SMFM Preterm Birth Toolkit

Smoking Algorithm

Society for Maternal • Fetal Medicine
**Current or former smoker in pregnancy**

**ASK** about current smoking status

- **Former smoker**
  - Reinforce decision to quit
  - Congratulate
  - Encourage her to stay smoke free in pregnancy and postpartum period

- **Currently smoking**
  - **ADVISE** the patient the risks of continued smoking *(list)*
  - **ASSESS** the patient's willingness to quit
  - **ASSIST** by providing pregnancy-specific smoking cessation materials. Offer a direct referral to the smoker's quit line (1-800-QUIT NOW)
  - Consider point-of-care testing to confirm nicotine use

**Limited effectiveness and safety** data to support pharmacologic therapies or nicotine vaporizers (e-cigarettes)

**ARRANGE** follow-up of attempts to quit at every prenatal visit

**Address barriers:**
- Provider knowledge of tobacco history
- Not enough time allotted to prenatal visit
- Maternal education level
- Lower maternal socioeconomics
- Psychiatric disorders

**Address barriers:**
- Provider time constraints during prenatal visit
- Separate coding and billing for reimbursement
- Provider knowledge on motivational interventions
- Limited adjuncts to psychosocial interventions
Disclaimer

This algorithm and key driver material was written by a group of experts in the field of Preterm Birth. It was then reviewed by the Society for Maternal-Fetal Medicine's (SMFM's) Publications Committee, Executive Committee and Risk Management.

Standardization of healthcare processes and reduced variation has been shown to improve outcomes and quality of care. SMFM developed these documents to help facilitate the standardization process. These algorithms and key driver documents are “tools” to assist clinicians and practices. The practice of medicine continues to evolve, and individual circumstances may vary. They reflect clinical and scientific advances as of the date issued and are subject to change. They are not intended to dictate a certain management or course of action. We encourage users to adapt them to their particular situation, environment and patient population.

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