Documentation Requirements for TIPS

1. At the initial prenatal visit, ask Every Patient about Smoking Using Alternate ACOG Tobacco Use Questions:
   - Try to refrain from asking the basic, “DO YOU SMOKE?”
   - Ask EVERY PATIENT the alternate set of questions.
   - The traditional ACOG Tobacco Use question is #14 on Form A.

   1) WHICH STATEMENT BEST DESCRIBES YOU NOW?
      - a. You smoke regularly now – about the SAME amount as before you found out you were pregnant
      - b. You smoke regularly now, but MORE THAN before you found out you were pregnant
      - c. You smoke some now, but have CUT DOWN since you found out you were pregnant
      - d. You stopped smoking AFTER you found out you were pregnant, and are not smoking now
         # Weeks Quit: _______
      - e. You stopped smoking BEFORE you found out you were pregnant, and are not smoking now
         # Weeks/Years Quit: _______
      - f. You have NEVER smoked, or smoked fewer than 100 cigarettes in your life

   2) IF YOU CURRENTLY SMOKE:
      # CIGARETTES/DAY: Current _________ Pre-Pregnancy _______ # YEARS SMOKED: ________

   3) WHICH OF THE FOLLOWING BEST DESCRIBES YOUR EXPOSURE TO OTHER PEOPLE SMOKING?
      - a. You do not have regular contact with anyone who smokes
      - b. You have regular contact (but do not live) with other people who smoke, but they DO NOT
         smoke when you are around
      - c. You have regular contact (but do not live) with other people who smoke, and they DO often
         smoke when you are around
      - d. You live with at least 1 smoker, but they DO NOT smoke when you are around
      - e. You live with at least 1 smoker, and they DO often smoke when you are around

2. Implement the 5 A’s at EVERY visit involving a smoke-exposed pregnancy (i.e., current smokers, women exposed to significant second-hand smoke, anyone who has been smoke-free < 2 years).

3. Use both the 5A’s documentation form & the graph to document your smoking cessation counseling.
   - Complete EVERY section of the documentation form (there is a section for each of the 5 “A’s”).
   - Note the Medicaid reimbursement codes on the bottom of the documentation form.
   - If you are a resident, your attending must sign the documentation form for Medicaid reimbursement.

5. Refer any of the following patients to TIPS, or, if applicable, the TIPS Case Manager at your practice:
   • Current Smokers
   • Anyone Regularly Exposed to Secondhand Smoke
   • Former Smokers ≤ 2 Years Smoke-Free

6. Ask TIPS for smoking cessation literature, materials, or information that you may need.

7. Contact the TIPS Staff with any questions or concerns:

   **Tennessee Intervention for Pregnant Smokers**
   East Tennessee State University
   Box 70621 Johnson City, TN 37614
   Office: (423) 439-6705 Fax: (423) 439-2440
   Beth Bailey, Ph.D., Program Director: nordstro@etsu.edu
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   TIPS Website: [http://www.etsu.edu/tips](http://www.etsu.edu/tips)