

**EXAMPLE: Inpatient or Residential Tobacco Treatment Policy**

**Guideline Name: Nicotine Withdrawal and Tobacco Treatment Guideline**

**Date Effective:** \_\_\_\_\_

- I. **POLICY:** We will provide comprehensive treatment for all chemical dependencies including nicotine.
- II. **PURPOSE:** Tobacco use and nicotine dependence are major health concerns that affect our colleagues and the patients we serve. We recognize that nicotine is an addictive substance and our treatment philosophy includes treating all substances of abuse.
- III. **GUIDELINES/PROCEDURES:**
  - A. Nicotine dependence and tobacco use disorder will be treated the same as other addictive substances.
  - B. All clients will be screened for tobacco use and tobacco use disorder at time of admission as part of the intake process. Tobacco use, delivery system (including combustible cigarettes, cigars, smokeless tobacco, e-cigarettes, etc.), quantity of tobacco use, and age of first use will be documented.
  - C. Treatment plans will be developed to treat the dependence. Document selected tobacco cessation medication.
  - D. All patients/residents will be screened for CO level upon admission and daily thereafter at 11:00AM for detox and medically managed patients and during the evening shift for residents.
  - E. Daily CO levels will be required as part of the recovery program.
    - i. Refusal of a scheduled CO level or an increase in CO level will be identified and treated as a relapse.
    - ii. A relapse assignment will be given to the patient.
    - iii. The treatment team will follow up in the next morning briefing with a review of the completed assignment.
    - iv. A decision for continued stay will be made on an individual basis.
    - v. Continued relapse will be addressed with possible discharge.
  - F. Patients smelling of cigarette smoke will be asked to shower as soon as possible. Clothing smelling of cigarettes will be washed by patient or staff prior to their return to the patient. Items that cannot be washed will be sprayed with Febreze or sent home with a family member. Odorous items will be bagged until washed, sprayed, or removed from the facility.
  - G. Include instructions for continuation of tobacco cessation medication at discharge with prescription.

**IV. AVAILABLE THERAPEUTIC OPTIONS:**

- A. Nicotine Replacement Therapy (NRT):
  - i. Recommended Dosage:

Medication	Cautions/Warnings	Recommended Dosage	Side Effects
Transdermal Nicotine Patch (7mg, 14mg, 21 mg)	Do not use if you have severe eczema or psoriasis Heart attack in last two weeks	One patch per day <ul style="list-style-type: none"> <li>• If <math>\geq 10</math> cigs/day: 21 mg 4 wks,</li> <li>• 14 mg 2-4 wks, 7 mg 2-4 wks</li> <li>• If <math>&lt; 10</math> cigs/day: 14 mg 8 wks</li> </ul>	<ul style="list-style-type: none"> <li>• Local skin reaction</li> <li>• Insomnia</li> </ul>
Nicotine Lozenge (2mg, 4mg)	<ul style="list-style-type: none"> <li>• Do not eat or drink 15 minutes before or during use</li> <li>• One lozenge at a time</li> </ul>	<ul style="list-style-type: none"> <li>• If smoke <math>&gt; 30</math> minutes after waking: 2 mg</li> <li>• If smoke <math>\leq 30</math> minutes after waking: 4 mg</li> <li>• Weeks 1-6: 1 every 1-2 hrs</li> </ul>	<ul style="list-style-type: none"> <li>• Hiccups</li> <li>• Cough</li> <li>• Heartburn</li> </ul>

	<ul style="list-style-type: none"> <li>Limit 20 in 24 hours</li> </ul>	<ul style="list-style-type: none"> <li>Weeks 7-9: 1 every 2-4 hrs</li> <li>Weeks 10-12: 1 every 4-8 hrs</li> </ul>	
Nicotine Gum (2 mg, 4mg)	<ul style="list-style-type: none"> <li>Caution with dentures</li> <li>Do not eat or drink 15 minutes before or during use</li> </ul>	<ul style="list-style-type: none"> <li>1 piece every 1 to 2 hours</li> <li>6-15 pieces per day</li> <li>If smoke &gt; 30 minutes after waking: 2 mg</li> <li>If smoke ≤ 30 minutes after waking: 4 mg</li> </ul>	<ul style="list-style-type: none"> <li>Mouth soreness</li> <li>Stomachache</li> </ul>
Nicotine Nasal Spray	<ul style="list-style-type: none"> <li>Not for patients with asthma</li> <li>May irritate nose (improves over time)</li> </ul>	<ul style="list-style-type: none"> <li>1 “dose” = 1 squirt per nostril</li> <li>1 to 2 doses/hour; 8 to 40 doses/day</li> <li>Do NOT inhale</li> </ul>	<ul style="list-style-type: none"> <li>Nasal irritation</li> </ul>
Nicotine inhaler	<ul style="list-style-type: none"> <li>May irritate mouth/throat at first (improves over time)</li> </ul>	<ul style="list-style-type: none"> <li>6-16 cartridges/day</li> <li>Inhale 80 times/cartridge</li> <li>May save partially-used cartridge for next day</li> </ul>	<ul style="list-style-type: none"> <li>Local irritation of mouth and throat</li> </ul>

\* Patients with a history of multiple quit attempts should be offered combination therapy of patch and gum or lozenge.

ii. Contraindications:

**Pregnant Persons** – Pregnant and breastfeeding persons who smoke will be encouraged to quit without medication based. Pregnant persons will be offered behavioral counseling interventions that exceed minimal advice to quit.

B. Other Therapies

i. Varenicline (Chantix)

1. Dosing:

Day 1-3: 0.5mg every morning

Day 4-7: 0.5mg twice daily

Day 8-end: 1mg twice daily

2. Start 1 week before quit date; use for 3-6 months

3. Do not use Varenicline if any of the following apply:

- With significant renal impairment
- With serious psychiatric illness
- Undergoing dialysis
- Breastfeeding

ii. Bupropion (Zyban, Wellbutrin)

1. Dosing: 150 mg/day p.o. for 3 days, then 150 mg p.o. bid for 7 to 12 weeks. If insomnia is experienced the order should be written as 150mg p.o. in the morning and give the second dose earlier in the evening at 5pm.

2. Start 1-2 weeks before quit date; use for 2-6 months.

3. May use in conjunction with Nicotine replacement therapy.

4. Do not use Bupropion SR if any of the following apply:

- History of seizure disorder or increased risk of seizures
- History of anorexia or bulimia
- Patient is taking an MAO inhibitor