**INTRODUCTION**

**Smoking Cessation**
- Cigarette smoking is the leading preventable cause of death in the United States and is responsible for more than 480,000 deaths each year.
- Less than one-third of the smokers who enroll in traditional tobacco cessation programs are able to successfully quit smoking.

**“Teachable Moments”**
- Targeting “teachable moments,” when patients might have heightened motivation to quit, may assist providers in identifying patients who are more open to cessation counseling.
- The peripersonal setting has been shown to be a “teachable moment” and smoking cessation interventions initiated in this setting can increase the likelihood of long-term cessation.

**Opportunity in Community Pharmacy**
Community pharmacies are hailed and easily accessible health care professionals who are trained to provide both behavioral support and recommendations on prescription and non-prescription cessation products.
- Previous studies have demonstrated that community pharmacists can significantly improve smoking cessation rates compared to usual care.
- Targeting perioperative patients may be a novel approach to increase patient accessibility to and utilization of community pharmacist-led smoking cessation programs.

**Kelley-Ross Pharmacy Group**
Kelley-Ross is an independent community pharmacy offering both clinical and dispensing services across 5 different locations in the Seattle area.
- Through strong community partnerships and collaborative practice agreements, Kelley-Ross has become a leader of innovation and novel community pharmacy practice, and has developed implemented a variety of clinical services.

**OBJECTIVES**
1. To compare the six-month prolonged smoking abstinence rates of perioperative smokers to non-smoking smokers in a community pharmacist-led smoking cessation program using a Cox proportional hazards model.
2. To describe a community pharmacist-led smoking cessation program targeting perioperative smokers using process and outcomes evaluation.

**METHODS**

**METHODS**

**Figure 1. Steps for Implementation**

**Identify Need**
- Smokers at higher risk of post-operative complications
- “Teachable moment” exists in perioperative setting

**Find Collaborators**
- Program support from corporate leadership
- Physician champion

**Develop Service**
- Program protocol
- Collaborative Drug Therapy Agreement (CDTA)
- Team members’ roles and responsibilities

**Sustain and Grow**
- Prolonged smoking abstinence rates
- Kaplan-Meier Survival Curve
- Quality improvement measures

**Evaluation**
- Patient care
- Data collection

**Implementation**
- Initiate, Implement, Evaluate, Sustain and Grow

**Figure 2. Program Structure**

**Table 1. Evaluation Plan**

<table>
<thead>
<tr>
<th>Objective</th>
<th>Process Evaluation</th>
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<tbody>
<tr>
<td>Outcome</td>
<td>Process evaluation</td>
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<tr>
<td>Measure</td>
<td>Referral type</td>
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**REFERENCES**