

Service Priorities and Programmes Electronic Presentations

Convention ID: 769

Submitting author: Dr NAMRATA ARORA **Post title:** Resident, Caritas Medical Centre

Smoking Status as a New Vital Sign in Sham Shui Po Primary Care Clinics

Arora N, Yiu YK, Cheung KL, Cheng WF, Yiu CM, Pon WP

Department of Family Medicine & Primary Care, Kowloon West Cluster

Keywords:

smoking status vital sign primary care

Introduction

Some western studies have suggested that smoking status should be documented regularly as a new vital sign, as it may be associated with identifying more smokers and can prompt more smoking related discussions and tobacco counselling between patients and clinicians.

An eye catching icon of smoking information is available in Clinic Management System (CMS). Unified documentation by this icon helps easy identification of patient's smoking status.

Objectives

A retrospective audit was done to investigate the compliance of smoking status entry into the CMS.

Methodology

The target groups were patients aged 18 or above who attended a General Outpatient Clinic in the Sham Shui Po District from the period 1st Jan 2016 to 31st Dec 2016. Cases were recruited from West Kowloon, Caritas Medical Centre, Cheung Sha Wan, Nam Shan and Shek Kip Mei clinics during the specified period and were randomized. Sample sizes were calculated with CDC Epi Info application and smoking status was recorded from the smoking icon on the CMS.

Result

In total, 1240 patient records were reviewed. Smoking status was relatively well recorded in primary care. The documentation of smoking status was 97.6% in West Kowloon, 97.5% in Nam Shan, 95.2% in Caritas Medical Centre and Shek Kip Mei respectively and 93.6% in Cheung Sha Wan clinic. Out of the percentage of smokers whose status was noted, there were more smokers in Shek Kip Mei (12.2%) and Nam Shan (11.5%) compared to other clinics. This suggests the need for more smoking cessation services in these clinics. Clinicians and allied staff should use the CMS input to identify and flag active smokers. This simple, low cost intervention can prompt staff to enquire identified smokers about tobacco use, triage them into smoking cessation clinics and give advice on quitting smoking during consultations.