

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

Raul Pino, M.D., M.P.H.
Commissioner



Dannel P. Malloy
Governor
Nancy Wyman
Lt. Governor

Community, Family, and Health Equity Section Chronic Disease Programs

May 2016

Dear Respiratory Care Provider:

In Connecticut, 15.4% of adults report smoking cigarettes and over 70% of them want to quit. Helping your patients to become tobacco free is easier with cessation resources offered by our Tobacco Control Program, and we are providing these sample materials to make referrals easier.

The American Association for Respiratory Care (AARC) says they are "an advocate of both tobacco cessation and tobacco prevention programs, as well as taking a strong position against cigarette smoking and the use of tobacco in any form". We share their sentiment and are working towards eliminating tobacco-related morbidity, mortality and disparities among Connecticut residents.

As a respiratory care provider, you understand and experience the devastating effects of tobacco use in your patients. We are asking you to take a proactive approach to help us to eliminate tobacco use by following three simple steps:

1. **Ask** patients about tobacco use at every visit
2. **Advise** every tobacco user to quit
3. **Refer** patients to services

The process is easy: identify tobacco users and advise them to quit. To assist in their quitting attempt, refer them to one of the services below. People are more likely to quit when advised by a health care provider. For patients who are ready to quit, materials are enclosed that will make it easier to get started, depending on which form of intervention they prefer (telephone, face-to-face, or online).

The enclosed Fax Referral Form can be used to refer patients to the Connecticut Quitline, where they will be offered a telephone-based coaching program. The treatment specialists who staff the Quitline assess callers' readiness to quit, help them to establish a quit plan and schedule follow



Phone: (860) 509-8000 • Fax: (860) 509-7184
410 Capitol Avenue, P.O. Box 340308
Hartford, Connecticut 06134-0308
www.ct.gov/dph

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Respiratory Care Providers
June 2016

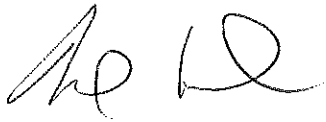
Page 2

up contact(s). Face-to-face cessation programs offer individual and/or group coaching and relapse prevention services. Patients can visit www.ct.gov/dph/tobacco for a list of programs.

BecomeAnEx.org is an online self-directed cessation program that allows users to develop a quit plan, receive information and tips, and blog with other quitters. There are also several smartphone apps available for download including some developed by the Centers for Disease Control and Prevention.

Sample materials are enclosed to share this information with your patients. Should you have any questions or if you would like more information or materials, you can reach the Department's Tobacco Control Program at 860-509 8251 or via email at dphtobacco@ct.gov.

Sincerely,

A handwritten signature in black ink, appearing to read 'Mehul Dalal', with a stylized flourish at the end.

Mehul Dalal MD, MSc, MHS
Chronic Disease Director



CONNECTICUT
QUITLINE
1-800-QUIT-NOW

FOR HEALTHCARE PROVIDERS

'HELP YOUR PATIENTS QUIT' KIT CONTENTS

Left Hand Side:

'Help Your Patients Quit' Intro Card

This 5 ½ x 8 ½ card provides quick information on how to screen, advise and refer patients for tobacco cessation. We understand that healthcare providers have limited time with their patients, so this card summarizes the key things to cover.

'Help Your Patients Quit Tobacco Cessation Pharmacology' Pocket Card

A 5 x7 quad fold with information on tobacco cessation prescription and over the counter medications that are approved by the Food and Drug Administration for treatment of tobacco use.

'What is the Connecticut Quitline?' Fact Sheet

Provides a description of the Quitline, which is a phone-based behavioral tobacco use cessation program that provides one on one coaching and nicotine replacement therapy (NRT) at no cost to Connecticut residents when medically appropriate. The fact sheet details services offered through the program, and answers frequently asked questions providers may have about how the program operates.

'Connecticut Quitline Fax Referral Form' (English & Spanish versions attached to the above fact sheet)

A simple one page form to collect information on the patient who has agreed to utilize the Quitline for tobacco use cessation services. The form also collects healthcare provider contact information. The referral form is faxed directly to the Quitline by the healthcare provider.

'Insurance Coverage for Tobacco Use Dependence Treatments' Fact Sheet

This fact sheet provides information regarding tobacco treatment services covered by Medicare, TriCare, Medicaid and private insurance. It outlines reimbursable services according to the requirements of the insurance plan.

'Tips from Former Smokers' Posters

The Centers for Disease Control and Prevention's national campaign has been very helpful in getting tobacco users to quit. Posters are enclosed for you to use as you wish in your offices.

Right Hand Side:

'Quitting Tobacco' Business Cards

Lists available resources for getting help with quitting on a small card that can be ordered in packs of 50 to easily distribute to your patients.

'Quitting' Tear off Notepad (sample sheet)

Sample sheet of a tear off notepad, which comes in sheets of 50 per pad. Tips and benefits of quitting are detailed. You can order these pads by completing and faxing the 'Order Form for Cessation Materials' to the Tobacco Control Program.

'Staying Tobacco Free' Informational Sheet

This sheet offers encouragement and celebration to those who have quit using tobacco products. Listed are real world tips on how to stay tobacco free, avoiding relapse triggers and coping strategies when triggers arise.

'Order Form for Cessation Materials'

A form that can be faxed to the Tobacco Control Program to order materials included in the packet at no charge. Some of the materials are available in multiple languages.



Help Your Patients Quit



- Helping your patients to become tobacco free is easier with the cessation programs we have available in Connecticut.
- Screening all patients for tobacco use, advising them to quit, and referring them to the services that are available free of charge may help to reduce the enormous public health burden of tobacco use.
- Tell them that quitting is the most important step they can take to improve their health.

Three steps make it easy:

ASK: about tobacco use at every visit

ADVISE: all tobacco users to quit: "Quitting is the most important thing you can do for your health"

REFER: them to one of the services that is available to all Connecticut residents. These services are listed on the sheets that we have given you to hand out.

- Encourage them to try, and ask at their next visit how the quitting process is working.
- Even a small amount of encouragement from a health care provider can increase their chance of quitting by **5% to 10%** a year!

For more information:
www.ct.gov/dph/tobacco



Help Your Patients Quit

Tobacco Cessation Pharmacology

PRODUCTS	DOSAGE	DURATION*	PRECAUTIONS	ADVERSE EFFECTS	PATIENT EDUCATION
OTC					
Nicotine Patch 21 mg 14 mg 7 mg	One patch per day. >10cpd: 21mg 4 weeks. 14 mg 2 weeks ≤10cpd: 14 mg 4 weeks 7 mg 2 weeks	8 - 12 weeks	- Do not use if Pt has severe eczema or psoriasis. - Caution within 2 weeks of MI.	- Local skin reaction - Insomnia	- Apply each day to clean, dry, hairless skin. - Focal rash is common: Rotate site daily.
Nicotine Gum 2 mg 4 mg	1st cigarette ≤ 30 mins after waking: 4 mg 1st cigarette > 30 mins after waking: 2 mg 1 piece every 1 to 2 hours	12 weeks	- Caution with dentures. - Do not eat or drink 15 minutes before or during use. - Limit 24 in 24 hours.	- Mouth soreness - Stomach ache - Hiccups	- DO NOT CHEW LIKE ORDINARY GUM. - Alternate chewing and “parking” between cheek and gum (chew until mouth tingles then park for 1 minute, continue for 30 minutes). - Nicotine absorbed across buccal mucosa. - Avoid food and acidic drinks before and during use.
Nicotine Lozenge 2 mg 4 mg	1st cigarette ≤ 30 mins after waking: 4 mg 1st cigarette > 30 mins after waking: 2 mg 1 piece every 1 to 2 hours	12 weeks	- Do not eat or drink 15 minutes before use. - One lozenge at a time. - Limit to 20 in 24 hrs.	- Heartburn - Local irritation of mouth and throat. - Coughing - Hiccups	- DO NOT BITE, CHEW OR SWALLOW. - Dissolve in mouth slowly. - Each lozenge takes 20-30 minutes to dissolve. Mini lozenges may be preferable since they dissolve in less time. - Avoid food and acidic drinks before and during use.
PRECAUTIONS					
Pregnant women	Behavioral strategies should be the first line of treatment. Only after this should pharmacological therapies be carefully considered for patients smoking more than 20 cigarettes a day.				
Adolescents	Behavioral strategies and interventions have been found to be most effective. NRTs and Rx medications have not been found to be effective in adolescents. FDA does not approve the use of NRT in patients under the age of 18.				

*Duration may be longer depending on patient needs.

Hypnosis and acupuncture are forms of treatment but they have not been determined to be effective for tobacco cessation.

PRODUCTS	DOSAGE	DURATION	PRECAUTIONS	ADVERSE EFFECTS	PATIENT EDUCATION
Rx					
Nicotine Inhaler Nicotrol Inhaler®	6-16 cartridges/day Each cartridge = 2 cigs Use 1 cartridge every 1-2 hours	6 months; taper	Reactive airway disease	- Mouth and throat irritation - Cough	- Patient is not to puff like a cigarette. - Gentle puffing recommended. - Absorption via the buccal mucosa. - Avoid food and acidic drinks before and during use.
Nicotine Nasal Spray Nicotrol NS®	1-2 sprays each nostril/hr 8 to 40 doses/day	3-6 months; taper	Not for patients with asthma	- Nasal irritation - Sneezing - Cough - Watery eyes	- Instruct patient to tilt head back and spray. - Tolerance to local adverse effects develops 1st week after use.
Bupropion SR150 Zyban® or Wellbutrin®	Start 1-2 weeks before quit date. Days 1-3: 150 mg each morning Days 4-end: 150 mg BID.	2-6 months	- Contraindications: Seizure disorder - Current use of MAO inhibitor - Eating disorder - Alcohol dependence - Head trauma	- Insomnia - Dry mouth - Anxiety	- Take 2nd pill early evening to reduce insomnia. - Never double dose if you miss a pill.
Varenicline Chantix®	Start 1 week before quit date. .5mg/d for 3 days then .5mg BID for next 4 days After first 7 days 1 mg/BID	3-6 months	- Persons with kidney problems require dose adjustment - Serious psychiatric illness	- Nausea - Insomnia - Abnormal dreams	- Take after eating and with water (full glass). - Never double dose. Take missed dose as soon as remembered. If close to next dose wait and take at regular dose time. - Nausea is usually transient. If nausea persists dose reduction is recommended.

Combining cessation counseling with medication can significantly increase abstinence rates.

CT Cessation Counseling Options

- CT Quitline- 1-800-QUIT NOW, 1-855-DEJELO YA, for Spanish or www.quitnow.net/connecticut
- Group & Individual Counseling- for list of programs go to www.ct.gov/DPH/Tobacco
- Online help- www.BecomeAnEx.org
- Mobile Phone Apps- Quit Now, download from smokefree.gov

* CT Medicaid covers OTC and Rx cessation medications and individual counseling. There is no limit on duration for medication coverage.

* Medicare covers a total of 8 individual tobacco cessation counseling sessions in a 12m period.

OTC medications are not covered.

Rx smoking cessation medications are covered via Medicare Part D.

Use of medications in combination has been found to be effective. Effective combinations: patch and another NRT; patch and Bupropion





CONNECTICUT
QUITLINE
1-800-QUIT-NOW

FOR HEALTHCARE PROVIDERS

What is the Connecticut Quitline?

The Connecticut Quitline is a toll-free telephone-based tobacco use cessation counseling program funded by the Connecticut Department of Public Health. Services are provided by Alere Wellbeing.

Studies confirm that phone-based behavioral counseling greatly increases quit rates compared to the use of pharmacotherapy alone. Trained tobacco treatment specialists work one-on-one with callers to develop a personalized Quit Plan and provide them with active self-management tools to make the psychological and behavioral changes necessary to quit for life.

What services are offered?

Your patients can choose to enroll in the one-call, the multiple call, or the web-based program.

The one-call program includes:

One call from a Quit Coach who will:

- o Talk about ways to quit, discuss tobacco use triggers and strategies to assist with those triggers;
- o Discuss medications and make recommendations on the type, dose, and duration (if appropriate);
- o Provide a Quit Guide designed to help actively self-manage tobacco use dependence;
- o Make referrals to a local in-person cessation program if requested.

The multiple call program includes:

Five calls from a Quit Coach who will:

- o Ask about triggers and discuss strategies for coping with these triggers without using tobacco;
- o Develop an individualized quit plan;
- o Discuss medications and make recommendations on the type, dose and duration (if appropriate),
- o If eligible, provide a starter pack of nicotine patches, gum or lozenges;
- o Provide a Quit Guide designed to help actively self-manage tobacco dependence;
- o Provide support throughout the cessation treatment;
- o Make a referral to an in-person cessation program if requested.

The web-based program includes:

Access to a self-guided, self-paced web cessation program that offers:

- o Worksheets and web pages that discuss triggers, strategies for coping with these triggers without using tobacco and tips to quit,
- o Assistance with developing a quit plan and working through the plan;
- o Discussion of medications and, if eligible, a telephone call from a quit coach to discuss their dosage in order to receive a starter pack of nicotine patches, gum or lozenges.

Patients may switch to telephone counseling or the web program at any time during their treatment.

Why Refer Patients to the Quitline?

Quitlines are based on solid scientific research, and their quit rates are documented in numerous scientific publications. The Connecticut Quitline is effective because it addresses all three clinical aspects of tobacco dependence: physical, psychological, and behavioral.





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FOR HEALTHCARE PROVIDERS

Who is eligible for the Connecticut Quitline?

All residents of Connecticut are eligible to enroll in the Connecticut Quitline free of charge.

Is medication available through the Connecticut Quitline?

Medication may be available through the Connecticut Quitline as funding remains available. As of October 2014, the Quitline is providing Nicotine Replacement Therapy (patches, gum and lozenges) to participants who enroll in the multiple-call and web programs. Tobacco treatment specialists are available to help participants determine what medication will best meet their needs.

What if a participant quits and then starts using tobacco again?

The Connecticut Quitline was designed to support participants through all phases of quitting including relapse. Once enrolled, participants have toll-free access to the tobacco treatment specialists for the duration of the program. They can choose to re-enroll in the program as many times as they need in order to become tobacco-free.

If I have patients who use tobacco, I prescribe bupropion SR or varenicline. Why isn't that enough?

Nicotine replacement therapy (NRT), varenicline (Chantix®), and the antidepressant bupropion SR have been proven to be effective at increasing cessation rates for moderate to heavy smokers when combined with counseling. However, the usefulness of these products is not optimal when they stand alone. Studies indicate that the use of over-the-counter NRT and other cessation pharmacotherapies combined with behavioral counseling is more effective on cessation rates than using either the medications or counseling alone.¹

The tobacco treatment specialists aren't medically trained. How do they know whether bupropion SR or NRT are contraindicated?

The tobacco treatment specialists are degreed professionals with a wide-range of educational backgrounds including psychology, sociology, community health, counseling and social work. Each coach receives more than 240 hours of initial training, provided by expert cessation training staff. Topics covered include all phases of nicotine dependence, assessing readiness to quit tobacco, assessment for the use of nicotine replacement therapy and other medications, counseling techniques, proven quitting strategies and customer service skills.

The training protocol has been developed based on tobacco cessation science, and there is medical staff on site to oversee the pharmacotherapy aspect of the interventions. All coaches receive comprehensive training in the use of motivational interviewing, brief solution-focused therapy techniques, and cognitive behavioral approaches to treating tobacco use dependence.

Any patients that use tobacco may be referred to the Connecticut Quitline by fax (form attached) or electronic referral, register online at quitnow.net/connecticut or they may call one of the following numbers: 1-800-QUIT-NOW (English); 1-855-DEJELO-YA (Spanish); 1-800-838-8917 (Chinese), 1-800-556-5564 (Korean) and 1-800-778-8440 (Vietnamese).

For information on setting up your system for electronic referrals, contact the DPH Tobacco Program at 860-509-8251.

1. U.S. Department of Health and Human Services, Public Health Service. Treating Tobacco Use and Dependence: 2008 Update. Clinical Practice Guideline; p.101.

The Quitline is funded by the Connecticut Department of Public Health with funding from the Centers for Disease Control and Prevention and the Connecticut Tobacco and Health Trust Fund.





CONNECTICUT QUITLINE FAX REFERRAL FORM

Fax Number: 1-800-483-3114

FAX SENT DATE: ____/____/____

Provider Information:

CLINIC NAME

CLINIC ZIP CODE

HEALTH CARE PROVIDER

CONTACT NAME

FAX NUMBER

PHONE NUMBER

I AM A HIPAA COVERED ENTITY (PLEASE CHECK ONE)

YES ☐

NO ☐

DON'T KNOW ☐

Patient Information:

PATIENT NAME

DATE OF BIRTH

GENDER

☐

MALE

☐

FEMALE

ADDRESS

CITY

ZIP CODE

PRIMARY PHONE NUMBER

HM

☐

WK

☐

CELL

☐

SECONDARY PHONE NUMBER

HM

☐

WK

☐

CELL

☐

LANGUAGE PREFERENCE (PLEASE CHECK ONE)

ENGLISH ☐

SPANISH ☐

OTHER

By participating in this program I understand that outcome information may be shared with my provider for purposes of my treatment.

____ I am ready to quit tobacco and request the Connecticut Quitline contact me to help me with my quit plan.
(Consent via phone)

____ I **DO NOT** give my permission to the Connecticut Quitline to leave a message when contacting me.
(Consent via phone) **** By not initialing, you are giving your permission for the quitline to leave a message.**

PATIENT SIGNATURE: **ON FILE AND OBTAINED BY:** _____ DATE: ____/____/____

The Connecticut Quitline will call you. Please check the BEST 3-hour time frame for them to reach you. **NOTE: The Quitline is open 7 days a week; call attempts over a weekend may be made at times other than during this 3-hour time frame.**

☐

6AM – 9AM

☐

9AM – 12PM

☐

12PM – 3PM

☐

3PM – 6PM

☐

6PM – 9PM

WITHIN THIS 3-HOUR TIME FRAME, PLEASE CONTACT ME AT (CHECK ONE):

☐

Primary #

☐

Secondary #

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CONNECTICUT
QUITLINE
1-800-QUIT-NOW

CONNECTICUT QUITLINE FAX REFERRAL FORM

Fax Number: 1-800-483-3114

FECHA DE ENVÍO: ____/____/____

Información del proveedor de servicios médicos:

NOMBRE DE LA CLÍNICA

CÓDIGO POSTAL

NOMBRE DEL PROVEEDOR

NOMBRE DEL CONTACTO

FAX

TELÉFONO

SOY UNA ENTIDAD CUBIERTA POR HIPPA (POR FAVOR MARQUE UNA)

SÍ ☐

NO ☐

NO SÉ ☐

Información del paciente:

NOMBRE COMPLETO DEL PACIENTE

FECHA DE NACIMIENTO

GÉNERO

☐ M

☐ F

DIRECCIÓN

CIUDAD

CÓDIGO POSTAL

NÚMERO DE TELEFONO PRIMARIO

CASA TRAB CEL

☐ ☐ ☐

NÚMERO DE TELEFONO SECUDNARIO

CASA TRAB CEL

☐ ☐ ☐

LANGUAGE DE PREFERENCIA (POR FAVOR MARQUE UNO)

INGLÉS ☐

ESPAÑOL ☐

OTRO

Al participar en este programa, entiendo que los resultados de mi información tal vez sean compartidos con mi proveedor de salud para ayudar con mi tratamiento.

(Iniciales) Estoy listo para dejar el tabaco y solocito que la línea Quitline de Connecticut me contacte para ayudarme con mi plan.

(Iniciales) Yo **NO** autorizo a línea Quitline de Connecticut a dejar un mensaje al contactarme.
**** Por no poner sus iniciales, usted está dando su permiso para la línea dejar un mensaje.**

FIRMA DEL PARTICIPANTE: _____ FECHA: ____/____/____

Connecticut Quitline le llamará. Por favor marque el mejor horario para llamarle. **NOTA: La línea para dejar el tabaco trabaja los 7 días de la semana. Las llamadas que se realizen en el Fin de semana podrían estar fuera del horario que usted marcó.**

☐ 7AM – 9AM

☐ 9AM – 12PM

☐ 12PM – 3PM

☐ 3PM – 6PM

☐ 6PM – 9PM

FAVOR DE LLAMARME DENTRO DEL HORARIO MARCADO AL (MARQUE UNO): ☐ # Primario ☐ # Secundario

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Insurance Coverage for Tobacco Use Dependence Treatments

CT Medicaid covers:

- Individual tobacco use cessation counseling
- Over the counter nicotine replacement therapies (patch, gum and lozenge) with a prescription from a provider, prescription nicotine replacement therapies (nasal spray and inhaler) and prescription cessation medications (e.g. Varenicline, Bupropion)
- Group Cessation counseling is covered for behavioral health care providers, Federally Qualified Health Centers, medical clinics, hospital outpatient clinics and physicians/physician groups
- Reimbursement for individual cessation counseling is also available through dental care providers
- Counseling must be provided by a Medicaid-approved provider
- **For billing procedure and diagnosis coding go to <http://www.ctdssmap.com/>, see Provider Bulletins 2011-94, 2014-71 and 2015-37**

Medicare covers:

- Individual cessation counseling for two quit attempts per 12 month period- each attempt equals four counseling sessions
- Counseling must be conducted by a Medicare-approved provider
- No copay or deductible for persons not diagnosed with tobacco-related disease or condition
- For persons with a tobacco-related diagnoses, Medicare will pay 80% of counseling once deductible is met
- Medicare Part D covers prescription cessation medications
- Over the counter nicotine replacement therapies are not covered

TRICARE for Veterans and Active Military not covered by Medicare covers:

- Individual and group counseling for two quit attempts each year- each quit attempt equals 18 counseling sessions
- Counseling must be conducted by a TRICARE-authorized provider
- Over the counter nicotine replacement therapies and prescription cessation medications are covered with a prescription from a TRICARE-authorized provider
- Counseling and medications are provided at no cost

Private Insurance Plans covers:

The Affordable Care Act (ACA) requires most plans to cover tobacco use cessation benefits as a preventive service. Benefits **should** include:

- Screening for tobacco use
- Individual and group cessation counseling for two quit attempts per year (four counseling sessions of at least ten minutes each)
- All US Food and Drug Administration-approved tobacco cessation medications (both over the counter and prescription nicotine replacement therapies and prescription cessation medications) for 90 days per quit attempt with a prescription from a health care provider
- No cost sharing or prior authorization for these treatments
- Patient should contact their insurance provider regarding the specific benefits that are available under their plan

A TIP FROM A
**FORMER
SMOKER**

AFTER YOU HAVE A LUNG REMOVED, TAKE SHORT BREATHS.

Annette, Age 57, Diagnosed at 52
New York

Smoking causes immediate damage to your body.
For Annette, it caused lung cancer. You can quit.
For free help, call **1-800-QUIT-NOW**.



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention
www.smokefree.gov

UN CONSEJO
— DE UNA —
EXFUMADORA

DESPUÉS DE QUE LE QUITEN UN PULMÓN, EVITE RESPIRAR PROFUNDAMENTE.

Annette, 57 años, Diagnosticada a los 52 años
Nueva York

Fumar le causa daño inmediato a su cuerpo.
A Annette, le causó cáncer de pulmón.
Usted puede dejar de fumar. Para ayuda
gratuita, llame al **1-800-784-8669**.



U.S. Department of
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Centers for Disease
Control and Prevention
espanol.smokefree.gov

A TIP FROM A
**FORMER
SMOKER**

TM



**If you feel attached to your cigarettes,
just wait until you have an oxygen tank.**

Becky, age 54, Ohio

Becky was diagnosed with COPD when she was only 45 years old. She has emphysema, chronic bronchitis and a collapsed lung. Now she's chained to an oxygen tank 24/7. All because she smoked.

You can quit smoking.

**For free help, call
1-800-QUIT-NOW.**



**U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention
[CDC.gov/tips](https://www.cdc.gov/tips)**

#CDCTips



UN CONSEJO
— DE UNA —
EXFUMADORA

TM

**Si te sientes apegada a tus cigarrillos,
solo espera a que tengas que andar
con un tanque de oxígeno.**

Becky, 54 años, Ohio

A Becky le diagnosticaron epoc, cuando tenía tan solo 45 años. Ella tiene enfisema, bronquitis crónica y tuvo un colapso pulmonar. Ahora, está encadenada a un tanque de oxígeno las 24 horas del día. Y todo por fumar.

Usted puede dejar de fumar.

**Para recibir ayuda gratuita, llame al
1-855-DÉJELO-YA.**



**U.S. Department of
Health and Human Services**
Centers for Disease
Control and Prevention
[CDC.gov/consejos](https://www.cdc.gov/consejos)

#CDCConsejos



A TIP FROM A
**FORMER
SMOKER**

**I started
using e-cigarettes
but kept smoking.
Right up until
my lung collapsed.**

Kristy, age 35, Tennessee

Kristy had smoker's cough and severe shortness of breath. She tried using e-cigarettes to cut down on her smoking. She thought cutting down would make her feel better, but it didn't. She kept smoking cigarettes until her lung collapsed.

**Even smoking a few cigarettes
a day is dangerous.**

You can quit smoking.

CALL 1-800-QUIT-NOW.



**U.S. Department of
Health and Human Services**
Centers for Disease
Control and Prevention
CDC.gov/tips

#CDCTips



UN CONSEJO
— DE UNA —
EXFUMADORA

Empecé a usar cigarrillos electrónicos, pero seguí fumando. Hasta que tuve un colapso pulmonar.

Kristy, 35 años, Tennessee

Kristy tuvo tos de fumadora y problemas graves para respirar. Trató de usar cigarrillos electrónicos para reducir la cantidad que fumaba. Pensó que esa reducción la haría sentir mejor, pero no fue así.

Ella siguió fumando cigarrillos hasta que tuvo un colapso pulmonar.

Fumar aunque sean unos pocos cigarrillos es peligroso.

Usted puede dejar de fumar.

LLAME AL 1-855-DÉJELO-YA.



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Centers for Disease
Control and Prevention
CDC.gov/consejos

#CDCConsejos



Quitting Tobacco

*One of the most important steps
you can take to save your life.*

When you're ready - we're here to help.



For more information:
www.ct.gov/dph/tobacco

Resources to Help You Quit

- Talk to your health care provider about programs and medications.
- Call the Connecticut Quitline at 1-800-QUIT NOW or register online at www.quitnow.net/Connecticut for your own quit plan and telephone support.
- Join BecomeAnEx.org for information and to chat with other quitters online.
- Download a quitting app for your smartphone from www.smokefree.gov
- Check the CT Department of Public Health website at www.ct.gov/dph/tobacco for programs nearby.



QUITTING

ONE OF THE MOST IMPORTANT STEPS YOU
CAN TAKE TO SAVE YOUR LIFE.

When you're ready, we're here to help.

**1 out of 2 people who continue to smoke will
die early because of their smoking.**

By Quitting

- You lower your risk of heart disease, stroke, cancers and lung disease. You will breathe easier.
- You lower your family's risk of illness from being exposed to smoke.
- You can save money for the things you really want.
- Your skin and body will look younger.
- You will have less problems with your mouth, that include bad breath and losing your teeth.
- Your children are less likely to use tobacco.

Tips to Help You Quit (even if you tried before)

- There are many reasons to quit. Find yours and write them down to remind you why you are quitting.
- Talk to a health care provider about medications that may help with your quit.
- Find your support system - friends, family, co-workers, CT Quitline, BecomeAnEx.org. Tell them your plans, and ask them to help you.
- Pick a Quit Date and write it down where you will see it often.

More Tips To Help You Quit

- Write down the things that make you want to smoke and what you can do to help prevent these triggers.
- Stress is a big trigger. Learn ways to cope with stress without smoking.
- If you have tried to quit in the past, think about what helped you and what did not.
- Change your routines that involve smoking. For example, if you usually smoke after eating, get up from the table and go for a walk. If you usually smoke with coffee, try tea instead. Avoid places where people are smoking.
- Keep your hands busy. Find something you like to do. Some examples are doodling, playing cards, or playing with paper clips.
- Drink water. This helps to flush the nicotine and other chemicals out of your body.
- In case you slip, don't give up, just try to quit again. It may take a few tries to quit for good.

Resources to Help You Quit

- Talk to your health care provider about programs and medications to help you quit.
- Call the Connecticut Quitline at 1-800-QUIT NOW or 1-855-DEJELO YA or register online at www.quitnow.net/connecticut for help with your quit plan.
- Join BecomeAnEx.org for information about quitting and to blog with other quitters.
- Check the website at www.ct.gov/dph/tobacco for programs in your area.

Scan this code for more information





STAYING TOBACCO FREE

Congratulations on being Tobacco Free!

You are probably seeing some positive changes but you may still have cravings. You may even have the urge to pick up smoking, vaping, or use tobacco again, especially when you are with your friends and family who use tobacco or during times of stress.

Not smoking or using tobacco is one of the best things you can do for your health and your wallet. Stay positive and try to follow the tips below.

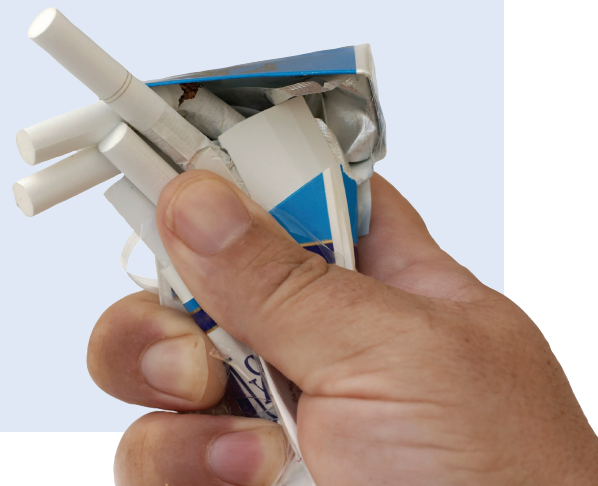


Tips to stay quit

- Keep all tobacco products out of your home and car and ask people not to smoke near you. Move away from smokers until they are done.
- Avoid places where you used to smoke. Spend time at tobacco-free places.
- Keep your hands busy, find something you like to do. Some examples are doodling or drawing, texting, playing cards, playing a hand held game, or reading a book.
- Avoid alcohol, coffee and other drinks that you may associate with smoking.
- Find your support system - friends, family, co-workers, online support, CT Quitline, BecomeAnEX.org, and/or a local cessation program. Ask them for support.
- Find ways to deal with stress and cope without tobacco. Take a walk, call a friend, exercise, chew gum until the urge passes. Most urges will pass within five minutes.
- In case you slip, don't give up, quit again. It may take a few tries to quit for good.

Reasons to stay quit

- ✓ Lower risk of heart disease, stroke, cancers and lung disease.
- ✓ You lower your family's (and your pet's) risk of illness from being exposed to second- and third-hand smoke.
- ✓ Save money for things you really want.
- ✓ Skin and body look younger.
- ✓ Less problems with your mouth including bad breath and losing your teeth.
- ✓ You will be less likely to lose your hair early.
- ✓ You will breathe easier.
- ✓ Your children are less likely to use tobacco.





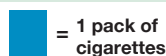
STAYING TOBACCO FREE RESOURCES

There are programs to help you, free of charge:

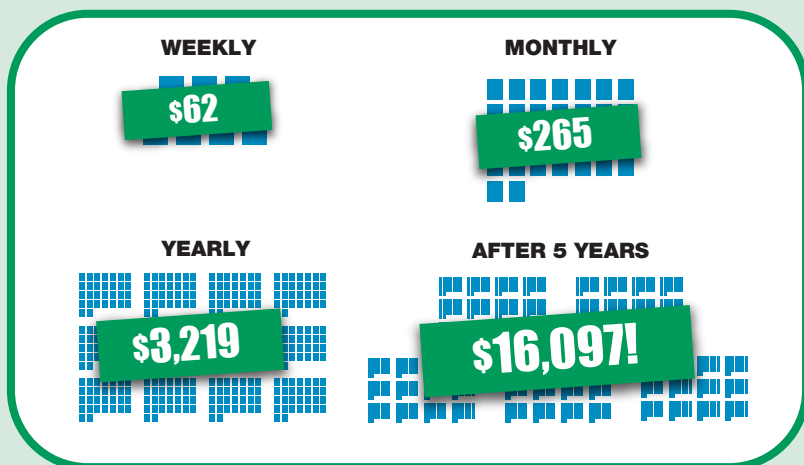
- Talk to your health care provider about medications that may help you to stay quit.
- Call the Connecticut Quitline at 1-800-QUIT-NOW or 1-855-DEJELO-YA (for Spanish) or register online at www.quitnow.net/connecticut for help with your quit plan. This will include information and telephone support.
- Join **BecomeAnEX.org** for more information and to blog with others who have quit.
- Check the Connecticut Department of Public Health website at www.ct.gov/dph/tobacco for programs in your area.

\$\$\$\$ Money Saved by Quitting \$\$\$\$

Average cost of a pack of cigarettes = \$8.82



A pack-a-day smoker's savings:



What will YOU do with the savings?

Here is what some Connecticut quitters did:

"After quitting for a month, I had enough money to fix my washing machine."

"I saved the money I would have spent on cigarettes for one year and then treated myself to a new car to celebrate."

Your body begins to heal as soon as you quit.

Within minutes of smoking the last cigarette your body begins to change and heal.

Within 20 minutes, your heart rate calms down.

Within 8 hours, mucus begins to clear out of your lungs, making it easier to breathe.

Within 48 hours, things smell and taste better.

Within 3 months, blood circulation improves, and your body is better able to fight infection.

Within 9 months, you have less sinus congestion, wheezing, and shortness of breath.

After 1 year, your risk of dying from a heart attack is cut in half.

Order Form for Cessation Materials

TobRTMailing2016

QUANTITY																																					
Packs of 25 cards each English Spanish	 Quitting Tobacco <i>One of the most important steps you can take to save your life.</i> When you're ready - we're here to help. For more information: www.ct.gov/dph/tobacco Quitting Tips wallet cards "Quitting Tobacco"																																				
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To reorder, fill out this form and fax to State of Connecticut Department of Public Health at
860-509-7854 or scan and email to **dphtobacco@ct.gov**

SHIP TO:	
Name	
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