



Protect Your Patients from Tobacco



Educational materials provided to you by the
Connecticut Department of Public Health



These materials are provided for your information and use by the Connecticut Department of Public Health, Tobacco Control Program. A reorder sheet is included within the kit. Our program can be reached through 860-509-8251 or via dphtobacco@ct.gov



Protect Your Patients from Tobacco



- Helping your patients to live tobacco free is easier with the programs we have available in Connecticut.
- Screening all patients for tobacco use or exposure to tobacco smoke, advising them to live tobacco free, and referring them to the services that are available free of charge may help to reduce the burden of tobacco use.
- Tell the parent, or any patient that is using tobacco, that quitting is the most important step they can take to improve their health.

Three steps make it easy:

ASK: about tobacco exposure or use at every visit

ADVISE: For those exposed to tobacco smoke: “Keep your child away from secondhand smoke, and don’t allow smoking near your baby/child”

For tobacco users: “Quitting is the most important thing you can do for your health”

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

- Encourage them to try, and ask at their next visit how the changes are going.
- Even a small amount of encouragement from a health care provider increases the chance of quitting by **5% to 10%** a year!

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



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Quitting Tobacco: Let's Keep Talking to Parents

Sophie J. Balk and Ruth A. Etzel

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The online version of this article, along with updated information and services, is located on the World Wide Web at:

<http://pediatrics.aappublications.org/content/early/2014/10/15/peds.2014-2591.citation>

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Quitting Tobacco: Let's Keep Talking to Parents

About 18% of the US adult population smoke cigarettes,¹ a major decline from 1960s rates. Yet astoundingly, more than half of US children have evidence of tobacco smoke exposure.² Children's exposure to second-hand smoke (SHS) comes mainly from the home.² Pediatricians see these children every day and are well aware of health consequences. However, clinicians may wonder whether it is useful to spend limited office time discussing quitting with parents. The study by Winickoff et al³ in this issue of *Pediatrics* reaffirms that counseling parents about quitting tobacco can yield results.

An earlier publication about the Clinical and Community Effort Against Secondhand Smoke Exposure (CEASE) Program showed that CEASE was successfully implemented in pediatric office practices. Intervention practices were given CEASE training and materials, thus changing office systems to provide evidence-based assistance to parents who smoke. In interviews after visits, parents in intervention practices were 12 times more likely to report that pediatricians provided meaningful tobacco control assistance, compared with reports from control practices. "Meaningful assistance" was defined as counseling (eg, discussing stop-smoking strategies) beyond simple advice, prescription of Food and Drug Administration–approved medication, or referral to Quit-lines.⁴ The current work showed sustained gains: 12 months after training ended, significantly more parents from intervention practices reported that their child's pediatrician provided meaningful assistance, compared with parents from control practices.

Swabs were sent to parents who reported quitting and who agreed to test their salivary cotinine. The randomized controlled trial did not find a significant difference in cotinine-confirmed quit rates between intervention and control practices. Parental quit rates in both were similar and surprisingly low (~4% in each group). However, if all participants in intervention and control groups are combined (disregarding whether they received CEASE intervention or not), smokers who reported any assistance had confirmed quit rates almost twice as high as those of smokers who did not receive assistance. This finding emphasizes the importance of pediatricians' advice. Greater amounts of help resulted in higher chances of quitting.

Control group pediatricians were aware of their involvement in a tobacco control study, perhaps resulting in more focus on tobacco. Alternatively, they may previously have become educated about the deleterious effects of tobacco and SHS and about how to promote cessation. Information from the American Academy of Pediatrics, Surgeons General, the Centers for Disease Control and Prevention, residency programs, and other sources may have led to offering productive advice.

Evidence about the effectiveness of clinician-delivered smoking cessation interventions demonstrates that counseling and pharmacotherapy are effective for adults coming to their own physicians. The US Preventive Services Task Force recommends that clinicians ask all

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KEY WORDS

secondhand smoke, smoking cessation, counseling, counseling parents, tobacco

ABBREVIATIONS

CEASE—Clinical and Community Effort Against Secondhand Smoke Exposure

SHS—secondhand smoke

Opinions expressed in these commentaries are those of the author and not necessarily those of the American Academy of Pediatrics or its Committees.

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adults about tobacco use and provide cessation interventions for tobacco users.⁵ This recommendation received an “A” rating, meaning that there is “high certainty that the net benefit is substantial.” Even brief advice, <3 minutes, is beneficial, resulting in behavior change in some people.

The US Public Health Service stated “Cessation counseling delivered in pediatric settings has been shown to be effective in increasing cessation among parents who smoke. Therefore, to protect children from secondhand smoke, clinicians should ask parents about tobacco use and offer them cessation advice and assistance.”⁶ A 2013 Cochrane review of advice (without pharmacotherapy) stated “Simple advice has a small effect on cessation rates. Assuming an unassisted quit rate of 2 to 3%, a brief advice intervention

can increase quitting by a further 1 to 3%.”⁷

This CEASE intervention did not succeed in producing more confirmed quitters in intervention practices, perhaps because more parents in intervention practices were lost to follow-up or because the sample size was too small to detect a difference. For busy clinicians, though, the study’s main take-home point is that giving advice can have positive effects, consistent with previous findings and recommendations.^{5–7}

Tobacco is still the leading preventable cause of morbidity and mortality in the United States, resulting in 480 000 deaths per year.⁸ Prenatal and SHS exposure take huge tolls on children, including asthma exacerbations and deaths from sudden infant death syndrome. It is therefore critically important for pediatricians to continue talking to parents

who smoke and advising them to quit. Even if the effect is small, if clinicians across the country consistently give advice about quitting, there can be a large effect on the population as a whole.

Opportunities begin in the newborn nursery and NICU and continue in outpatient and inpatient settings. Pediatricians also have important roles in preventing youth from trying a first cigarette. Given tobacco’s great toll, we always should ask and advise about tobacco. Every smoker who does not receive advice represents a missed opportunity.⁷ Tobacco awareness and action should become more firmly and routinely fixed in our minds as we provide care to children and families and as we teach residents and other trainees. Pediatricians’ sustained attention to tobacco in daily practice is a key component of ending the tobacco epidemic.

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American Academy of Pediatrics

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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.





**CONNECTICUT
QUITLINE**
1-800-QUIT-NOW

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.



Insurance Coverage for Tobacco Use Dependence Treatments

CT Medicaid covers:

- Individual tobacco use cessation counseling
- Over the counter nicotine replacement therapies with a prescription from a provider and prescription cessation medications (e.g. Varenicline, Bupropion)
- *For your information:*
 - o Group Cessation counseling is covered for behavioral health care providers and hospital outpatient clinics
 - o Reimbursement for individual cessation counseling is also available through dental care providers

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:

The Affordable Care Act (ACA) requires most plans to cover tobacco use cessation benefits. 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)
- Food and Drug Administration-approved tobacco cessation medications (both over the counter 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



**CONNECTICUT
QUITLINE**
1-800-QUIT-NOW
1-855-DEJELLO-YA

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

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

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

PATIENT SIGNATURE: _____ 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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Confidentiality Notice: This facsimile contains confidential information. If you have received this facsimile in error, please notify the sender immediately by telephone and confidentially dispose of the material. **Do not review, disclose, copy, or distribute.**

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

____ 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.
(Iniciales) **** 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

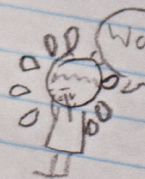
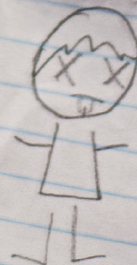
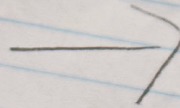
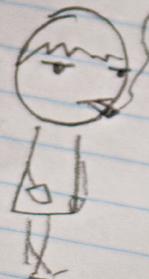
A TIP FROM A
**FORMER
SMOKER**

LET YOUR KIDS INSPIRE YOU TO QUIT.

Beatrice, Quit at age 37
New York

Nick age: 11
Dear Mom, Smoking:
Thank you mom for
I know you can do
hard thing to do but
you, so you are saving
I'm lucky to have parents
and Daddy cause my
parents would probably say
just a kid" but you are the
in the world! :)

Dont Smoke!



There are a lot of reasons to quit smoking.
Don't stop trying until you find yours. Beatrice did it.
You can too. For free help, call **1-800-QUIT-NOW**.



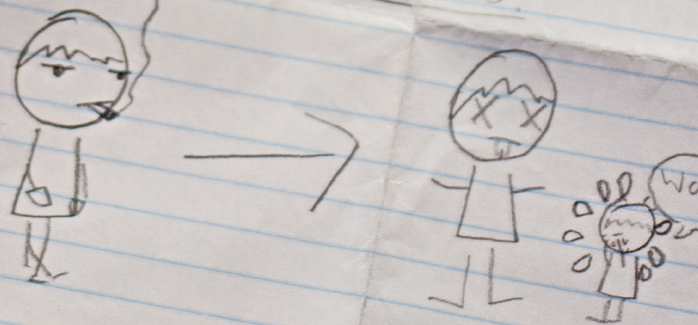
www.quitnow.net/connecticut

UN CONSEJO
— DE UNA —
EXFUMADORA

DEJA QUE TUS HIJOS TE INSPIREN A DEJAR DE FUMAR

Beatrice, dejó de fumar a los 37 años
Nueva York

Nick age: 11
Dear Mom, Smoking:
Thank you mom for
I know you can do
hard thing to do but
you, so you are saving
I'm lucky to have parents
and Daddy cause me, ya
parents would probably say
just a kid" but you are the
in the world! :)
Don't Smoke!



Hay muchas razones para dejar de fumar.
No dejes de intentarlo hasta encontrar la tuya.
Beatrice lo hizo. Tú también puedes. Para ayuda
gratis llame al **1-800-784-8669**

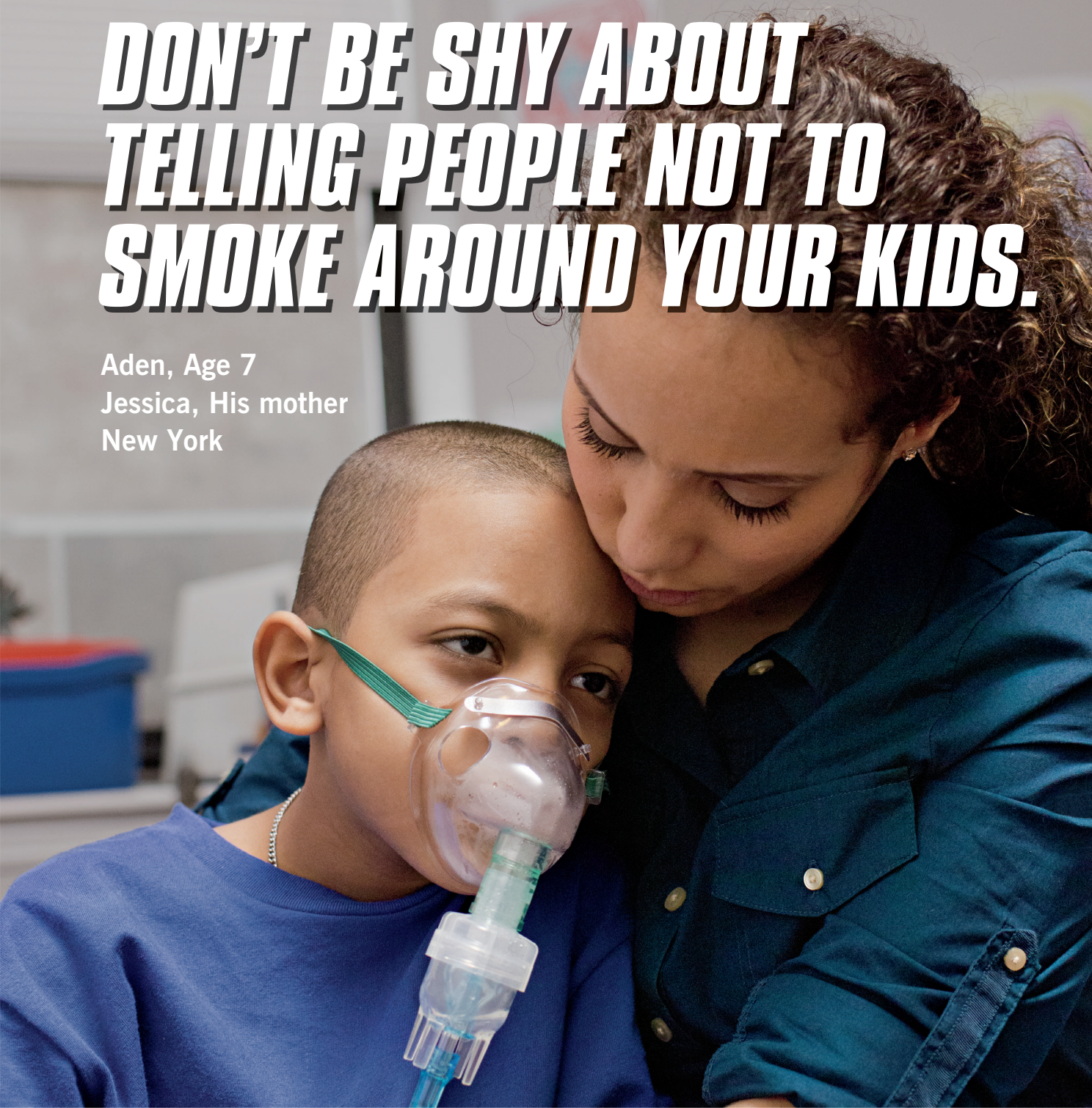


1-800-QUIT-NOW 1-855-DÉJELO-YA
www.quitnow.net/connecticutsp

A TIP ABOUT
SECONDHAND
SMOKE

DON'T BE SHY ABOUT TELLING PEOPLE NOT TO SMOKE AROUND YOUR KIDS.

Aden, Age 7
Jessica, His mother
New York



Half of U.S. kids are exposed to secondhand smoke. For Aden, it triggers his asthma attacks. Keep kids smoke-free. If someone you know wants free help, call **1-800-QUIT-NOW**.



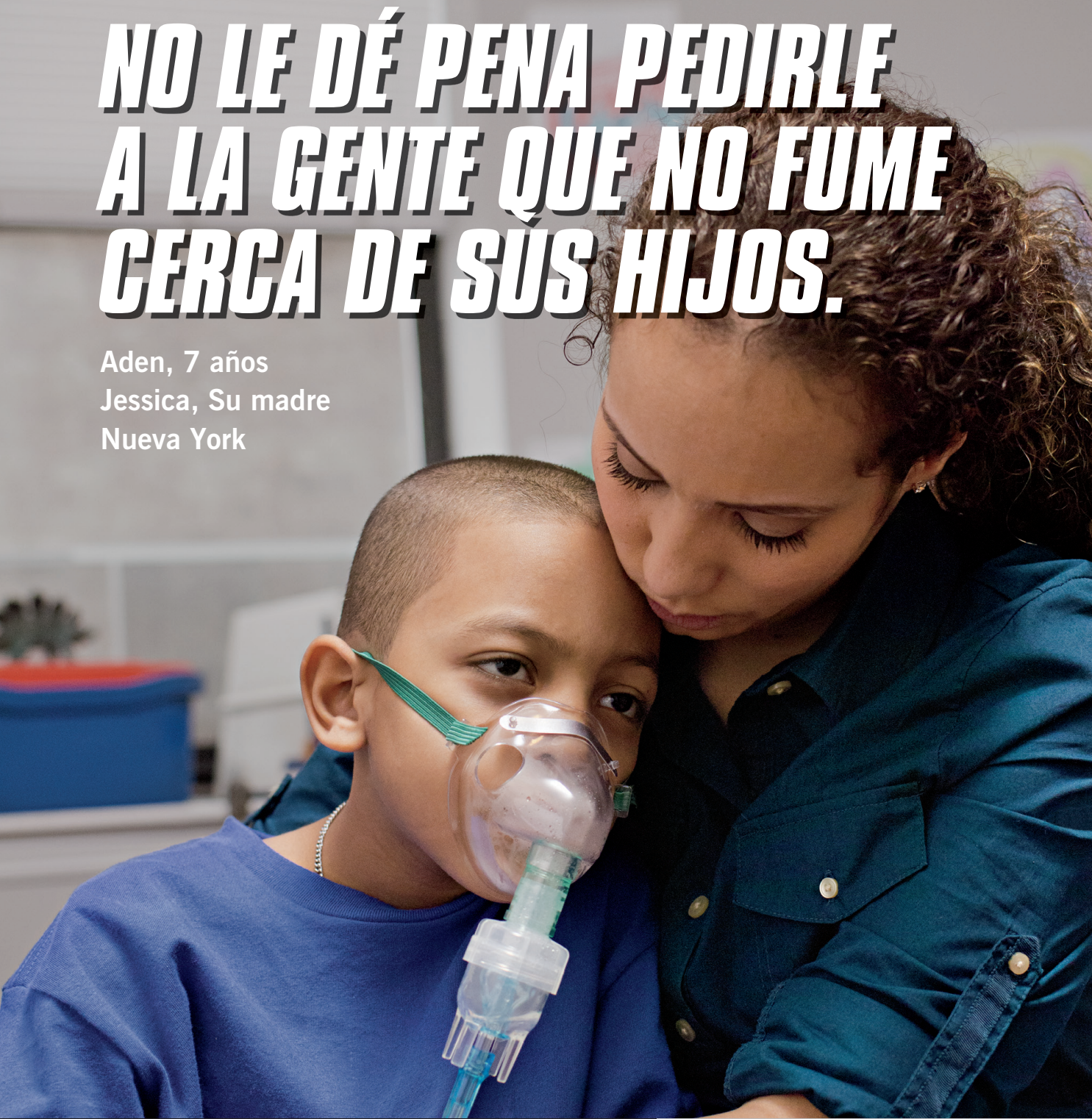
www.quitnow.net/connecticut

UN CONSEJO
SOBRE EL

HUMO DE
SEGUNDA MANO

NO LE DÉ PENA PEDIRLE A LA GENTE QUE NO FUME CERCA DE SUS HIJOS.

Aden, 7 años
Jessica, Su madre
Nueva York



La mitad de los niños en los EE. UU. está expuesta al humo de segunda mano. A Aden, le provoca ataques de asma. Mantenga a los niños alejados del humo. Si conoce a alguien que está interesado en recibir ayuda gratuita para dejar de fumar, llame al **1-800-784-8669**.



1-800-QUIT-NOW 1-855-DÉJELO-YA
www.quitnow.net/connecticutsp

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.



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.

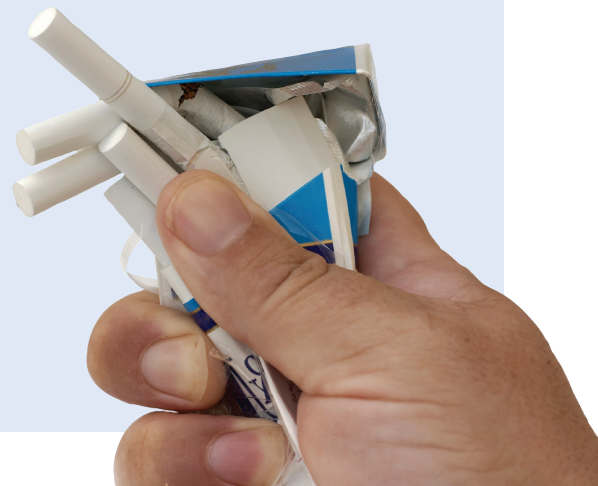


Tips to stay quit

- 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.





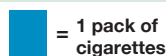
STAYING TOBACCO FREE RESOURCES

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:

WEEKLY

\$62

MONTHLY

\$265

YEARLY

\$3,219

AFTER 5 YEARS

\$16,097!

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.



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



Re-Order Form

QUANTITY		
_____ packs of 25 cards each (English)		Quitting Tips wallet cards "Quitting Tobacco" (English)
_____ packs of 25 cards each (Spanish)		Quitting Tips wallet cards "Quitting Tobacco" (Spanish)
_____ pads of 50 sheets each (English)		Quitting Tips 5 x 8 Pad "Quitting: One of the most important steps you can take to save your life"
_____ packs of 25 sheets each (English)		Quitting Tips 8 1/2 x 11 Sheet "Staying Tobacco Free" for quitters that are having a hard time maintaining their quit

Interested in materials in other languages? Both the "Quitting" sheet and the "Staying Tobacco Free" sheet are available in the languages listed below. Note how many copies, and of which form(s):

_____ Spanish individual flyers: _____ (#) (Title)	
_____ Arabic individual flyers: _____	_____ Khmer individual flyers: _____
_____ Bengali individual flyers: _____	_____ Korean individual flyers: _____
_____ Chinese (Simplified) individual flyers: _____	_____ Laotian individual flyers: _____
_____ Chinese (Traditional) individual flyers: _____	_____ Polish individual flyers: _____
_____ Haitian Creole individual flyers: _____	_____ Portuguese individual flyers: _____
_____ Karen individual flyers: _____	_____ Vietnamese individual flyers: _____

SHIP TO:	
Name	
Practice/Company	
Address	
City/State/Zip Code	

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**