motivation to quit.

- Patient identified concerns of:

- Developed specific plan to address concerns, (e.g. stop carrying lighters, drink/ take breaks without using tobacco, social support) including:

Developed and discussed plan for handling patient's urges for tobacco use.

- Patient plans to: _____

Introduced coping/relaxation strategies to patient.

- Reviewed technique for:
 - Diaphragmatic Breathing
 - Progressive Muscle Relaxation
 - Other: _____

- Provided information on cognitive strategies:

- Recommended NRT or other meds for withdrawal/cravings (if not included initially)
 - (NRT patch, gum, lozenge; Zyban; Chantix/Varenicline)

- Veteran interested in Chantix/Varenicline (Following items must be completed)
 1. Are you feeling hopeless about the future?
 - Yes
 - No
 2. Have you ever had a suicide attempt?
 - Yes
 - No
 3. Have you had thoughts about taking your life or harming others in the past 12 months? (If yes ask question 4)
 - Yes
 - No
 4. Do you have a plan to take your life?
 - Yes
 - No

If YES to any question, do not prescribe or recommend varenicline. Complete comprehensive risk assessment. Note that any patient with active suicidality should receive an emergent evaluation. (These 4 items must be documented in progress notes for each varenicline prescription and refill request, every 28 days).

- Other: _____ (increase exercise, call friends, decrease caffeine, etc)

RTC: (approximately 1 week after Quit Date)

- Phone Call scheduled for: _____
- Face-to-Face appointment scheduled for: _____

Appointment 3: Maintenance

- Date: _____
- Type of Contact:
 - Phone Call
 - Face-to-Face appointment
- Visit Duration:
 - 15 minutes
 - 30 minutes
 - 45 minutes

Patient is seen in a brief follow-up consultation for tobacco cessation in Primary Care.

Assessed patient's current tobacco use status

- Patient has remained totally abstinent from tobacco (not even a puff, dip, or chew) for the past 7 days. *(If yes, skip to next section: Maintenance Strategies)*
- Patient has decreased tobacco use and is interested in making continued quit attempts.
 - Current type of tobacco and amount of use: _____ decreased from _____
 - Quit Date: _____
 - Revised quit plan: Patient plans to
 - 1.
 - 2.
- Patient has not remained totally abstinent from tobacco (not even a puff, dip, or chew) for the past 7 days.
 - Date of last tobacco use: _____
- Reported the following as factors that lead to resuming tobacco use *(list)*:

 - Patient is motivated and confident to make another attempt. Reviewed benefits of quitting and developed new quit plan.
 - Quit Date: _____
 - Revised quit plan: Patient plans to
 - 1.
 - 2.
 - 3.
 - Patient is not motivated to make another attempt currently. Discussed pros and cons, provided written and verbal patient information on treatment options. Encouraged to contact Primary Care Behavioral Health Provider or Primary Care Provider for future assistance if needed/desired. *(D/C note)*

Discussed Maintenance Strategies

- Reviewed with patient difference between a slip and relapse. Reinforced patient's prior successes.

Addressed Stress Management Resources

○ Reviewed cognitive and behavioral strategies with patient

○ Taught additional brief coping methods to patient, including (list):

○ Encouraged physical activity and limiting daily caffeine use. Plan:

○ Other: _____

RTC: (approximately 1 month after Quit Date)

○ Phone Call scheduled for: _____

○ Face-to-Face appointment scheduled for: _____

Appointment 4: Relapse Prevention

- Date: _____
- Type of Contact:
 - Phone Call
 - Face-to-Face appointment
- Visit Duration:
 - 15 minutes
 - 30 minutes
 - 45 minutes

Patient is seen in a brief follow-up consultation for tobacco cessation in Primary Care.

Assessed patient's current tobacco use status

- Patient has remained totally abstinent from tobacco (not even a puff, dip, or chew) for the past 7 days. *(If yes, skip to next section: Maintenance Strategies)*
- Patient has decreased tobacco use and is interested in making continued quit attempts.
 - Current type of tobacco and amount of use: _____ decreased from _____
 - Quit Date: _____
 - Revised quit plan: Patient plans to
 - 1.
 - 2.
- Patient has not remained totally abstinent from tobacco (not even a puff, dip, or chew) for the past 7 days.
 - Date of last tobacco use: _____
- Reported the following as factors that lead to resuming tobacco use *(list)*:

 - Patient is motivated and confident to make another attempt. Reviewed benefits of quitting and developed new quit plan.
 - Quit Date: _____
 - Revised quit plan: Patient plans to
 - 1.
 - 2.
 - 3.
 - Patient is not motivated to make another attempt currently. Discussed pros and cons, provided written and verbal patient information on treatment options. Encouraged to contact Primary Care Behavioral Health Provider or Primary Care Provider for future assistance if needed/desired. *(D/C note)*

Discussed patient's positive experiences associated with quitting tobacco use. Reinforced successful methods used to quit, and benefits of "not even a puff". Patient will continue using the following methods (list):

Assessed and resolved problems encountered in quitting tobacco use and/or anticipated threats to abstinence. Potential problems identified include (list):

Plan for long-term success includes (list):

Discussed with patient strategies for managing and preventing relapse, including (list):

Patient discharged as tobacco cessation treatment complete. Patient encouraged to contact Primary Care Behavioral Health Provider or Primary Care Medical Provider in future if needed. Also reminded patient of other resources available such as Quitlines and specialty group program, as outlined in brochure.

Follow-Up/Discharge Note*:

- Date: _____
- Type of Contact:
 - Phone Call
 - Face-to-Face appointment
- Visit Duration:
 - 15 minutes
 - 30 minutes
 - 45 minutes

Patient is seen for last appointment for tobacco cessation in Primary Care.

Patient is:

- Totally abstinent from tobacco use. Treatment goals have been met. Patient is reminded to avoid even a single use of tobacco, and to continue to use coping strategies if urges occur. Also encouraged to contact writer/clinic if additional support is needed in the future.
- Using less tobacco (reported amount: _____) but not ready to pursue complete abstinence at this time. Encouraged to continue reduced amount, and contact writer/clinic should further assistance be desired.
- Not successful in changing tobacco use at this time, and not currently motivated to continue quit efforts, but welcome to re-engage when ready to do so in the future.

**Use the Follow-up/Discharge progress note template following patient's completion of the 4 session protocol or following patient's early termination/discontinuation from treatment.*