

Increasing Documentation of Tobacco Cessation Counseling Among Internal Medicine Residents in Primary Care

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Introduction/Background:

Tobacco use remains a public health concern and the #1 cause of preventable disease in the United States. Though smoking rates have decreased in recent years, 34.1 million adults (approximately 14%) were estimated to smoke cigarettes in 2019. Tobacco use is known to cause a myriad of diseases, including cardiovascular disease, pulmonary disease, cancer, and diabetes. It is estimated that 16 million US adults live with a tobacco-related disease. Over 480,000 deaths every year in the US, about 1 in every 5 deaths, can be attributed to smoking. A 2016 survey at a large University medical center showed that residents lack both formal training and confidence in smoking cessation counseling. Of internal medicine residents surveyed, about 50% reported not receiving any formal education in cessation interventions.

In 2020, only 28.01% (n = 657) of tobacco users among internal medicine resident primary care patients at the George Washington Medical Faculty Associates (MFA) were documented to have cessation counseling in the preceding 12 months. The goal of this project was to assess knowledge of how to document and increase rates of tobacco cessation counseling.

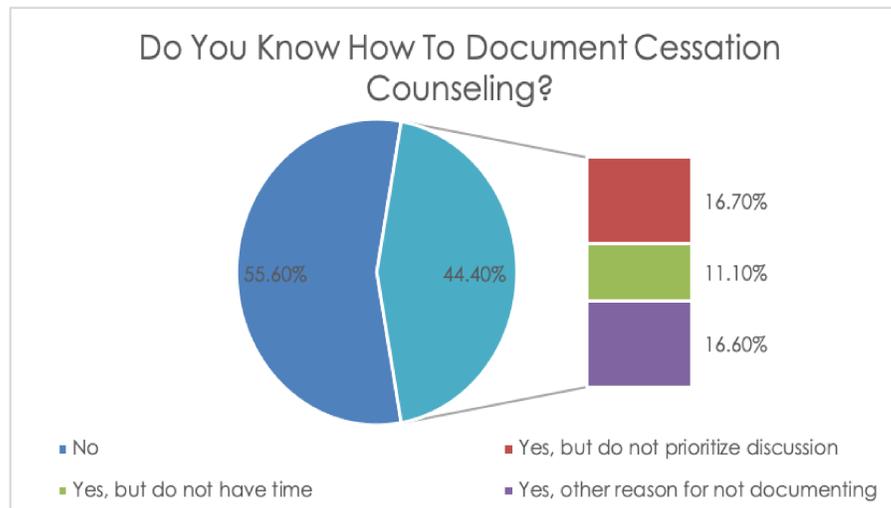
Methods:

Internal medicine residents were surveyed on their knowledge of tobacco cessation counseling documentation. Counseling documentation data was extracted from published MFA quality measure data prior to study and throughout PDSA cycles. For the initial intervention, internal medicine residents were educated on how to document cessation counseling through email reminders. For PDSA cycle two, a document to remind how to document cessation counseling was given to residents seeing active tobacco users. This document also included information regarding nicotine and non-nicotine replacement therapies as well as information on support systems (1-800-QUIT-NOW, www.smokefree.gov).

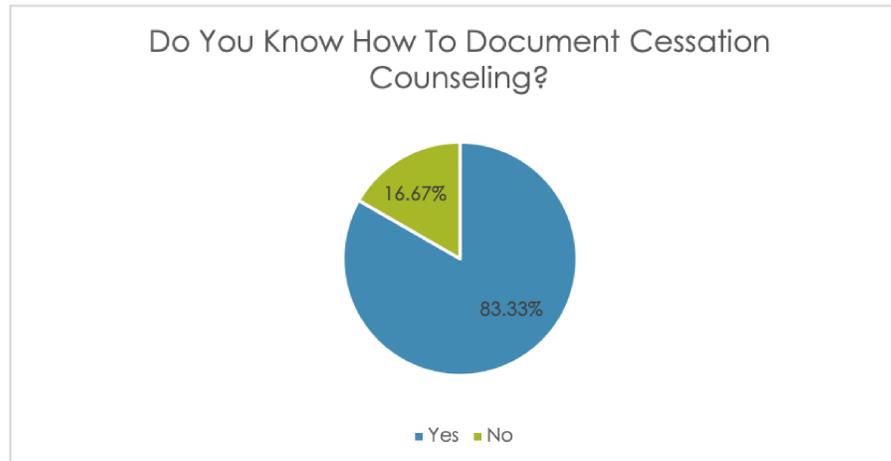
Results:

Prior to study, only 44.4% (n=18) of respondents knew how to properly document smoking cessation discussion. 16.7% did not prioritize discussion and 11.1% did not have time to counsel. After education, 83.3% (n =12) of respondents knew how to document cessation counseling. The published documentation rates remained unchanged at 28.16% (n= 671).

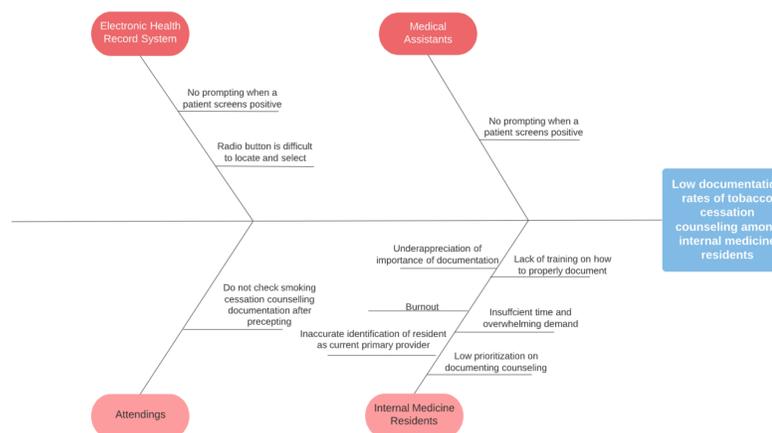
Prior to Interventions:



After Interventions:

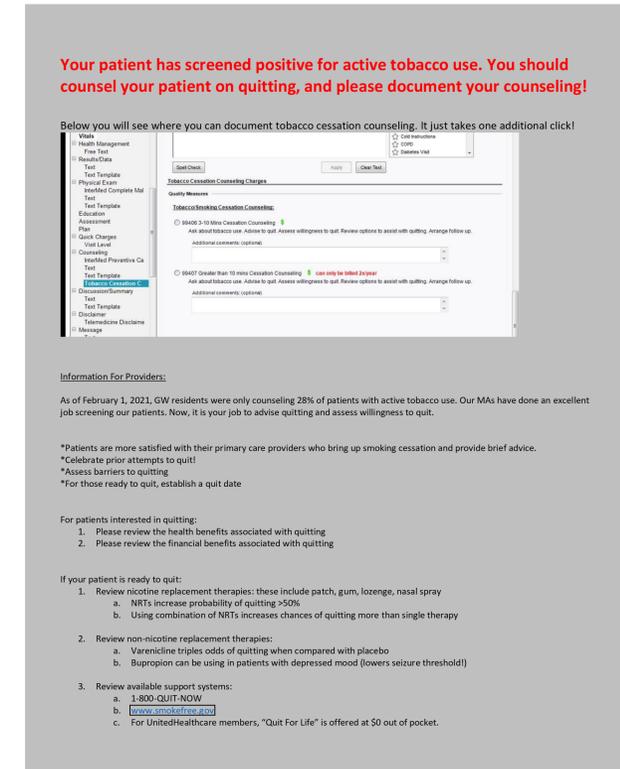


Why Residents Are Not Documenting Tobacco Cessation Counseling:



Next Steps:

- Provider reminders for patients who screen positive (see below)
- Automatic task sent to providers with patients who use tobacco



Conclusions:

This study was limited by low response rate. While residents were shown to have increased knowledge of how to document their counseling, rates of documented cessation counseling did not change. PDSA cycle 2 is targeted at prioritizing cessation discussion and reducing the amount of time needed to complete cessation discussion. This cycle is underway and will be evaluated as a tool to increase the documentation of tobacco cessation counseling.

Resources:

Cornelius ME, Wang TW, Jamal A, Loretan C, Neff L. Tobacco Product Use Among Adults – United States, 2019. *Morbidity and Mortality Weekly Report*, 2020. Volume 69(issue 46); pages 1736–1742.

U.S. Department of Health and Human Services. The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014

Kattoor, A., Thomas, J., Abraham, A., Bahia, A., & Kenchaiah, S. (2017). Tobacco cessation: A knowledge, attitude and practice (KAP) survey among residents. *Journal of the American College of Cardiology*, 69(11S), 2529-2529.

5 Pearls on Smoking Cessation | Core IM Podcast. [online] Core IM Podcast. Available at: <<https://www.coreimpodcast.com/2019/09/18/5-pearls-on-smoking-cessation/>> [Accessed 8 February 2021].