

# Smoking Cessation Epic EHR SmartText Customer Guide

## Background:

This guide will help with the integration of the **clinical content** in a smoking cessation **SmartText** tool in the Epic EHR to address the smoking status of patients.

Please contact your Pfizer Medical Outcomes Specialist (MOS) if you have any questions or would like further clarification on the implementation of this guide.

**Rationale:** Current guidelines recommend that clinicians intervene with smokers by advising them to stop smoking, offering medications when appropriate, unless contraindicated in specific patient populations, and referring them to counseling.<sup>1</sup> Smoking cessation results in short- and long-term health improvements.<sup>2</sup> Quitting smoking reduces the risk and slows the progression of tobacco-related diseases, and even as early as two weeks to three months after quitting, lung function may begin to improve, and coughing, sinus congestion, fatigue, and shortness of breath may decrease<sup>2,3</sup>

**Benefits of using SmartTools:** It provides for standardized data documentation and structured data fields for reporting purposes.

## SmartText Template Example using the 5A Model and Willingness to Quit:

@pat\_name@ is a @pat\_age@ year old @pat\_sex@ and smoking cessation options were discussed.

Allergies: @allergies@

**ASK:** @smoking\_status@. Patient has been smoking @cigarettes/day@ for @lifetime\_years\_smoked@ years. Patient started smoking at {NUMBERS 1-99:xxxx} years of age. Patient smokes first cigarette within *\*SmartList – time to smoke upon awakening\** after awakening. The patient has had @quit\_attempts@ quit attempts in the past year. Quit attempts tried in the past include *\*SmartList – methods of quit attempts\**. Medications that have been tried include *\*SmartList – previously tried medications\**.

**ADVISE:** Discussed the *\*SmartList – advise to quit smoking\**

### ASSESS WILLINGNESS<sup>4</sup>:

1. If I could quit smoking I would.  
*\*SmartList – if I could I would\**
2. I want to quit smoking because I worry about how smoking affects my health.  
*\*SmartList – smoking affects my health\**
3. I would be willing to make a plan to quit smoking.  
*\*SmartList – willing to make a plan\**
4. I would be willing to cut down my number of cigarettes before quitting.  
*\*SmartList – willing to cut down\**

### ASSIST:

Patient has a planned quit date of {Time: day/week/month/year(s):xxxx}

Provided the following resources to patient: *\*smart list – patient ed materials\**

Counseling offered: *\*SmartList – time counseled\**

Referral offered: *\*SmartList – referral\**

Pharmacotherapy offered: *\*SmartList – medications offered\**

### ARRANGE:

Schedule a follow-up appointment within 1-3 weeks. Follow up method: *\*SmartList – follow up\**. If appointment is scheduled prior to populating the note, then next appointment date can be pulled in from @appointment\_date@ with @provider@.

## The 5A Model (OPTIONAL):

### 1. ASK

Time to smoke upon awakening: *\*SmartList – smoke upon awakening\**

Methods of quit attempts: *\*SmartList – methods of quit attempts\**

Previously tried medications: *\*SmartList – previously tried medications\**

#### Ask About Tobacco Use

- Identify and document smoking status for every patient at every visit

### 2. ADVISE

Advise to quit smoking: *\*SmartList – advise to quit smoking\**

#### Advise the Quit

- In a clear and personalized manner, urge every smoker to quit
- Can I share some benefits of quitting smoking?
- Can I explain the challenges of quitting smoking?
- Can we come up with a plan to help you address the challenges of withdrawal symptoms?

### 3. ASSESS

Are you willing to make a quit attempt?

1. If I could quit smoking I would.

*\*SmartList – if I could I would\**

2. I want to quit smoking because I worry about how smoking affects my health.

*\*SmartList – smoking affects my health\**

3. I would be willing to make a plan to quit smoking.

*\*SmartList – willing to make a plan\**

4. I would be willing to cut down my number of cigarettes before quitting.

*\*SmartList – willing to cut down\**

#### Assess Willingness to Make a Quit Attempt

- Understand if the smoker is willing to make a quit attempt
- For recent quitters, reinforce success at quitting; review benefits of quitting

## 4. ASSIST

Patient education materials provided: *\*SmartList – patient ed materials\**

Referral: *\*SmartList - referral\**

Counseling session provided: *\*SmartList – time counseled\**

Smoking Cessation Medications: *\*SmartList –medications offered\**

### Assist in the Quit Attempt

- For patients willing to make a quit attempt, offer counseling and medication if appropriate (except when medically contraindicated or with specific populations for which there is insufficient evidence of effectiveness)
- For patients unwilling to make a quit attempt in the near term, provide interventions to increase future quit attempts
- For recent quitters, assist in resolving any residual problems arising from quitting

## 5. ARRANGE

If patient is willing to quit: Can we make a follow up visit within the next 1 to 3 weeks?

If patient not willing to quit: Please contact us at [@clinic\\_number@](#) if you decide you would like to quit smoking and let's discuss quitting smoking again at your next office visit.

### Arrange Follow-Up

- For patients willing to make a quit attempt, arrange for follow-up contacts, soon after a quit date
- For patients unwilling to make a quit attempt in the near term, address again at the next clinic visit

## Fagerstrom Scale<sup>5</sup> (OPTIONAL):

**NOTE:** Copyright permission may need to be obtained for use of the Fagerstrom Scale.

### Fagerstrom

1. Item 1 - How soon after you wake up do you smoke your first cigarette?

*\*SmartList – first cig awake\**

2. Item 2 - Do you find it difficult to refrain from smoking in places where it is forbidden e.g. in church, at the library, in cinema, etc.?

*\*SmartList – difficult to refrain\**

3. Item 3 - Which cigarette would you hate most to give up?

*\*SmartList – cigarette hate to give up\**

4. Item 4 - How many cigarettes/day do you smoke?

*\*SmartList – cigarettes per day\**

5. Item 5 - Do you smoke more frequently during the first hours after awakening than during the rest of the day?

*\*SmartList – smoke more after awakening\**

6. Item 6 - Do you smoke even if you are so ill that you are in bed most of the day?

*\*SmartList – smoke while ill\**

**Scoring Scale:** Scores are summed across the 6 items with an overall score ranging from 0 to 10, larger scores indicating higher nicotine dependence. Fagerstrom Score: \_\_\_\_\_ {NUMBERS 1-99:xxxx}

Score	Nicotine Dependence
0 - 2	Very Low Dependence
3 - 4	Low Dependence
5	Medium dependence
6 - 7	High dependence
8 - 10	Very high dependence

**Table 1: SmartLists Build for 5A Model**

<b>5A Model</b>	
<p><b><i>*SmartList – time to smoke upon awakening*</i></b></p> <ul style="list-style-type: none"> <li>• 5 minutes</li> <li>• 6 – 30 minutes</li> <li>• 31 – 60 minutes</li> <li>• After 60 minutes</li> </ul>	<p><b><i>*SmartList – methods of quit attempts*</i></b></p> <ul style="list-style-type: none"> <li>• Unaided Abrupt Quit or Go Cold Turkey</li> <li>• Over-the-counter medications</li> <li>• Prescription medications</li> <li>• Other</li> </ul>
<p><b><i>*SmartList – previously tried medications*</i></b></p> <ul style="list-style-type: none"> <li>• Prescription Medication</li> <li>• Over the Counter Medicines</li> <li>• Other</li> <li>• I have not used smoking cessation treatments</li> </ul>	<p><b><i>*SmartList – advise to quit smoking*</i></b></p> <ul style="list-style-type: none"> <li>• Health benefits to quitting</li> <li>• Rewards of quitting</li> <li>• Roadblocks to quitting</li> </ul>
<p><b><i>*SmartList – patient ed materials*</i></b></p> <ul style="list-style-type: none"> <li>• List of materials in your EHR</li> </ul>	<p><b><i>*SmartList – time counseled*</i></b></p> <ul style="list-style-type: none"> <li>• Between 3 minutes up to 10 minutes of counseling (intermediate)</li> <li>• Greater than 10 minutes of smoking cessation counseling (intensive)</li> </ul>
<p><b><i>*SmartList – referral*</i></b></p> <ul style="list-style-type: none"> <li>• Referral to Quit Line</li> <li>• Referral to Clinic</li> <li>• Referral to HCP</li> </ul>	<p><b><i>*SmartList – medications offered*</i></b></p> <ul style="list-style-type: none"> <li>• Prescription Medication</li> <li>• Over the Counter Medicines</li> <li>• Other</li> <li>• No smoking cessation treatment offered</li> </ul>
<p><b><i>*SmartList – follow up*</i></b></p> <ul style="list-style-type: none"> <li>• Return to Clinic or HCP</li> <li>• Telephone/Telemedicine</li> <li>• E-mail/Text</li> <li>• Patient portal</li> <li>• Referral</li> <li>• None planned</li> </ul>	

**Table 2: SmartLists Build for Willingness to Quit<sup>4</sup>**

<b>Willingness To Quit</b>	
<p><i><b>*SmartList – if I could I would*</b></i></p> <ul style="list-style-type: none"> <li>• Completely Agree</li> <li>• Somewhat Agree</li> <li>• Neutral</li> <li>• Somewhat Disagree</li> <li>• Completely Disagree</li> </ul>	<p><i><b>*SmartList – smoking affects my health*</b></i></p> <ul style="list-style-type: none"> <li>• Completely Agree</li> <li>• Somewhat Agree</li> <li>• Neutral</li> <li>• Somewhat Disagree</li> <li>• Completely Disagree</li> </ul>
<p><i><b>*SmartList – willing to make a plan*</b></i></p> <ul style="list-style-type: none"> <li>• Completely Agree</li> <li>• Somewhat Agree</li> <li>• Neutral</li> <li>• Somewhat Disagree</li> <li>• Completely Disagree</li> </ul>	<p><i><b>*SmartList – willing to cut down*</b></i></p> <ul style="list-style-type: none"> <li>• Completely Agree</li> <li>• Somewhat Agree</li> <li>• Neutral</li> <li>• Somewhat Disagree</li> <li>• Completely Disagree</li> </ul>

**Table 3: SmartLists Build for Fagerstrom Scale**

<b>Fagerstrom</b>	
<p><i><b>*SmartList – first cig awake*</b></i></p> <ul style="list-style-type: none"> <li>• 3 = within 5 minutes</li> <li>• 2 = 6 – 30 minutes</li> <li>• 1 = 31 – 60 minutes</li> <li>• 0 = After 60 minutes</li> </ul>	<p><i><b>*SmartList – difficult to refrain*</b></i></p> <ul style="list-style-type: none"> <li>• 0 (no)</li> <li>• 1 (yes)</li> </ul>
<p><i><b>*SmartList – cigarette hate to give up*</b></i></p> <ul style="list-style-type: none"> <li>• 1 (the first in the morning)</li> <li>• 0 (any of all others)</li> </ul>	<p><i><b>*SmartList – cigarettes per day*</b></i></p> <ul style="list-style-type: none"> <li>• 0 = 10 or less</li> <li>• 1 = 11 – 20</li> <li>• 2 = 21 – 30</li> <li>• 3 = 31 or more</li> </ul>
<p><i><b>*SmartList – smoke more after awakening*</b></i></p> <ul style="list-style-type: none"> <li>• 0 (no)</li> <li>• 1 (yes)</li> </ul>	<p><i><b>*SmartList – smoke while ill*</b></i></p> <ul style="list-style-type: none"> <li>• 0 (no)</li> <li>• 1 (yes)</li> </ul>

**Table 4: SmartLinks**

SmartLinks	Description	
@pat_name@	Patient name	
@pat_age@	Patient age	
@pat_sex@	Patient sex	
@allergies@	Patient allergies	
@smoking_status@	Current smoking status	
@cigarettes/day@	Number of cigarettes patient smokes per day	
@lifetime_years_smoked@	Number of years patient has been smoking	
@quit_attempts@	Number of attempts patient has made to quit	
@appointment_date@	Date of next appointment	
@provider@	Patient provider	
@clinic_number@	Clinic phone number	

**Evaluation Plan:**

MOS could ask the customer some combination of these questions to evaluate the implementation of the **SmartText**.

- Time frame: 1 month?
- Was the SmartText useful?
- Who in the organization is using?
- How many times did it get used?
- What would you change?
- Do you plan on continuing to use?
- Pros/Cons of the SmartText functionality?



## References

1. Fiore MC, Jaén CR, Baker TB, et al. Treating Tobacco Use and Dependence: 2008 Update. Clinical Practice Guideline. Rockville, MD: U.S. Department of Health and Human Services. Public Health Service. May 2008.
2. Thieleke J, McMahon J, Meyer G, Yun KA. An evaluation of the Freedom from Smoking Online cessation program among Wisconsin residents. *WMJ*. 2005 May; 104(4):41-4.
3. Rigotti NA. Clinical practice. Treatment of tobacco use and dependence. *NEJM*. 2002 February; 346(7):506-12.
4. Baker CL, Bruno M, Grant L, et al. Content validity of a willingness to quit tool for use with current smokers in clinical practice. *Adv Ther*. 2017;34(10):2295-2306.
5. Heatherton TF, Kozlowski LT, Frecker RC, Fagerstrom K. The Fagerstrom test for nicotine dependence: a revision of the Fagerstrom tolerance questionnaire. *Br J Addiction*. 1991;86:1119-1127.