Each year, 450,000 people die of preventable, smoking-related diseases.² Physicians are in a unique position to help tobacco users quit by screening patients at annual visits and providing resources for tobacco cessation programs.

- Although most tobacco users say they want to quit, only 48 percent who saw a physician were advised to quit.
- Physician advice to quit tobacco prompts users to make quit attempts and increases quit rates.
- Counseling and medication should be offered to patients willing to make an attempt to quit.
- If a patient is not ready to quit, encourage tobacco reduction.

Intervening during an adolescent patient visit³
Physicians should ask pediatric and adolescent patients about their tobacco use, and clearly communicate the importance of abstaining from tobacco.

- Asking adolescents about tobacco use and advising them to quit are the first steps toward the use of effective treatments to quit.
- In a sample of 11th graders, more than 79 percent reported they would acknowledge tobacco use if asked.
- Physicians need to routinely assess adolescent tobacco use, offer counseling, and follow up with these patients.
- Physicians may not be aware of motivational interventions.
- It is important for physicians to intervene with adolescents in a manner that respects confidentiality and privacy (e.g., interviewing adolescents without their parents present).

Resources for patients
The following are useful tobacco cessation resources and phone numbers you can give patients who are trying to quit.

New Jersey Quitline
1-866-NJSTOPS (1-866-657-8677)
New Jersey residents will receive a Quit Guide in the mail and get five counseling sessions with a trained quit coach. Coaches are available throughout the week from 8 a.m. – 3 a.m. EST.

Community-based tobacco cessation programs
The following community-based tobacco cessation programs provide group counseling and one-on-one support.

New Jersey