

# Tobacco Screening & Cessation Counseling: 5As/5Rs



## Prenatal **ASK**

Which of the following statements best describes your cigarette smoking?

- A** I have NEVER smoked, or I have smoked less than 100 cigarettes in my lifetime.
- B** I stopped smoking BEFORE I found out I was pregnant, and I am not smoking now.
- C** I stopped smoking AFTER I found out I was pregnant, and I am not smoking now.
- D** I smoke some now, but have cut down on the number of cigarettes I smoke since I found out I was pregnant.
- E** I smoke regularly now, about the same as I did before I found out I was pregnant.

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## **ASK** for Non-Pregnant Adults

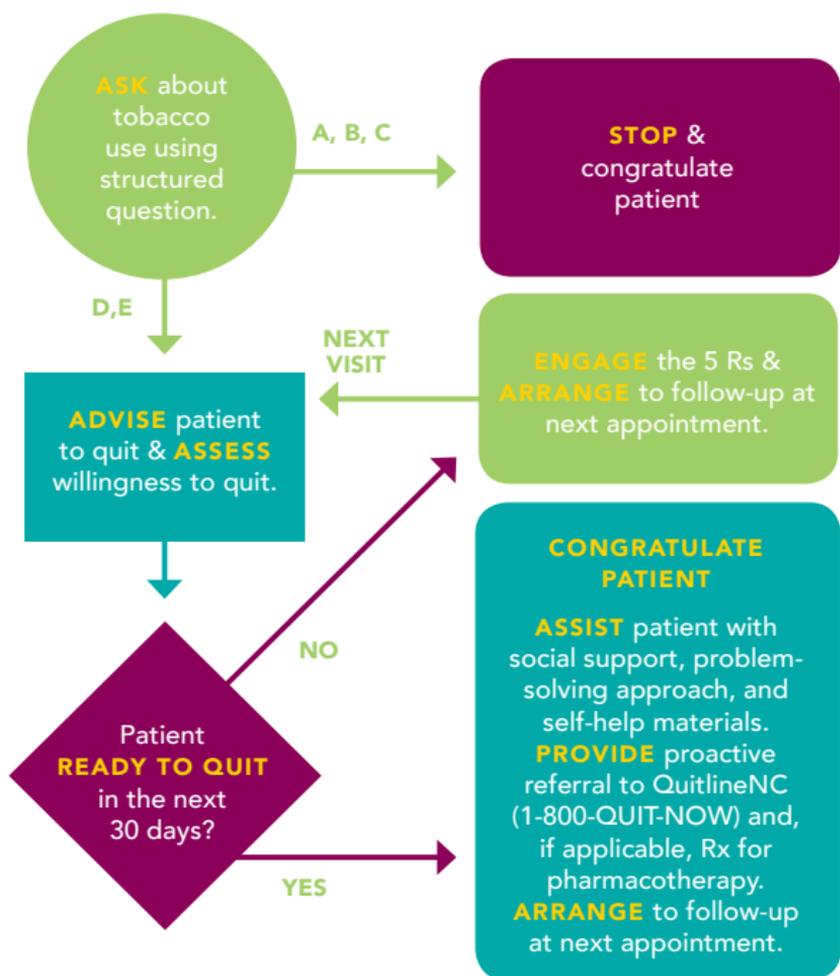
Which of the following statements best describes your cigarette smoking?

- A** I have NEVER smoked, or I have smoked less than 100 cigarettes in my lifetime.
- B** I stopped smoking OVER a year ago.
- C** I stopped smoking LESS THAN a year ago.
- D** I smoke, but not every day.
- E** I smoke daily.

## **ASK** for Other Tobacco Products

Which of the following products have you used in the past 30 days?

- |                     |                 |
|---------------------|-----------------|
| E-cigarettes/vaping | Chewing Tobacco |
| Cigars/Cigarillos   | Snuff           |
| Hookah              | Snus            |
| Strips              | Sticks/Orbs     |



## 5 Rs: When Patients Aren't Ready to Quit

**Relevance** Help patient to identify why it is personally relevant to quit

**Risks** Encourage patient to identify negative consequences

**Rewards** Encourage patient to identify benefits of quitting

**Roadblocks** Work with patient to identify barriers to quitting & how to overcome them

**Repetition** Address the 5Rs with patients at each visit

For more information, visit  
[YouQuitTwoQuit.org](http://YouQuitTwoQuit.org)

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