5As for smoking cessation for health professionals

**ASK**
“Do you smoke?”
If Yes – record smoking history: years smoked, number of cigarettes currently smoked per day or week.

**ASSESS**
Review and record smoking history. Assess stage of change e.g: “How do you feel about your smoking at the moment?” and “Are you ready to stop smoking now?” Assess nicotine dependence, past quit attempts, special health needs.

**ADVISE**
All smokers should be advised to quit in a way that is clear, personalised and non-confrontational e.g. “While I respect that it is your decision, I strongly encourage you to stop smoking.” Advise health effects and benefits.

**ASSIST**
Minimal intervention is to provide written information (e.g. Quit Pack) and offer referral (Quitline 131 848) and advise on cessation aids as appropriate. More extended assistance could be as below.

**ARRANGE FOLLOW-UP/ASK AGAIN**
Arrange follow-up for those considering an attempt within 1 month. Review progress and assist accordingly.

**SUCCESSFUL QUITTER**
Congratulate and affirm decision to quit. Give relapse prevention advice.

**RELAPSE**
Offer support and reframe as a learning experience. Explore reasons for relapse and lessons for future quit attempts. Offer on-going support. Encourage use of support services e.g. Quitline. Ask Again at future opportunities.

**ASSESS NICOTINE DEPENDENCE**
Nicotine dependence can be assessed by asking:
1. Minutes after waking to first cigarette
2. Number of cigarettes per day
3. Cravings or withdrawal symptoms in previous quit attempts.
Smoking within 30 minutes of waking, smoking more than 15 cigarettes per day and history of withdrawal symptoms in previous quit attempts are all markers of nicotine dependence.

**ASSIST – Recently Quit**
Review planning process and confidence; reinforce benefits. Offer further help to prevent relapse.

**ASSIST – Ready**
Affirm and encourage. Help client to develop a quit plan. Assist with advice on research based cessation aids. Offer further help and/or written information and referral to Quitline.

**ASSIST – Unsure**
Discuss ambivalence e.g. “What are the things you like and don’t like about your smoking.” Other options: Explore barriers to cessation. Offer further help and/or written information and referral.

**ASSIST – Not Ready**
Brief advice: Point out relevance of smoking for current and future health. Offer further help and/or written information and referral to Quitline.

**CAUTIONARY NOTE**
Important information for safe smoking cessation.
Health Professionals trained by Quit in smoking cessation intervention have a duty of care to provide clients with safe smoking cessation support, part of which is ensuring they are being medically monitored when required.

Clients:
- with a prior or current history of mental illness (including anxiety or depression)
- with a health condition such as asthma, diabetes, cardiac related disorders or epilepsy
- who are taking medications need to be referred to their treating doctor before making a quit attempt.

The Quit logo is a registered trademark of the Cancer Council Victoria.