



# MGH Wants YOU to be Smoke Free

A personalized Quit Plan for: \_\_\_\_\_

My Quit Date: \_\_\_\_\_

Nicotine is a powerful addiction. It is hard to let go, but many people have quit successfully with the right tools.

## STEP ONE: DECIDE TO DO IT

To prepare you may need to think about:

### Reasons why you like to smoke

- I enjoy it
- It relaxes me
- It reduces my stress

My reasons: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### Reasons why you may want to quit

- I will recover quicker
- I will have more MONEY
- I will clear the air for my children/grandchildren

My reasons: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## STEP TWO: PREPARE TO QUIT

- Throw out all of my cigarettes
- Make my home and car smoke free
- Find a support person: \_\_\_\_\_
- Identify my triggers to smoke

My triggers are: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## STEP THREE: PRACTICE BASIC SKILLS TO COPE WITH MY TRIGGERS

- **The 4 D's: Distract, Drink water, Delay (the urge will pass), Deep breathe (10 s-l-o-w breaths)**
- **USE A STOP SMOKING MEDICATION AS PART OF YOUR BASIC PLAN (SEE OTHER SIDE)**
- **Calculate** how much \$ I spend on cigarettes and will save when I quit! Use that \$ to reward myself.  
 Example: \$8 (a pack) x 7 days = \$56 saved per week!  
 \$56 x 52 (weeks in a year) = \$ 2912.00 saved per year!
- List activities I will enjoy doing in place of smoking :

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## STEP FOUR: BE PREPARED...

- For new situations down the road that might trigger a craving
- Practice saying: "I CANNOT have one" because 1 cigarette leads to 20.
- Know that I will miss cigarettes at certain times. **Letting go takes time.**

**GET HELP:** You can call 1-800-QUIT-NOW (800-879-8678)

Or online: **Becomeanex.org**

**Women.smokefree.gov**

# Using Stop-Smoking Medications Doubles Your Chances of Staying Quit!

## OVER THE COUNTER MEDICATIONS\*:

### NICOTINE PATCH

Instructions: Every morning, apply patch to dry skin and hold for 20 seconds. Choose a different location on your upper body every day.

Strengths: 21 mg, 14 mg and 7 mg

We recommend you use: \_\_\_\_\_ mg every day for \_\_\_\_\_ weeks  
\_\_\_\_\_ mg every day for \_\_\_\_\_ weeks  
\_\_\_\_\_ mg every day for \_\_\_\_\_ weeks

### NICOTINE LOZENGE

Instructions: Place between gum and cheek. Move from side to side and allow to melt slowly. Do not bite or chew. Do not eat or drink while using the lozenge.

Strengths: 2mg and 4 mg

We recommend you use: \_\_\_\_\_ mg every day for \_\_\_\_\_ weeks  
\_\_\_\_\_ mg as often and long as needed

### NICOTINE GUM

Instructions: Chew briefly until you taste a peppery flavor then “park” gum inside your cheek until flavor fades. Repeat chew and park routine for 20-30 minutes. Do not eat or drink while using the gum.

Strengths: 2mg and 4 mg

We recommend you use: \_\_\_\_\_ mg every day for \_\_\_\_\_ weeks  
\_\_\_\_\_ mg as often and long as needed

## PRESCRIPTION MEDICATIONS:

### NICOTINE INHALER

Instructions: Bring inhaler to mouth and puff to absorb nicotine through mouth and throat. Use 4-20 cartridges per day. Approximately 80 puffs per cartridge.

### BUPROPION SR (WELLBUTRIN)

Instructions: Space morning and afternoon doses 8 hours apart (at least 4 hours before bedtime). If you experience mood changes call your doctor and stop the medicine. Use for 12-24 weeks.

### VARENICLINE (CHANTIX)

Instructions: Take after a meal and a tall glass of water. Space morning and afternoon doses 8 hours apart (at least 4 hours before bedtime). If you experience mood changes call your doctor and stop the medicine. Use 12-24 weeks.

Notes:

---

---

\* Some insurance companies may cover the over the counter medications with a prescription