# YES, You Can! Quit Smoking







## Thinking about quitting tobacco?

Are you thinking about taking that first step to quitting smoking, vaping or using other tobacco products?

If you are — congratulations! Thinking about quitting  $\bf IS$  the first step!

# The Benefits of Quitting

- You'll have a lower chance of getting an ulcer, lung cancer, heart disease, chronic bronchitis, and emphysema.
- You'll look better, healthier, and have a new sense of control over your life.
- You'll set a better example of healthy living for your children. You'll increase the chance that children will not smoke.
- You'll get fewer colds.
- You'll have more energy.
- Your night vision improves so you can drive more safely.
- Your taste buds and sense of smell come back.
- Your speaking voice may improve because you are not irritating your throat.
- You'll have more spending money.

# **Are You Ready to Quit Smoking?**

If you're ready to quit smoking, we can help you! As a Passport member, you can receive smoking-cessation medicines. All you need is a prescription from your doctor.

If you'd like to use smoking-cessation medicines, please talk with your doctor about which one is right for you. Your doctor can also give you counseling and support as you work towards quitting. When your doctor gives you a prescription, he or she will give you a type of medicine called Nicotine Replacement Therapy (NRT).



NRTs replace the nicotine in cigarettes that causes tobacco to be addictive. They can help with cravings and increase your chances of success. Here are some of the NRTs you can use:

| Types<br>of NRTs                   | How to Use Them  |
|------------------------------------|--|
| Nicotine<br>Transdermal<br>Patches | You place the nicotine patch on your skin. It gives you a small and steady amount of nicotine.   |
| Nicotine<br>Lozenges               | A nicotine lozenge looks like a piece of hard candy. You place it in your mouth and let it dissolve. As the lozenge dissolves, it releases nicotine into your body.  |
| Nicotine Gum                       | You chew nicotine gum. As you chew the gum, it releases nicotine. You chew the gum until you have a tingling feeling, and then you place it between your cheek and gums.   |
| Chantix®                           | Chantix® (Varenicline) is a pill you take by mouth. It helps reduce nicotine withdrawal and the urge to smoke. It also blocks the effects of nicotine from cigarettes. If you start smoking again while taking Chantix®, your sense of satisfaction will be lower, which helps your chances of quitting. |

### **Need Help Quitting?**

If you want to quit smoking or if you're worried about a friend or family member's use:

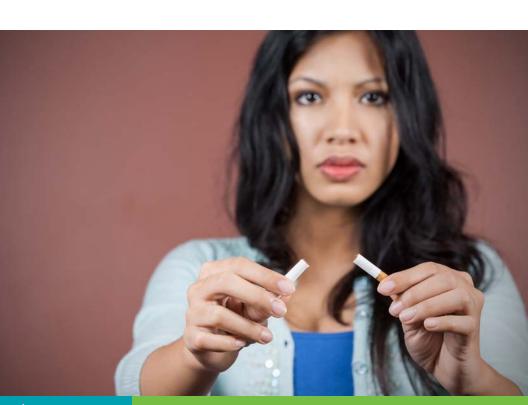
• Please call **1-800-QUIT NOW** (1-800-784-8669).

You may call from 8 am to 1 am Eastern Time, Monday through Sunday.

You can speak with a health coach from 9 am to 5 pm.

You can request additional support via email, text or IM.

- Visit www.quitnowkentucky.org for more information or if you prefer online cessation services.
- You can also find great resources tailored just for you at smokefree.gov





# My Plan to Quit Smoking

#### STEP 1: Decide

Once you're ready, decide to quit smoking. Make up your mind and don't let anything stop you!

#### STEP 2: Pick a Quit Date

Pick a date that you will stop smoking. Mark it on the calendar.

#### STEP 3: Get Ready for Your Quit Date

There are many ways to get ready to quit smoking. Try this 5-day countdown to help you get ready for your quit day.

#### The Countdown!

#### 5 Days Before Your Quit Date

- DAY 5 Think about why you want to quit.
  - Tell your friends and family you are going to quit.
  - Stop buying cigarettes, cartridges or dip.

# **DAY 4** • Find things to hold in your hands other than a cigarette.

- Make a list of everything that makes you feel the urge to use tobacco.
   Write down what you will do instead or how you will avoid those things, situations or places.
- Think of places you can go where you will not be tempted to smoke.

# • Calculate the money you will save! I will use this money for \_\_\_\_\_ instead.

- Make a list of people you can talk to if you need help.
- Buy any stop-smoking aids and take any medicines your doctor has prescribed.
- **DAY 1** Throw away lighters, ashtrays, cigarettes and matches.
  - Clean your clothes to get rid of cigarette smell.

#### My Quit Day

When your quit day arrives, try to keep busy. Stay away from alcohol or anything that might make you think about cigarettes. Reward yourself with a treat or do something special! You're making a great decision! And remember, the cravings will get smaller and smaller every day that you stay tobacco-free. You can do it!

#### My Tobacco-Free Celebration Plan

| I've Been<br>Tobacco-Free for: | I will celebrate by: |
|--------------------------------|----------------------|
| 24 Hours                       |                      |
| 1 Week                         |                      |
| 1 Month                        |                      |
| 3 Months                       |                      |
| 6 Months                       |                      |
| 1 Year                         |                      |

# **My Tobacco-Free Promise to ME!**

| My Information   |
|--|
| My name is:  |
| My doctor's name is:   |
| My doctor's phone number is:   |
| Today, I Decide  |
| ☐ I have decided to quit smoking.  |
| My quit date is:   |
| I am quitting because:   |
| I am % sure I can reach my goal.   |
| My Medicine  |
| I have talked with my doctor and decided not to take<br>medicine at this time. |
| ☐ I have talked with my doctor who has prescribed me:                          |
| I will fill my prescription on: so that I have it for my quit date.            |
| ☐ I will take my medicine as directed.   |
| I take my medicine times a day for days.                                       |

| My Choices  |
|---|
| ☐ I will commit to avoiding this situation:                   |
| ☐ When I feel like I need to smoke, I will instead.           |
| My number one support person for quitting is:                 |
| ☐ I have already told,  |
| and that I am quitting.                                       |
| ☐ I will be using the Quitline (1-800-Quit-Now) to help me.   |
| ☐ I have downloaded a Tobacco-Free app that I will use.       |
| ☐ I will call my doctor if I need more help.                  |
|   |
| It's about ME!  |
| ☐ I promise to do my best and follow my plan to quit smoking. |
| My signature:   |
| My doctor's signature:  |

I'm making a promise to myself to **QUIT** smoking because my health is my **life** and my **happiness**!

# **Need More Help?**

Passport is always here to help you quit smoking!
To get more information, please call us at
1-800-578-0603. TDD/TTY users may call 711.





Source: American Lung Association, www.smokefree.gov, UCSF Smoking Cessation Leadership Center HLTH04338 APP 11/6/2020