Smoking cessation management in GOPC
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Introduction
What are the standards of documentation of smoking status for patients with chronic illnesses who had regular followup in the clinic, and of the smoking management process for SMOKERS?

Objectives
1. To assess current documentation of smoking status and process of smoking cessation management 2. To identify any deficiencies in smoking documentation 3. To implement changes to improve the deficiencies 4. To evaluate performance after implementation of changes

Methodology
The audit was performed in a general outpatient clinic (GOPC) of the Hospital Authority from 4/2010- 3/2011 (first cycle) and 7/2011-6/2012 (second cycle). The ten most common chronic illnesses in our clinic were chosen, according to the International Classification of Primary Care (ICPC) coding frequency with use of Clinical Data Analysis and Reporting System (CDARS). Seven criteria were derived from the documentation of smoking status for patients with chronic illnesses and the well-recognized 5As approach for smoking cessation management. Standards were set with consensus among clinic doctors. Systematic sampling was adopted to retrieve computer medical records in the first and second phases of data collection. The proportion of patients reaching certain criteria was presented as percentage. Chi square test was used to test the statistical significance of the results.

Result
Significant improvements were observed after one year of implementation. Near 100% of patients had their smoking status documented. More than 90% of smokers had their smoking management done in accordance with the 5As. All the criteria showed statistical significant improvement. Clinical outcomes: a. Percentage of motivated patients b. Smoking Cessation and Counselling Program (SCCP) referral rate c. Successful quit rate (smoking cessation rate) The three clinical outcomes a, b and c has shown significant improvement