



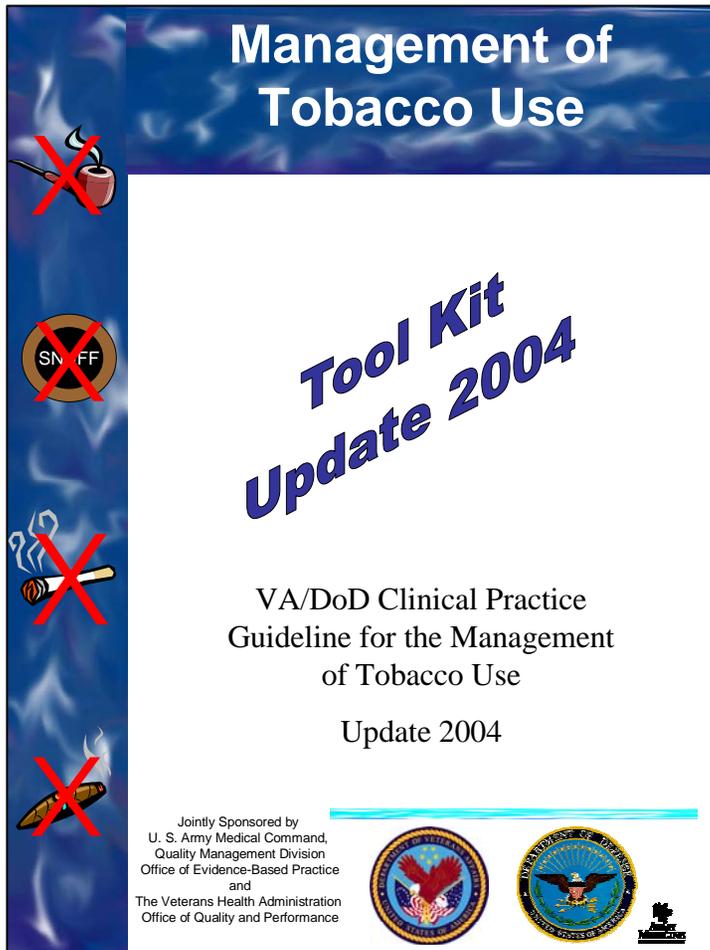
**VA/DoD Clinical Practice Guideline
for the Management of Tobacco Use –
Update 2004
Tool Kit Brief**

Why A Tobacco Guideline?

- **Tobacco use is associated with emphysema, chronic bronchitis, cancer & coronary artery disease.**
- **Single most preventable cause of disease, disability, and death.**
- **Exposure to passive smoke is associated with elevated risks of cancer & coronary heart disease.**

The Supporting Tobacco Tool Kit

The Tobacco Binder



- **Provider Support Tools**
- **Patient Self-Management Tools**
- **System Support Tools**

Provider Support Tools

- **Guideline and Summary**
- **Champion's Implementation Manual**
- **Implementation Worksheets**
- **Documentation Forms**
- **Provider Reference and Pocket cards**
- **Provider Briefs**

Management of Tobacco Use Guideline, Update 2004

VA/DoD CLINICAL PRACTICE GUIDELINE FOR THE
MANAGEMENT OF TOBACCO USE

Department of Veterans Affairs
Department of Defense

Update Version 2.0a

Web version available online at:

http://www.oqp.med.va.gov/cpg/TUC3/TUC_Base.htm

Also available online at:

<http://www.QMO.amedd.army.mil>

Management of Tobacco Use Guideline Summary, Update 2004

VA/DoD CLINICAL PRACTICE GUIDELINE FOR THE MANAGEMENT OF TOBACCO USE

Guideline Summary

Update 2004

RECOMMENDATIONS WITH THE HIGHEST EVIDENCE: The highest evidence for recommendations is A, defined as "a strong recommendation based on randomized controlled trials that the intervention is always indicated and acceptable."

1. Patients should be asked about tobacco use at most visits, as repeated screening increases rates of clinical intervention. [R=A]
2. Tobacco users should be advised to quit at every visit because there is a dose response relationship between number of contacts and abstinence. [R=A]
3. Physicians should strongly advise tobacco users to quit, as physician advice increases abstinence rates. [R=A]
4. All tobacco users must have reasonable access to minimal counseling and to either an intermediate or intensive cessation program. [R=A]
5. Cessation treatment should include the following components:
 - Tobacco use cessation pharmacotherapy [R=A]
 - Counseling techniques that have been shown to be effective (problem solving, skill training, intra and extra treatment support) [R=A]
 - Multiple treatment sessions [R=A]
 - Multiple formats, proactive telephone counseling, and group or individual counseling [R=A]
6. Tobacco users who are willing to quit should receive some form of counseling. There is a dose response relationship between time spent in counseling and rate of abstinence. [R=A]
 - Minimal counseling (lasting <3 minutes) increases overall tobacco abstinence rates. [R=A]
 - Intensive counseling (>10 minutes) significantly increases abstinence rates. [R=A]
 - Multiple counseling sessions increase abstinence rates. [R=A]
7. Effective counseling can be delivered in multiple formats (e.g., group counseling, proactive telephone counseling, and individual counseling) and may be more effective when combined. [R=A]
8. Counseling should be provided by a variety of clinician types (physicians or nonphysician clinicians, such as nurses, dentists, dental hygienists, psychologists, pharmacists, and health educators) to increase quit rates. [R=A]
9. Tobacco users who are willing to quit may receive counseling via telephone. Outlines, as proactive telephone counseling has been demonstrated to be effective. Pharmacotherapy still needs to be coordinated by the primary care provider. [R=A]
10. Tobacco users attempting to quit should be prescribed one or more effective first-line pharmacotherapies for tobacco use cessation. [R=A]
 - First-line therapies include five nicotine replacement therapy (NRT) [transdermal patch, gum, nasal spray, lozenges, or vapor inhaler] and non nicotine replacement (bupropion IR or SR). [R=A]
 - Pharmacotherapy should be combined with minimal counseling (<3 minutes). [R=A]
11. Health care providers in a pediatric setting should advise parents to quit smoking to limit their children's exposure to second-hand smoke. [R=A]
12. Adolescents who use tobacco and are interested in quitting should be offered counseling and behavioral interventions that were developed for adolescents. [R=A]
13. All patients admitted to hospitals should have tobacco use status identified in the medical record. [R=A]
14. Tobacco users who are older should be given advice to quit. [R=A]
15. Tobacco users who are older should be given tobacco cessation treatment, including medication and counseling. [R=A]

Recommendations with the
highest evidence

Key Elements

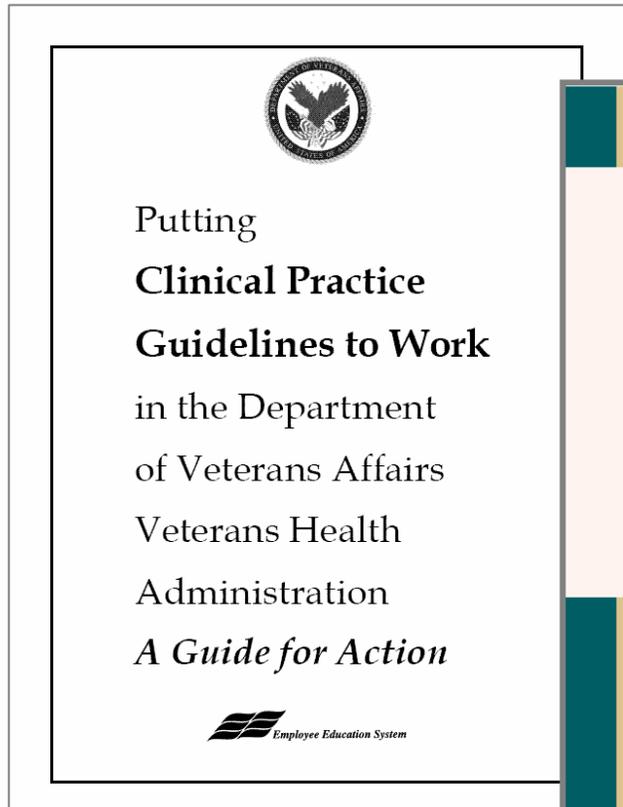
Assessment and Treatment
Algorithm

Prevention Algorithm

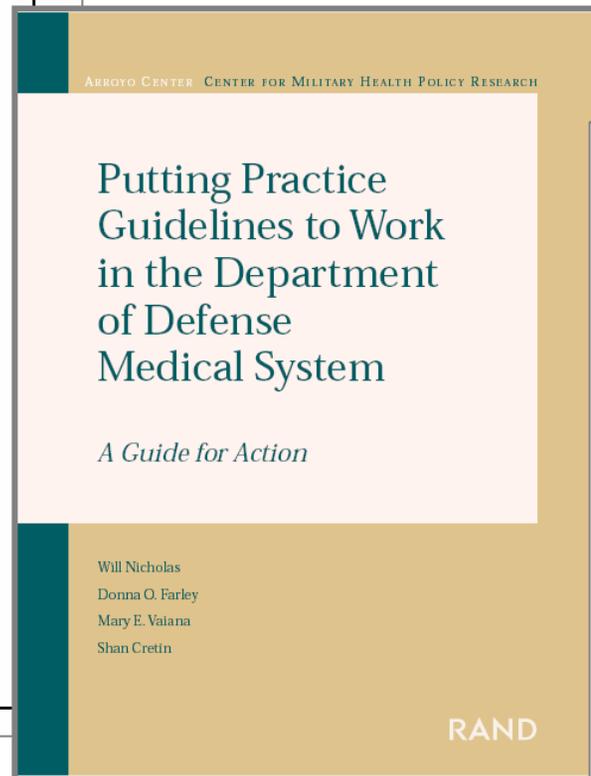
Pharmacotherapy

Primary Prevention in Young
Adults and Adolescents

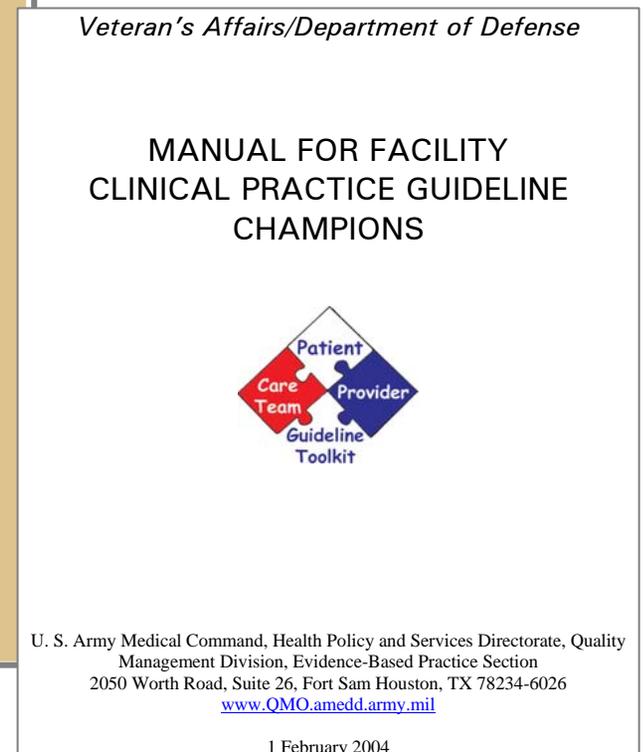
Manuals for Facility Clinical Practice Guideline Champions



**VA Implementation
Manual**



**RAND Implementation
Manual**



**DoD Implementation
Manual**

Implementation Worksheets

Worksheet 1. IMPLEMENTATION STRATEGY
VA/DoD Clinical Practice Guideline for the Management of Tobacco Use: Update 2004

Overall Implementation

Worksheet 2A. ACTION PLAN FOR GUIDELINE INTRODUCTION AND STAFF EDUCATION
VA/DoD Clinical Practice Guideline for the Management of Tobacco Use: Update 2004

Key Guideline Element
1. Every tobacco user should be advised to quit.
2. Tobacco use is a chronic relapsing condition that requires repeated interventions.
3. Several effective treatments are available in assisting users to quit.
4. It is essential to provide access to effective evidence-based tobacco use counseling treatments and pharmacotherapy.
5. Collaborative tailored treatment strategies result in better outcomes.
6. Quitting tobacco leads to improved health and quality of life.
7. Prevention strategies aim at reducing initiation, decreasing relapse, and eliminating exposure to environmental tobacco smoke.

Identify actions for guideline introduction and staff education

Action # ___

Action # ___

Action # ___

Action # ___

Worksheet 3A. GANT CHART OF TIMELINE FOR GUIDELINE INTRODUCTION AND STAFF EDUCATION
VA/DoD Clinical Practice Guideline for the Management of Tobacco Use: Update 2004

Action

Worksheet 4. METRICS AND MONITORING
VA/DoD Clinical Practice Guideline for the Management of Tobacco Use: Update 2004

Key Guideline Element	Metric	Data Sources	Monitoring Schedule
1. Every tobacco user should be advised to quit.			
2. Tobacco use is a chronic relapsing condition that requires repeated interventions.			
3. Several effective treatments are available in assisting users to quit.			
4. It is essential to provide access to effective evidence-based tobacco use counseling treatments and pharmacotherapy.			
5. Collaborative tailored treatment strategies result in better outcomes.			
6. Quitting tobacco leads to improved health and quality of life.			
7. Prevention strategies aim at reducing initiation, decreasing relapse, and eliminating exposure to environmental tobacco smoke.			

Downloadable from:
www.QMO.amedd.army.mil

Provider Documentation Form MEDCOM Test Form 709R Front

Have patient fill out
patient section, Section II
1-11, place in medical
record for provider

MEDICAL RECORD - TOBACCO CESSATION DOCUMENTATION <small>For use of this form see MEDCOM Circular 40-12</small>		TREATMENT FACILITY	DATE
SECTION I - VITAL SIGNS (Completed by Technician)			
TIME: _____	BP: _____	PULSE: _____	RESP: _____
ALLERGY: _____		TEMP: _____	
		HT: _____	
		WT: _____	
SECTION II - PATIENT ASSESSMENT (Completed by Patient/Reviewed by Provider)			
1. At what age did you start using tobacco? _____			
2. What type(s) and amount(s) of tobacco do you use?			
	TYPE(S)	YES	NO
a. Cigarette			
b. Pipe			
c. Cigar			
d. Snuff			
e. Chew			
	AMOUNT(S)	PER DAY	PER MONTH
	Packs		
	Bowls		
	Cigars		
	Cans		
	Pouch		
3. How soon after you wake up do you use tobacco? <input type="checkbox"/> After 30 minutes <input type="checkbox"/> Within 30 minutes			
4. Have you quit before? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5. How many times have you quit before? _____			
6. What was the longest period you were able to quit? _____			
7. What caused you to start using tobacco again?			
8. Did you use any of the following to help you quit? <input type="checkbox"/> Patch <input type="checkbox"/> Gum <input type="checkbox"/> Zyban <input type="checkbox"/> Inhaler			
<input type="checkbox"/> Nasal Spray <input type="checkbox"/> Individual Counseling <input type="checkbox"/> Formal Program <input type="checkbox"/> Other _____			
9. Why do you want to quit tobacco use? <input type="checkbox"/> Financial Saving <input type="checkbox"/> Breathing Problems <input type="checkbox"/> Heart Problems			
<input type="checkbox"/> Fear of Cancer <input type="checkbox"/> Family/Social Pressure <input type="checkbox"/> Other Issues _____			
10. What support do you have available to help you quit tobacco use? <input type="checkbox"/> Family <input type="checkbox"/> Friends			
<input type="checkbox"/> Work <input type="checkbox"/> Other _____			
11. What type of program do you believe would help you the most?			
<input type="checkbox"/> Group <input type="checkbox"/> One on One <input type="checkbox"/> Counseling <input type="checkbox"/> Self Quit			
PATIENT'S IDENTIFICATION (For typed or written entries give: Name - Last, First, middle; grade; date; hospital or medical facility)			
		(Provider's Signature/Date)	

Provider Documentation Form MEDCOM Test Form 709R Back

SECTION III - MEDICAL HISTORY AND PHYSICAL ASSESSMENT (Completed by Health Care Provider)					
MEDICAL HISTORY					
MEDICATIONS REVIEWED: <input type="checkbox"/> Yes <input type="checkbox"/> No ALLERGIES REVIEWED: <input type="checkbox"/> Yes <input type="checkbox"/> No LMP: _____					
ETOH: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cut Down <input type="checkbox"/> Annoyed <input type="checkbox"/> Guilty <input type="checkbox"/> Eye opener					
During the past month have you been bothered by: Feeling down, depressed, or hopeless <input type="checkbox"/> Yes <input type="checkbox"/> No					
PMH affecting use of NRT/Suproion: Little interest or pleasure in doing things <input type="checkbox"/> Yes <input type="checkbox"/> No					
PRECAUTIONS/CONTRAINDICATIONS	YES	NO	PRECAUTIONS/CONTRAINDICATIONS	YES	NO
HEAD TRAUMA			MOOD DISORDER		
SEIZURES			POLYCYTHEMIA		
CHRONIC PAIN DISORDER			DIABETES		
LIVER DISEASE			CARDIOVASCULAR DISEASE		
HYPERTHYROIDISM			COMPLICATIONS OF TOBACCO USE	YES	NO
KIDNEY DISEASE			CHRONIC OBSTRUCTIVE PULMONARY DZ		
PREGNANCY			ASTHMA		
LACTATING			CORONARY ARTERY DISEASE		
SUBSTANCE ABUSE			CANCER		
EATING DISORDER			ERECTILE DYSFUNCTION		
POST TRAUMATIC STRESS DISORDER			PERIPHERAL VASCULAR DISEASE		
ANXIETY			OTHER		
Physical Assessment:					
SECTION IV - ASSESSMENT (Completed by Health Care Provider)					
PRIMARY ASSESSMENT: Tobacco Cessation V65.49 4 (DOD unique extender) ICD - 9-CM 305.1					
SECTION V - ACTION PLAN (Completed by Health Care Provider)					
1. MEDICATIONS: NRT Prescribed? <input type="checkbox"/> YES <input type="checkbox"/> NO					
<input type="checkbox"/> Transdermal Nicotine (Contraindicated in Pregnancy) <input type="checkbox"/> 7 Mg x _____ weeks <input type="checkbox"/> 14 Mg x _____ weeks					
<input type="checkbox"/> 21 Mg x _____ weeks <input type="checkbox"/> _____ Mg x _____ weeks					
<input type="checkbox"/> Polacrlix Nicotine PRN					
<input type="checkbox"/> Other: _____ Bupropion SR 150 mg _____ po,qd x _____ days, then _____ bid.					
2. Tobacco Cessation Counseling:					
<input type="checkbox"/> Patient congratulated on decision to quit tobacco usage: Quit Date _____					
<input type="checkbox"/> Patient advised to avoid all tobacco products during NRT.					
<input type="checkbox"/> Tobacco cessation benefits reviewed.					
<input type="checkbox"/> Patient advised of withdrawal symptoms.					
<input type="checkbox"/> Patient concerns and support systems addressed.					
<input type="checkbox"/> Patient advised to take medication as directed.					
<input type="checkbox"/> Educational materials given to patient.					
3. What type of tobacco cessation program would you like to participate in?					
<input type="checkbox"/> Formal <input type="checkbox"/> Group <input type="checkbox"/> Behavior Modification <input type="checkbox"/> One On One <input type="checkbox"/> Self Quit Program					
4. Referral To:					
<input type="checkbox"/> Stress Management <input type="checkbox"/> Dietary <input type="checkbox"/> Other: _____					
5. Follow-Up Appointment within 2 weeks: _____					
_____ (Provider's Signature/Date)					

Management of Tobacco Use Provider Pocket and Key Points Cards

VA/DoD Clinical Practice Guideline for the
Management of Tobacco Use - Update 2004

Pocket Guide

ASSESSMENT AND TREATMENT ALGORITHM 1



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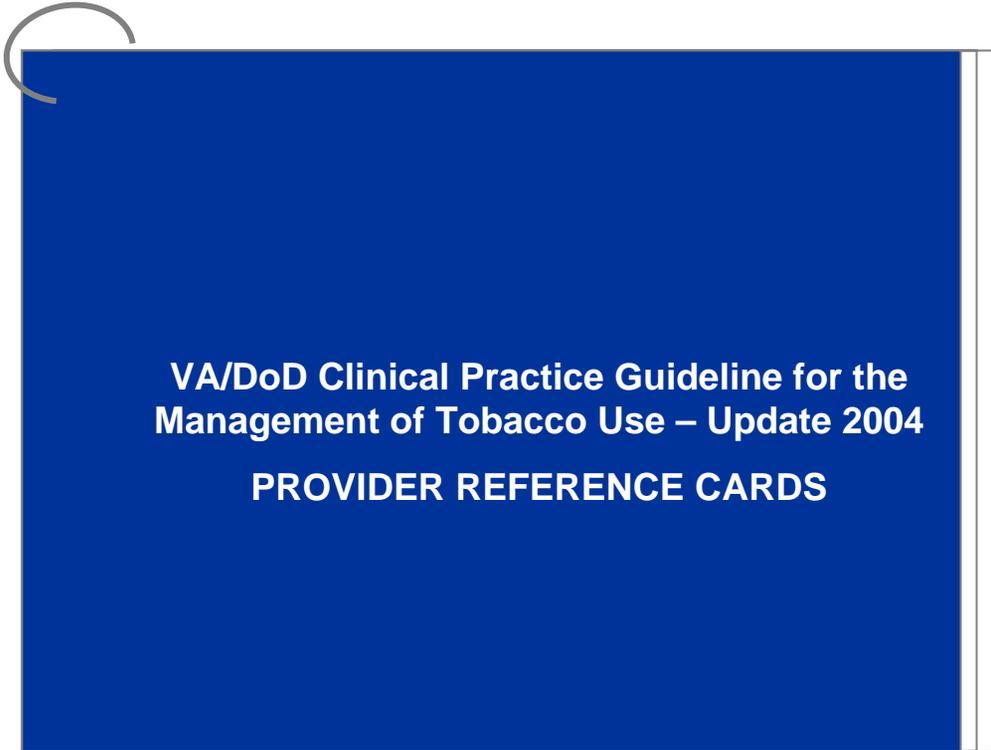


VA/DOD CLINICAL PRACTICE GUIDELINE FOR THE MANAGEMENT OF TOBACCO USE - UPDATE 2004

KEY POINTS CARD

1. Every tobacco user should be advised to quit
2. Tobacco use is a chronic relapsing condition that requires repeated interventions
3. Several effective treatments are available in assisting users to quit
4. It is essential to provide access to effective evidence-based tobacco use counseling treatments and pharmacotherapy

Provider Exam Room Cards



VA/DoD Clinical Practice Guideline for the
Management of Tobacco Use – Update 2004

PROVIDER REFERENCE CARDS

- **Guideline Key Elements**
- **Assessment and Treatment Algorithm**
- **Prevention Algorithm**
- **Level “A” Recommendations**
- **Working Group Suggestions Indicators**
- **HEDIS Measures**
- **Pharmacologic Agents**
- **The 5 A’s and 5 R’s**
- **Primary Prevention in Young Adults and Adolescents**
- **Tobacco ICD-9-CM Codes**

DoD Brief

Tobacco Use Cessation

Tricare Conference 2004

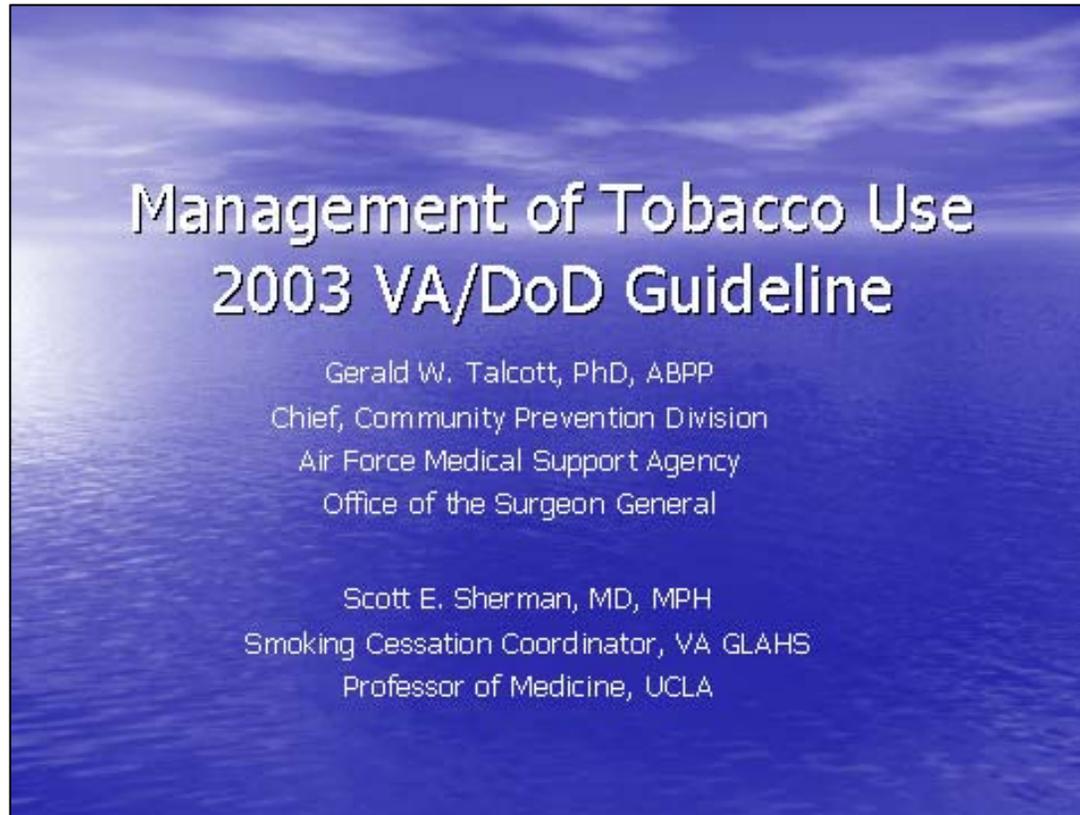


DoD

Tobacco Use Cessation: What's Working Now and the Challenges Ahead

*Moderator: Dean L. Messelheiser, Lt Col, USAF, BSC
Chairman,
DoD Alcohol Abuse and Tobacco Use Reduction Committee
(AATURC)*

VA/DoD Clinical Practice Guideline for the Management of Tobacco Use Update 2004 Champion Brief



Champion Presentation at the 7th Annual Force Health Protection Conference, 2004

The Impact of Tobacco Use on Deployed Forces

The Impact of Tobacco Use on our Deployed Forces

Captain Larry Williams, DC, USN
Consultant, DoD Alcohol and Tobacco Advisory Council (ATAC)

FHP Deployed Health 2005

VA/DoD Clinical Practice Guideline for the Management of Tobacco Use Update 2004 Champion Brief

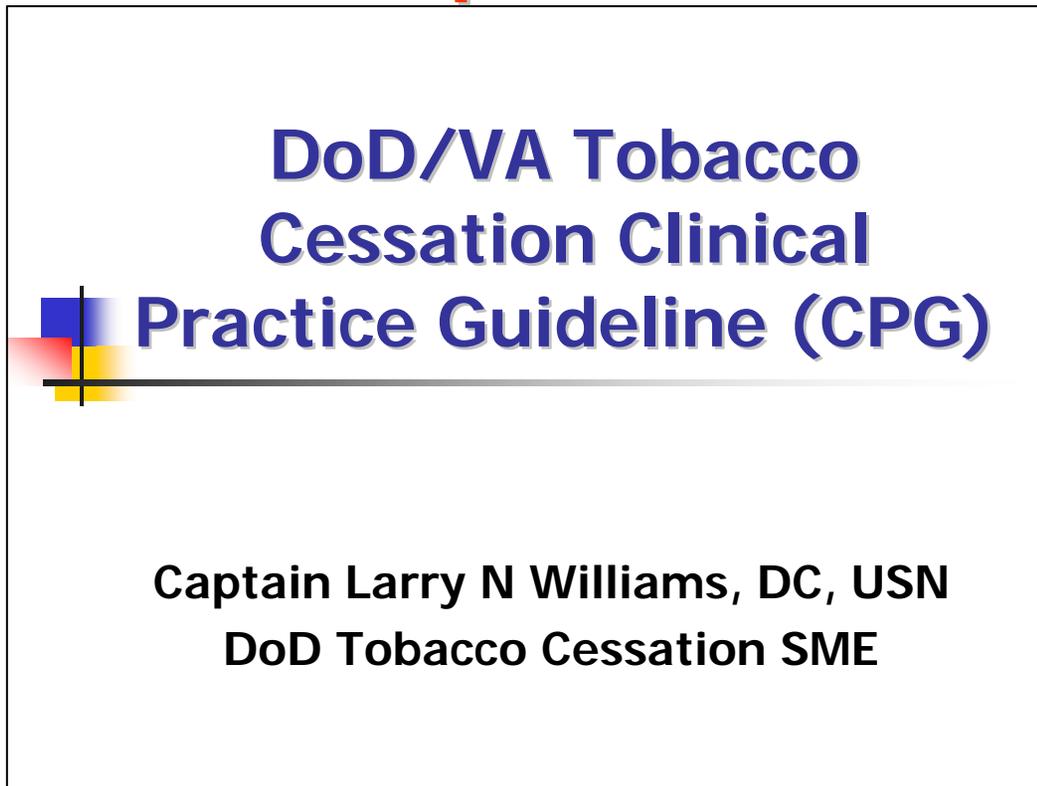
*Practical Application of the
DoD/VA
Tobacco Cessation
Clinical Practice Guideline*



Larry Williams, DDS
Captain, Dental Corps, US Navy
Department of Defense Tobacco Use Cessation Consultant

FHP Conf Aug 2005, #2049

VA/DoD Clinical Practice Guideline for the Management of Tobacco Use Update 2004



**The Forty-Fourth Navy Occupational Health and Preventive Medicine Conference
including the
Tenth Annual Independent Duty Corpsmen Conference
&
The Sixth Annual Combined Operational and
Aeromedical Problems Course
2005**

VA/DoD Clinical Practice Guideline for the Management of Tobacco Use Update 2004 Summary Brief



**VA/DoD CLINICAL
PRACTICE GUIDELINE
FOR THE MANAGEMENT OF
TOBACCO USE
UPDATE 2004
SUMMARY BRIEF**

Management of Tobacco Use Provider Pocket Card Brief

**VA/DoD Tobacco Use
Cessation (TUC) Guidelines**

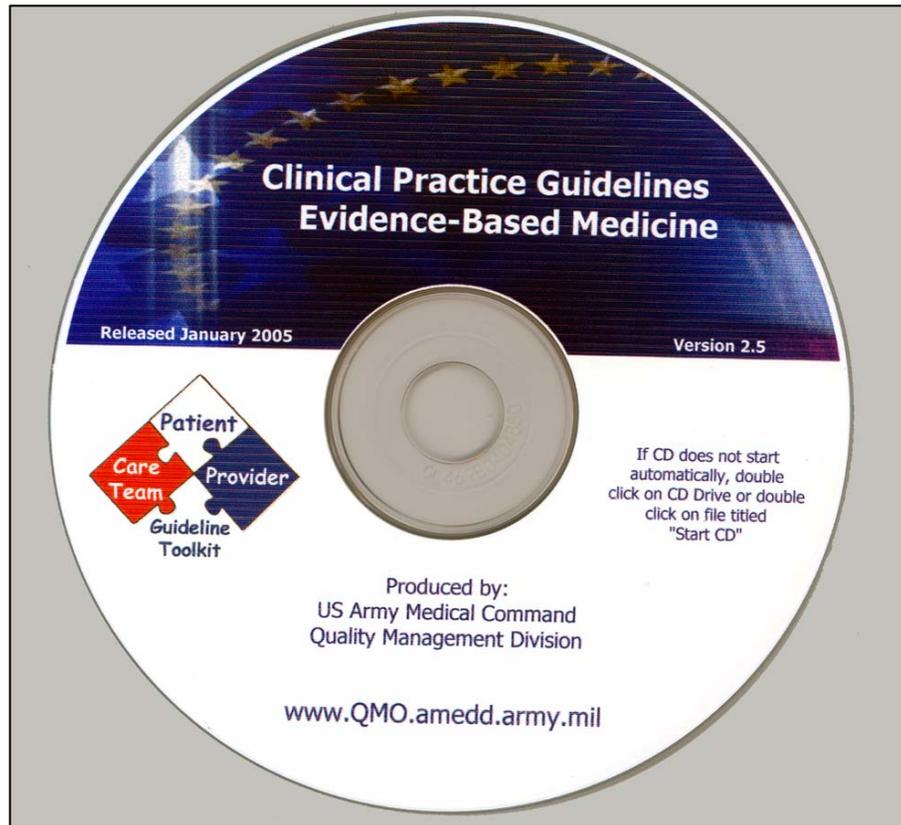
**POCKET
CARD**

VA/DoD Clinical Practice Guideline for the Management of Tobacco Use - Update 2004 Tool Kit Brief



VA/DoD Clinical Practice Guideline for the Management of Tobacco Use – Update 2004 Tool Kit Brief

CD-ROM: Clinical Practice Guidelines Evidence-Based Medicine Update 2005



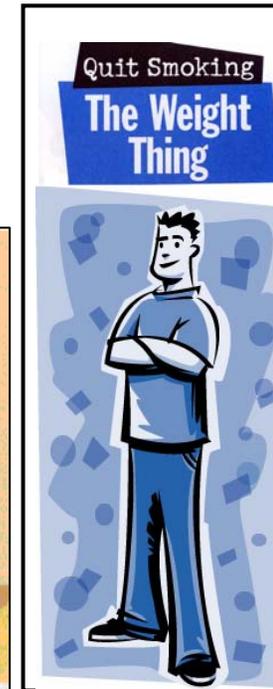
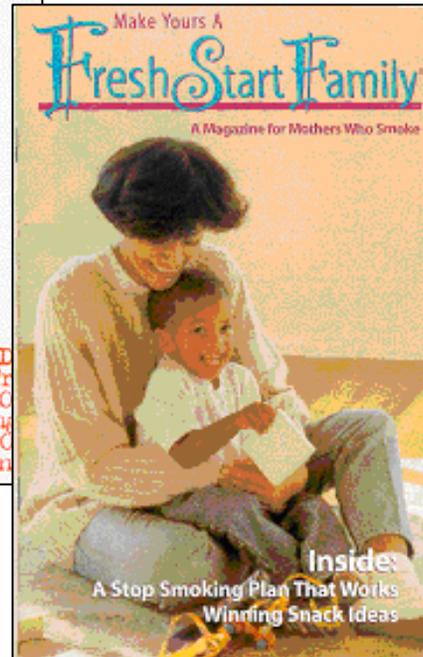
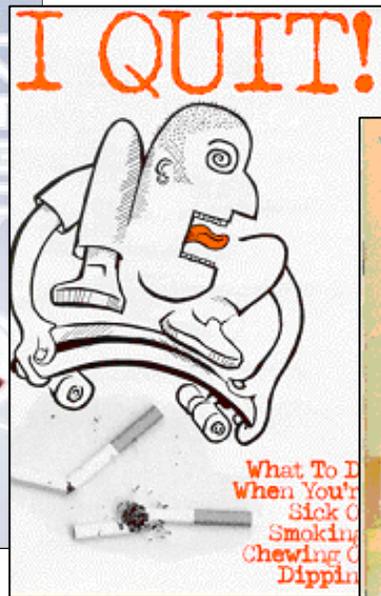
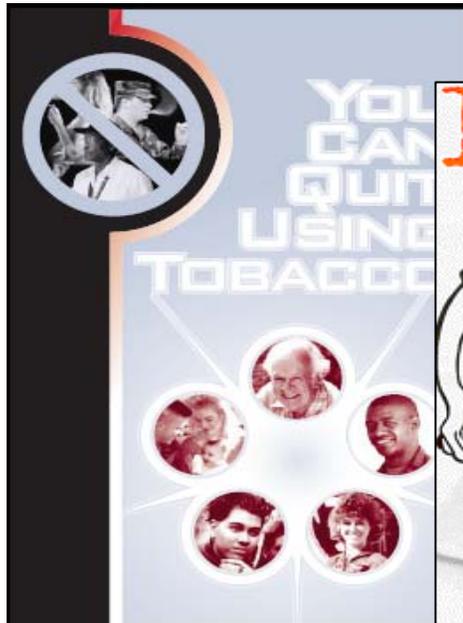
Available on the CPG Shopping Cart: www.QMO.amedd.army.mil

Patient Self-Management Tools

- **Educational Booklet and Handouts**
 - “You Can Quit Using Tobacco”
 - “I Quit”
 - “Fresh Start Family”
 - “No Dips and/or Butts”
- **On-Line Resources**
 - Navy Patient Resource
 - Tricare Patient Resource
- **Wallet cards**
 - Commitment Card
 - Action Plan Wallet Card
- **Video**
 - “TUC TV Spots”
- **On-Line Brochures**
- **Poster “Smoking and the WarFighter”**

Management of Tobacco Use

Patient Information



Available on the CPG Shopping Cart: www.QMO.amedd.army.mil

Management of Tobacco Use Navy On-Line Patient Manual

No Dips And/or Butts



A *Very, Very* Unofficial Military Manual

For

Quitting Smoking and Dipping



Author: Mark A.D. Long, Ed. D.
Health Promotion Program
Navy Environmental Health Center

Graphics: Maureen Capps
Navy Environmental Health Center

Click here for an online or downloadable copy of the “No Dips and/or Butts” Manual for patients

[http://www-
nehc.med.navy.mil/hp/tobacco/personal_health.htm](http://www-nehc.med.navy.mil/hp/tobacco/personal_health.htm)

Management of Tobacco Use Navy On-Line Patient Information

The screenshot shows a Microsoft Internet Explorer browser window displaying the "Tobacco Cessation Home Page" from the Navy Environmental Health Center (NEHC). The browser's address bar shows the URL <http://www-nehc.med.navy.mil/hp/tobacco/>. The page features a header with the NEHC logo and the text "Navy Environmental Health Center". Below the header is a navigation menu with buttons for "Home", "Index", "Directorates", "Field Activities", and "Special Interest". A banner below the menu reads "Force Health Protection" and "Ensure Navy and Marine Corps readiness through leadership in prevention of disease and promotion of health". The main content area is titled "HEALTH TOPICS" and "TOBACCO CESSATION". On the left, there is a vertical menu with expandable items: "Alcohol & Drug Abuse Prevention", "Clinical Practice Guidelines", "Clinical Preventive Services", "Clinical Epidemiology", "Health Risk Assessment", "Injury Prevention", "Nutrition", and "Physical Fitness". The main content area is divided into three columns: "My Health", "Educators", and "Clinicians". Under "My Health", there is a graphic with the text "2 YOUR HEALTH" and the link "My Personal Health". Under "Educators", there is a graphic with the text "health education" and the link "Health Educators/Coordinators /Instructors". Under "Clinicians", there is a graphic with a stethoscope and the text "Health" and the link "Clinicians". A central banner reads "Want to Quit Smoking or Dipping? The Great Amer" and "QUIT SMOKING! NOW!". Below this banner is a link "Read Disclosure?". At the bottom of the page, there is a paragraph of text: "Tobacco use is the number one preventable cause of death and illness, and the military remains a high consumer of tobacco products. The goal of the Tobacco program is to prevent the initiation of tobacco use; to help those who smoke, chew and dip to quit; and to protect from harmful exposure to environmental tobacco smoke. In coordination with other DoD prevention groups, the Health..."

Click here for patient information and links on Tobacco Cessation:
<http://www-nehc.med.navy.mil/hp/tobacco/>

Management of Tobacco Use

Tricare Healthy Choices On-Line Patient Information

Healthy Choices for Life - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Search the Web [Search] Address <http://www.tricare.osd.mil/healthychoices/quitsmoke.cfm> Go Links >>

HOME A to Z SEARCH HELP SITE MAP SEE SOMETHING WRONG?

Healthy Choices for Life

TRICARE

[Lose weight](#) [Quit smoking](#) [Stop binge drinking](#)

Healthy Choices Home

About Healthy Choices

DoD 2002 survey of health-related behaviors among military personnel

Guidance from Dr. Winkenwerder and Dr. Tornberg

Healthy Choices **initiatives** inside DoD

Special audiences
Retirees, families
Active duty and family members
Children and teens

U.S. government health-related web sites and resources

Smoking cessation

Smoking reduces stamina....and longevity!

Smoking, particularly, among younger, more junior service members, has experienced an alarming uptick recently-for the first time in 20 years.

Start here:
No matter your age, if you're ready to quit smoking-or just ready to think about quitting-you can start with the guidance of Dr. David Tornberg, TRICARE's chief medical officer. In his "The Doctor is In" column for November, which coincides with the Great American Smokeout, Dr. Tornberg offers encouragement for those who are [trying to quit smoking](#).

More:

- The government is committed to a smoke free environment, which reflects its concern for the medical, financial, and social costs of tobacco use. Thus, there are

Click here for additional patient information and links to quitting smoking:
<http://www.tricare.osd.mil/healthychoices/quitsmoke.cfm>

Patient Self-Management Wallet Cards

The Most Important Reason(s) I Want to be Tobacco Free

MY ACTION PLAN:

1 GET READY

- Set a quit date and stick to it – not even a single dip or puff!
- Think about past quit attempts.
- What worked and what did not?

2 GET SUPPORT & ENCOURAGEMENT

- Tell your family, friends, and coworkers you are quitting.
- Talk to your doctor or other health care provider.
- Get group, individual, or telephone counseling.

3 LEARN NEW SKILLS AND BEHAVIORS

- When you first try to quit, change your routine.
- Reduce stress.
- Distract yourself from urges to use tobacco.
- Plan something enjoyable to do every day.
- Drink a lot of water and other fluids.

4 GET MEDICATION AND USE IT CORRECTLY

- Talk with your health care provider about which medicine will work best for you.

5 BE PREPARED FOR RELAPSE OR DIFFICULT SITUATIONS

- Avoid Alcohol.
- Be careful around other tobacco users.
- Improve your mood in ways other than using tobacco.
- Eat a healthy diet and stay active.

HELPFUL RESOURCES

American Cancer Society:
1-800-ACS-2435
or access QuitNet at:
WWW.QUITNET.ORG/ON_MAIN.JTML

JUNE 2001

Tobacco Diary

June 2001

Date:	#	Time	Reason	Date:	#	Time	Reason	Date:	#	Time	Reason
	1				1				1		
	2				2				2		
	3				3				3		
	4				4				4		
	5				5				5		
	6				6				6		
	7				7				7		
	8				8				8		
	9				9				9		
	10				10				10		

Don't be in a hurry to get off medicine Avoid Alcohol Practice Deep Breathing

Date:	#	Time	Reason	Date:	#	Time	Reason	Date:	#	Time	Reason
	1				1				1		
	2				2				2		
	3				3				3		
	4				4				4		
	5				5				5		
	6				6				6		
	7				7				7		
	8				8				8		
	9				9				9		
	10				10				10		

Cravings Will Eventually Disappear Quit With A Friend Change Your Daily Routine Reward Yourself

Patient TUC Action Plan

Patient TUC Commitment Card

Patient Video

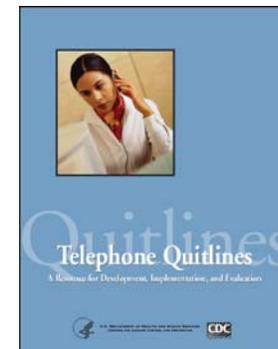
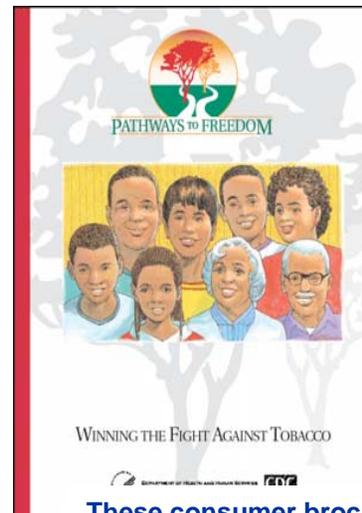
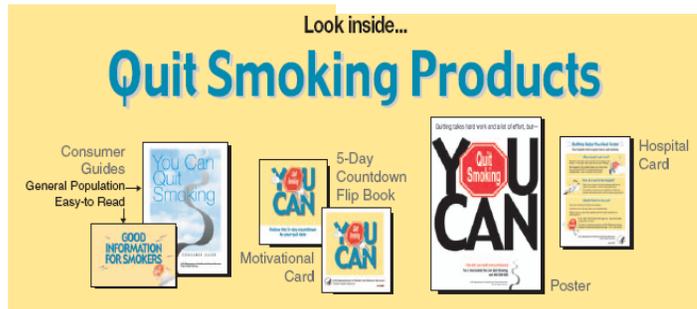


Can be ordered from the CPG Shopping Cart: www.QMO.amedd.army.mil

On-Line Brochures and Action Plans

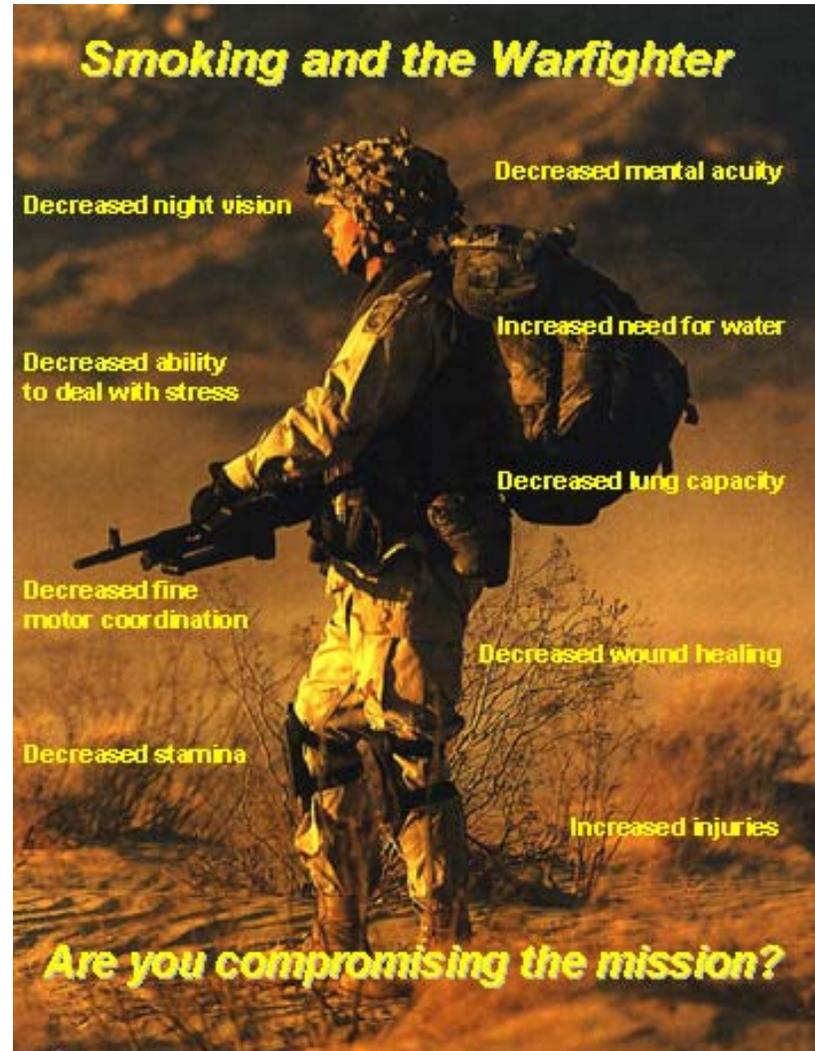


You Can Quit Smoking Consumer Kit:
<http://www.surgeongeneral.gov/tobacco/conspack.html>



These consumer brochures and information on telephone quit lines can be ordered, downloaded or read on-line at: <http://www.smokefree.gov/info.html>

Smoking and the Warfighter Poster



Can be printed from:

<http://chppmwww.apgea.army.mil/dhpw/Population/Documents/SmokingAndTheWarriorPoster.pdf>

On-Line Patient Resource For Quitting

The American Legacy Foundation - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Search the Web Search Address http://www.americanlegacy.org/americanlegacy/skins/ Go Links

Legacy
American Legacy Foundation® Building A World Where Young

PROTECT DONATE

[Click here for one man's and one woman's real story](#)

ABOUT US PROGRAMS PARTNERS RESEARCH PUBLICATIONS QUIT SMOKING

Wouldn't it be great if someone told you how to stop smoking instead of just why? > We will.

Latest News:

- [truth Advertising Campaign, Shards O' Glass, Takes Home Emmy](#)

Facts:

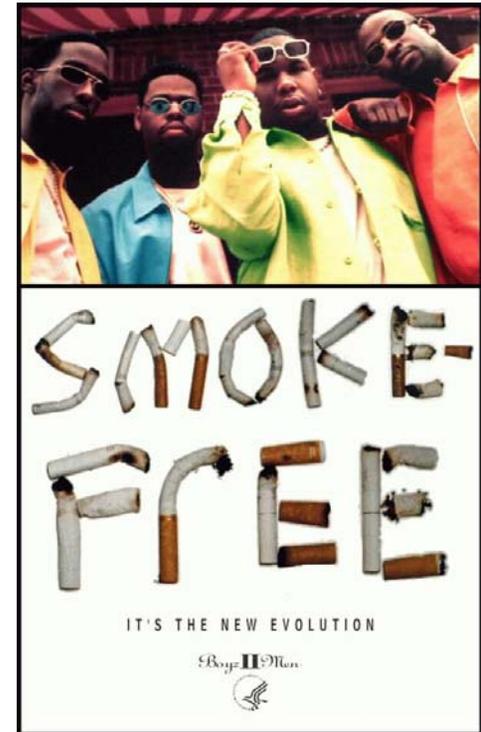
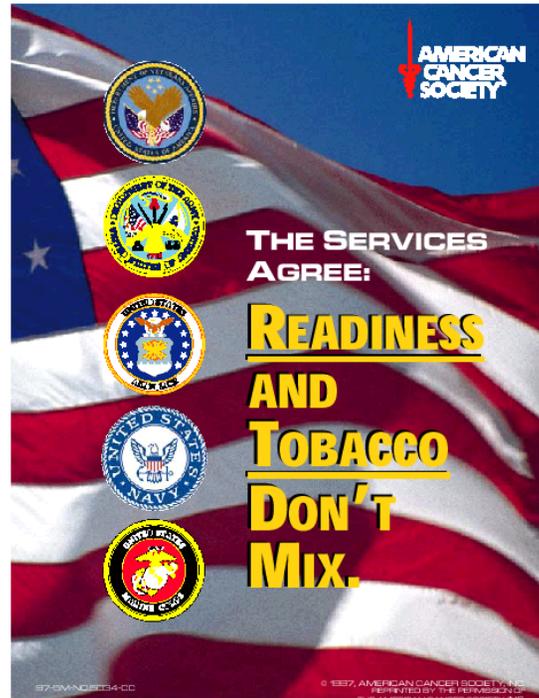
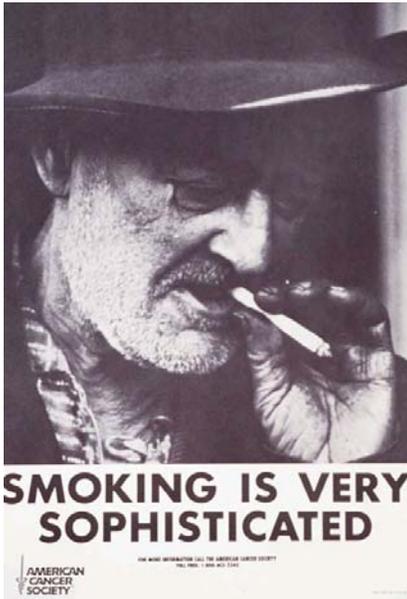
The excess risk of develop disease as a result of smol reduced by as much as half

<http://www.americanlegacy.org/americanlegacy/skins/alf/home.aspx>

System Support Tools

- **Posters**
- **Treating Tobacco Use and Dependence:
A Systems Approach**
- **On-Line Resources for Tobacco
Prevention and Cessation**
- **ICD-9-CM Codes Specific for Tobacco**
- **Information Papers and DoD Policies**
- **Performance Metrics**
- **Website Information**

Management of Tobacco Use Posters



Sample of posters that can be ordered from the CPG Shopping Cart at:

www.QMO.amedd.army.mil

Management of Tobacco Use Posters

THE COST OF SMOKING

(\$2.00 per pack)

	1 PACK	2 PACKS	3 PACKS
1 DAY	\$2	\$4	\$6
1 WEEK	\$14	\$28	\$42
1 MONTH	\$60	\$120	\$180
1 YEAR	\$730	\$1,460	\$2,190
10 YEARS	\$7,300	\$14,600	\$21,900
20 YEARS	\$14,600	\$29,200	\$43,800
30 YEARS	\$21,900	\$43,800	\$65,700
40 YEARS	\$29,200	\$58,400	\$87,600

*On a National Level, yearly costs:
Health care costs and
lost earnings - \$30 Billion*

Information from the Office of Technology Assessment and the National Cancer Institute

Call your Health and Wellness Center for information on how you can stop smoking and start saving.

HELP

Please contact your Health & Wellness Center

TOBACCO CESSATION

Do You Want To Be A Millionaire ?

Stop Using

If tobacco costs you \$4.00 per day, your monthly costs are \$120.00. If you invest this \$120.00 per month into a mutual fund with a 12% return, after 40 years, you as a former tobacco user would have

\$1,175,160.00 for your retirement.

More immediate rewards:

- 3 months no tobacco use = \$360.00 = Color TV
- 4 months no tobacco use = \$480.00 = Stereo
- 5 years no tobacco = A New Car !!!

Your final answer should be:

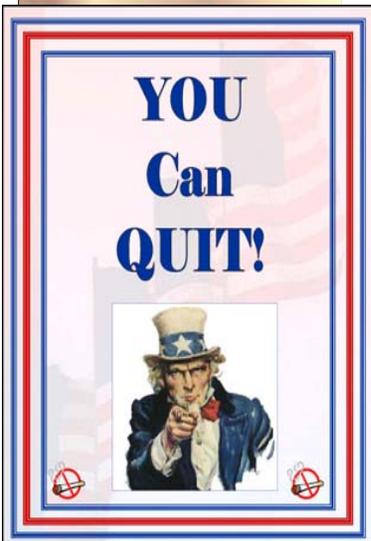
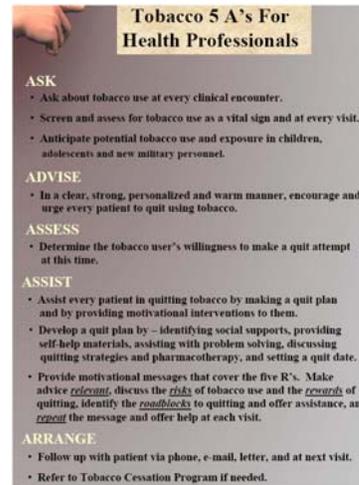
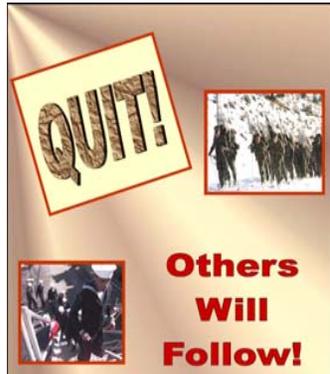
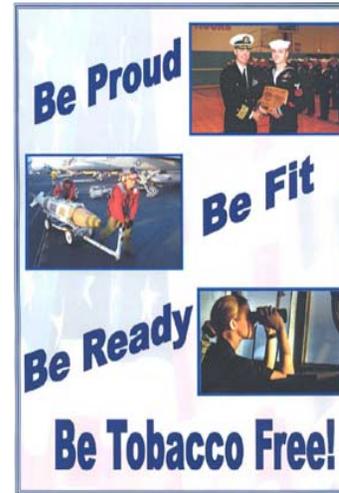
I QUIT !!!

If you have questions about quitting, ask at the Medical or Dental Front Desk of your Health & Wellness Center.

Sample of posters that can be printed from:

www.QMO.amedd.army.mil

Management of Tobacco Use Posters



Limited sample of the many posters that can be downloaded and printed from the Navy Tobacco Tool Kit:
http://www-nehc.med.navy.mil/hp/tobacco/Tobacco_poster.htm

Management of Tobacco Use: A Systems Approach

Treating Tobacco Use and Dependence

A Systems Approach



A Guide for Health Care Administrators, Insurers, Managed Care Organizations, and Purchasers

WHY WE NEED A SYSTEMS APPROACH

The human cost of tobacco use is devastating.

Tobacco is the single greatest cause of disease and premature death in America today and is responsible for more than 430,000 deaths each year. Nearly 25 percent of adult Americans currently smoke, and 3,000 children and adolescents become regular users of tobacco every day.

The financial burden of tobacco use is staggering.

The societal costs of tobacco death and disease approach \$100 billion. Americans spend an estimated \$50 billion annually on direct medical care for smoking-related illnesses. Lost productivity and forfeited earnings due to smoking-related disability account for another \$47 billion per year.

According to *Treating Tobacco Use and Dependence*, a clinical practice guideline released in June 2000 by the U.S. Public Health Service (PHS), efficacious cessation treatments for tobacco users are available and should become a part of standard caregiving. In addition, research shows that delivering treatment to tobacco users is cost-effective. Smoking cessation interventions are less costly than other routine medical interventions such as

treatment of mild to moderate high blood pressure and preventive medical practices such as periodic mammography. In fact, the average cost per smoker for effective cessation treatment is \$163.61.

In summary, for smoking cessation intervention to impact a large number of tobacco users, it is essential that clinicians and health care delivery systems (including administrators, insurers, and purchasers) institutionalize the consistent identification, documentation, and treatment of every tobacco user seen in a health care setting.

Because an increasing number of Americans today receive their health care in managed care settings, health system administrators, insurers, and health care purchasers now play a significant role in the health care of most Americans. Your influence can encourage and support the consistent and effective identification and treatment of tobacco users. Indeed, research clearly shows that systems-level change can reduce smoking prevalence among enrollees of managed health care plans. Therefore, you must assume responsibility to craft policies, provide resources, and display leadership that results in consistent and effective tobacco use treatment.

GUIDELINE RECOMMENDATIONS FOR SYSTEMS CHANGES

These six strategies are recommended in the PHS guideline, *Treating Tobacco Use and Dependence*:

- ▶ Every clinic should implement a tobacco-user identification system.
- ▶ All health care systems should provide education, resources, and feedback to promote provider interventions.
- ▶ Clinical sites should dedicate staff to provide tobacco dependence treatment and assess the delivery of this treatment in staff performance evaluations.
- ▶ Hospitals should promote policies that support and provide tobacco dependence services.
- ▶ Insurers and managed care organizations (MCOs) should include tobacco dependence treatments (both counseling and pharmacotherapy) as paid or covered services for all subscribers or members of health insurance packages.

<http://www.surgeongeneral.gov/tobacco/systems.pdf>

VA/DoD On-Line Resources

VA and Tricare

Smoking and Tobacco Use Cessation Program - Home - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Search the Web Address <http://vhaaidinfo.cio.med.va.gov/smoking/TOC.htm> Go Links

Public Health Strategic Health Care Group

Veterans Health Administration

Smoking and Tobacco Use Cessation Program

As part of the Public Health National Prevention Program, Tobacco Use Cessation Program is responsible for the development and oversight of public health policy for the VA Health Care System. Smoking and tobacco use. Smoking remains the leading preventable cause of premature death in the United States and a leading cause of disability among veterans receiving health care in the United States. In 2002, 18 percent of veterans smoke, compared with 23 percent of the general population. Therefore, smoking and tobacco use cessation remains one of the most significant challenges in VA today.

The Smoking and Tobacco Use Cessation Program actively works to increase access to evidence-based practices for veterans with or without tobacco. VA clinical programs directed towards helping veterans quit tobacco use currently include consistent screening for tobacco use during primary care visits and a broad array of clinical programs that range from individual counseling to participation in evidence-based...

PHSHG Home Page
Public Health Watch
Center for HIV Research Resources
Center for Quality Management in Public Health
Flu
HIV/Hep C Prevention
HIV-Related Links
HIV Testing and Informed Consent
Infection: Don't Pass It

Military Health System - October 13, 2005 - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Search the Web Address http://www.ha.osd.mil/smoking_cessation/default.cfm Go Links

HEALTH AFFAIRS A to Z SEARCH HELP SITE MAP

Health Affairs Organization

Health Affairs

Enter Keyword Entire Site Go Browse A To Z Go

Health Affairs Home
Messages from the ASD
About Health Affairs
Clinical Programs
Force Health Protection and Readiness
Policy Documents
Statements to Congress
In the News
MHS Strategic Plan

MHS Information Beneficiary Information Provider Information

Tobacco Free in the DoD

tobacco hurts readiness - quit today

On behalf of the Department of Defense, we would like to congratulate you on your decision to obtain information to become tobacco free. When looking at the health, financial, and social costs of tobacco, the DoD knows that military members and their families will greatly benefit from being tobacco free. This website offers you the opportunity to gain information on the hazards of tobacco use, the benefits of quitting, and locations available to you to support your decision to quit. In the future, we intend to broaden web-based tobacco cessation activities. Check out the tobacco cessation information on your Service website or visit the [Smokefree website](#) sponsored by the Centers for Disease Control and the National Cancer Institute. By becoming tobacco free, you will help yourself, your family, your Service, and the mission readiness of your Country.

VA/DoD On-Line Resources Navy Tobacco Tool Kit

The screenshot shows a Microsoft Internet Explorer browser window displaying the Navy Environmental Health Center (NEHC) website. The browser's address bar shows the URL: http://www-nehc.med.navy.mil/hp/HP_Toolbox/HP_Tc. The website header features the NEHC logo and navigation buttons for Home, Index, Directorates, Field Activities, and Special Interest. Below the header, there is a section for 'HEALTH TOPICS' and 'HEALTH PROMOTION TOOL BOX'. The 'HEALTH TOPICS' section includes links for Alcohol & Drug Abuse Prevention, Clinical Practice Guidelines, Clinical Preventive Services, Clinical Epidemiology, Health Risk Assessment, Injury Prevention, Nutrition, and Physical Fitness. The 'HEALTH PROMOTION TOOL BOX' section is currently displaying resources for November, titled 'November - Tobacco Prevention and Cessation'. This section includes a graphic of a 'HP Toolbox' with a 'YOU CAN QUIT!' sign, and lists the following resources: Message for Commanding Officers, Activity Ideas, Plan of the Day Notes, Fact Sheets/Guides, Posters/Brochures/Decals, and a link to 'Learn more about this month's tonic...'. The Navy Medicine logo is also visible in the top right corner of the page.

Has a wealth of tobacco cessation resources for providers, commanders and patients. Click here for more information:

On-line Tobacco Use Cessation Training Resources are available at:
http://www-nehc.med.navy.mil/hp/HP_Toolbox/HP_ToolBox_Nov.htm

VA/DoD On-Line Resources Army and Air Force

USACHPPM - DHPW - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Search the Web [Search] Address <http://chppm-www.apgea.army.mil/dhpw/Population/T> Go Links >>

USACHPPM
Readiness thru Health

USACHPPM Search [search]

US Army Center for Health Promotion and Preventive Medicine
Directorate of Health Promotion and Wellness (DHPW)

USACHPPM Home

DHPW Home

All DHPW Resources/Services

Subject Matter Expertise/Consultative Services

DHPW Site Map

Contact DHPW

Tobacco Cessation
(Updated 7 October 2005)

Great American Smokeout Resources
Click on the links below to access resources for the Great American Smokeout.

[Great American Smokeout 2005 Resources](#)

[Great American Smokeout Resource Archive](#)

News release: National Smoking Cessation Outline Network to be developed
Click [here](#) to read about the Department of Health and Human Services plan to develop a national tobacco cessation resource.

Tobacco Cessation Provider Competency Course
This course is designed to train providers to prescribe nicotine replacement therapy medication. The course was written by the Population Health Center Team at Fort Hood, Texas. The course addresses: effects of tobacco on all body systems; mechanism of nicotine's effect; tobacco cessation assessment tools; discussion of FDA-approved pharmacotherapies for tobacco cessation; alternate tobacco cessation modalities; tobacco cessation patient management; connection between stress, depression, and tobacco use in relation to triggers and

AFMS KX - Health Promotion - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Search the Web Air Force Population Health [Search] Address <https://kx.afms.mil/ctb/groups/dotmil/documents/afms> Go Links >>

AFMS Knowledge Exchange

Home | Site Map | My Settings | My Projects | Join | Login | Help

Headquarters View | Functional View | MAJCOMS & MTFs

Health Promotion Knowledge Junction

Contribute | Bookmark | Feedback | Subscribe

Documents:

- All Documents
- Announcements
- Briefings / Presentations
- Graphics
- Lessons Learned
- Minutes
- Multimedia
- Newsletters
- Policies / Directives
- Reference Documents
- Reports
- Training
- Other Documents
- Discussion Threads

Health Promotion Operations

Tobacco Links

- [American Lung Association](#)
- [DOD/VA Tobacco Use Cessation Clinical Practice Guidelines](#)
- [Global Tobacco Prevention & Control](#)
- [MEDLINEplus: Smoking Cessation](#)
- [National Spit Tobacco Education Program](#)
- [NEHC-Tobacco Cessation Home Page](#)
- [Smokefree.gov](#)
- [Tobacco Cessation Guideline](#)
- [Tobacco Free Initiatives \(WHO\)](#)
- [Tobacco Information and Prevention Source \(CDC\)](#)

Click here for information and links to a Tobacco Cessation Provider Competency Course:

<http://usachppm.apgea.army.mil/dhpw/Population/TobaccoCessation.aspx>

https://kx.afms.mil/ctb/groups/dotmil/documents/afms/knowledgejunction.hcst?doctype=subpage&functionalarea=HealthPromotion&docname=CTB_013770

On-Line Resource for Busy Clinicians to Help Patients Quit

The screenshot shows a Microsoft Internet Explorer browser window. The title bar reads "Slide 1 - Microsoft Internet Explorer". The address bar contains the URL "http://smokingcessationleadership.ucsf.edu/30sec/30s". The main content area displays a slide with a dark red background and white text. The slide title is "Thirty Seconds to Save a Life" and the subtitle is "What busy clinicians can do to help their patients quit smoking". A navigation pane on the left lists the following items: 1 Thirty Seconds to Save a Life, 2 The Grim Statistics, 3, 4 Why Bother?, 5 The Benefits Of Quitting Smoking, 6 The Benefits Of Quitting Smoking (2), 7 The Benefits Of Quitting Smoking (3), 8 The Benefits Of Quitting Smoking (4), and 9. The status bar at the bottom indicates "Slide 1 of 36" and "Slide Show".

Slide 1 - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Media Print Copy Paste Refresh Home

Search the Web Search Address <http://smokingcessationleadership.ucsf.edu/30sec/30s> Go Links

1
Thirty Seconds to Save a Life

2 The Grim Statistics

3

4 Why Bother?

5 The Benefits Of Quitting Smoking

6 The Benefits Of Quitting Smoking (2)

7 The Benefits Of Quitting Smoking (3)

8 The Benefits Of Quitting Smoking (4)

9

Thirty Seconds to Save a Life

What busy clinicians can do to help their patients quit smoking

Smoking Cessation Leadership Center

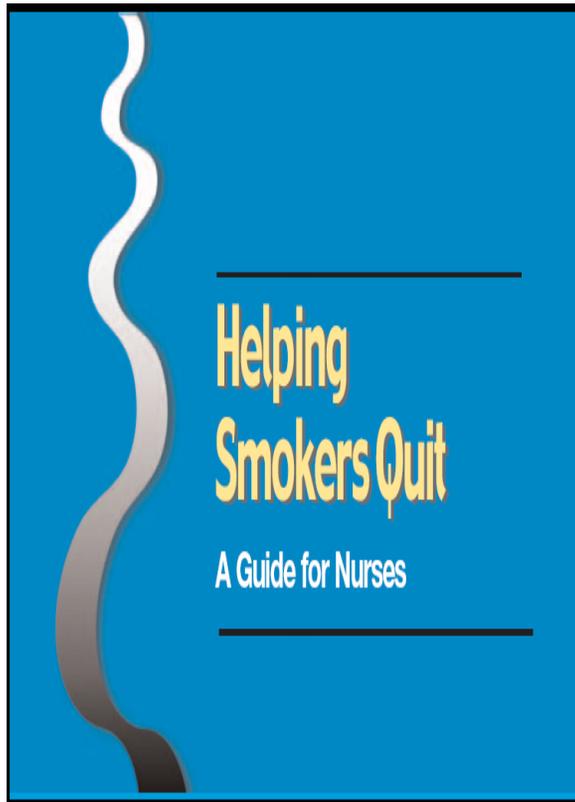
Outline Slide Show

Slide 1 of 36

javascript:GoToSld('slide0002.htm'); Internet

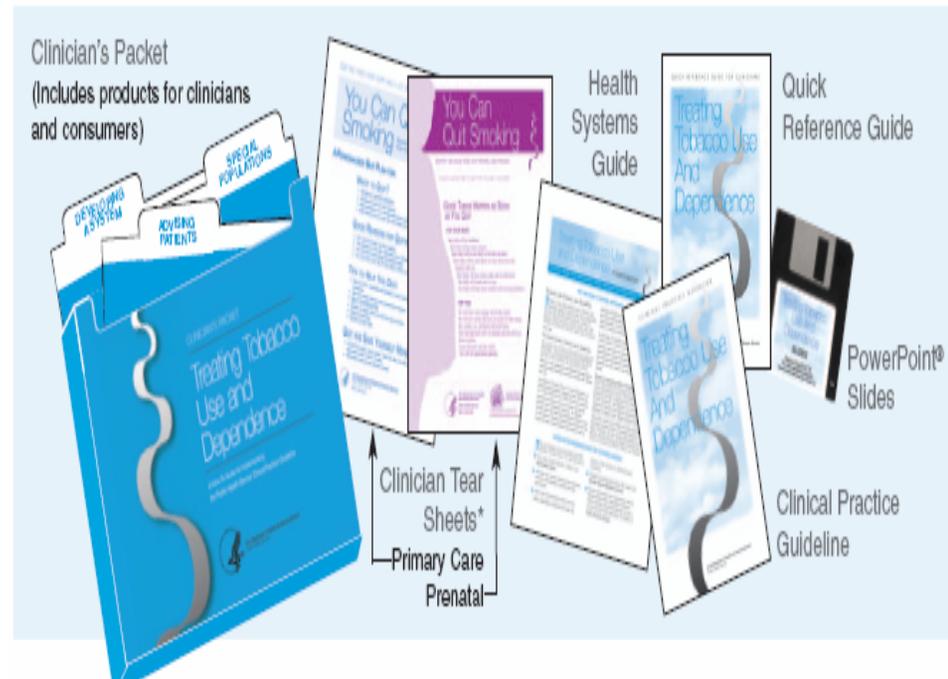
http://smokingcessationleadership.ucsf.edu/30sec/30sec_files/frame.htm

Resources for Providers



Find these nationally recognized tobacco cessation tools online or which can be ordered and are designed to encourage clinicians to help their patients quit using tobacco and adopt a healthier lifestyle here:

<http://www.ahrq.gov/path/tobacco.htm>



CDC Resources for Health Providers

Resources for Health Professionals

Handheld Computer Smoking Intervention Tool

The National Cancer Institute's [Handheld Computer Smoking Intervention Tool \(HCSIT\)](#) is designed for clinicians to assist with smoking cessation counseling at the point-of-care. This easy-to-use program can be used with both Palm® and Microsoft™ Pocket PC handheld computers.

Web Sites for Health Professionals

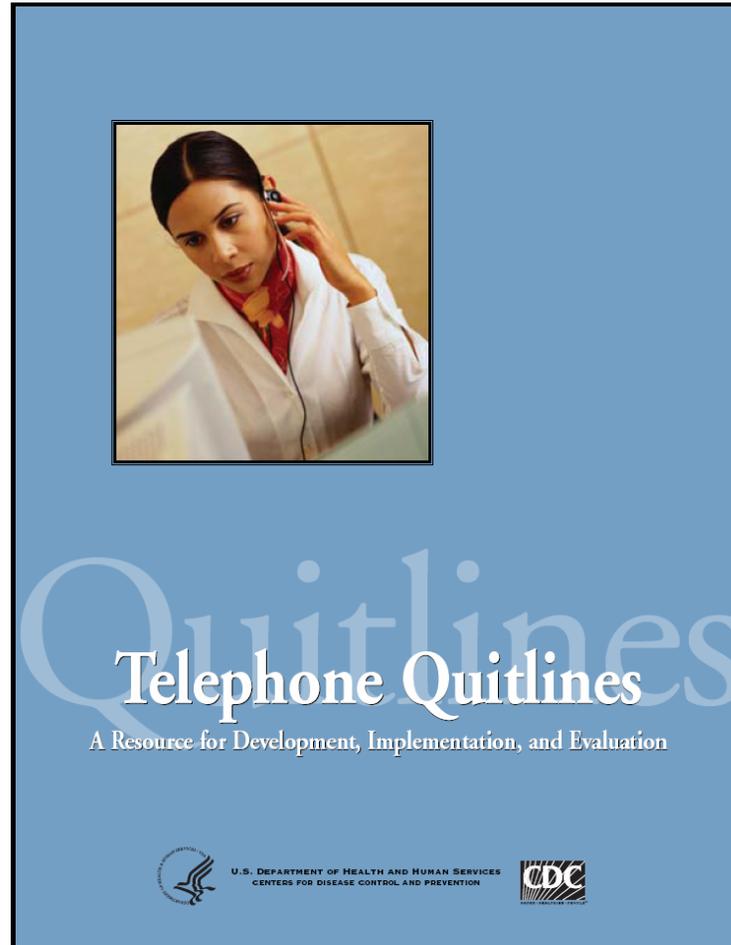
Treatobacco.net
Treatobacco.net provides evidence-based data and practical support for the treatment of tobacco dependence. It is aimed at physicians, nurses, pharmacists, dentists, psychologists, researchers, and policy makers. Treatobacco.net is produced and maintained by the Society for Research on Nicotine and Tobacco, in association with the World Bank, Centers for Disease Control and Prevention, the World Health Organization, the Cochrane Group, and a panel of international experts.
<http://www.treatobacco.net>

Cancer Control PLANET
The Cancer Control PLANET portal provides access to web-based resources that can assist in: assessing the cancer burden in a given state, identifying potential partner organizations; understanding the current research findings; accessing and downloading evidence-based programs and products; and providing guidelines for planning and evaluation.

Click here to download a handheld computer intervention tool:

<http://www.smokefree.gov/hp.html>

Telephone Quitlines: A Resource for Development, Implementation and Evaluation



http://www.cdc.gov/tobacco/quit/Quitlines/FinalQuitlines_508edit.pdf

Tobacco ICD-9-CM Codes

Medical

Tobacco Specific ICD - 9 - CM Codes	
Tobacco Use Disorder	305.1*
Accretions on teeth, including tobacco	523.6
Toxic Effect of Tobacco	989.84
History of Tobacco Use	V15.82
Tobacco Cessation Counseling	V65.49 4 (DoD unique extended)*
Non-specific ICD - 9 - CM Codes That Can Relate to Tobacco Use	
Drug Withdrawal Syndrome	292.0
Complications of Pregnancy due to Drug Dependence	648.3
Procedure Code for Group Education	
Privileged Provider	99078 with E&M code 99212
Non-Privileged Provider	99078 with E&M code 99211

* Recommend these two codes for a distinct visit targeted solely at addressing tobacco use cessation.

Dental

Tobacco Specific American Dental Association (ADA) Code	
Tobacco Cessation Counseling	01320
Non-specific ADA Codes That Can Relate to Tobacco Use	
Dental Examination	00140
Oral Hygiene Instruction	01330

Management of Tobacco Use Metrics

Tobacco Management Working Group Suggested Indicators

- Decrease the number of *tobacco users*
- Increase the number of patients *screened* for tobacco use
- Increase the number of patients *advised to quit*
- Increase *documentation* of patient smoking status and treatment outcomes
- Increase *number of tobacco users* enrolled in treatment (e.g. prescribed pharmacotherapy)
- Increase level of *trained providers*

HEDIS Performance Measures

- Percentage of patients advised to quit
- Percentage of patients who were recommended or discussed smoking cessation medications
- Percentage of patients who were recommended or discussed smoking cessation methods or strategies

Web Resources

www.QMO.amedd.army.mil

www.QMP.med.va.gov/cpg/cpg.htm

U.S. Army MEDCOM Quality Management Office

What's New

Patient Safety Update
Significant revisions have just been made to the Patient Safety portion of this web site. New and important information has been added.
[Click Here to Check It Out...](#)

Resource Section Recently Added to Web Site
[Click Here to Check It Out...](#)

Upcoming Post-Deployment VTCs...
For more information and to register, click here...
[Click here to see if your facility is registered](#)

Slide Sets for VTC:

1. Agenda & Number to Call in Questions
2. Post-Deployment Medical Exam
3. Key Elements of PDH CPO
4. Process: Re-engineering to Implement the PDH Clinical Practice Guideline (Low time to download on Right Click on Link and "Save Target As" to your hard drive)
5. Risk Communication

[VTC Attendee Sign-In Sheet... Fill Out and Fax Back](#)

[VA/DoD Diabetes Specialty Practice Group Educators Conference August 4-5, 2003](#)
[Click Here for Conference Information...](#)

Benefits of ALLPAT...
The largest hypodermis trial over. A video tape of this satellite broadcast is coming to your facility soon.
[Click Here for More Information...](#)
[Click Here to Proceed to On-Line CMEs](#)

Clinical Practice Guidelines
Visit our new on-line shopping system available to Army facilities to replenish supplies of the Clinical Practice Guideline Tool Kits. Order refill forms for multiple CPO's at one time. Receive an email confirmation of your order with your order number and summary. Once your order is shipped you can track it right on our web site.
[Click Here to Check It Out...](#)

Web Links Disclaimer
Links to non-federal organizations are provided solely as a public service to our users. LINKS do not constitute an endorsement of any organization by the Army Medical Department (AMEDD) or the Department of Defense and users should be advised. The AMEDD is not responsible for the content of the individual organization's web pages found via these links.

Please feel free to comment on the content and layout of this site. Our goal is to meet your customer's needs to the best of our ability. Please e-mail us.

Clinical Practice Guidelines

Office of Quality and Performance

What's New!
[Diabetes Mellitus \(DM\)](#)
[Post-Operative Pain](#)
[Chronic Obstructive Pulmonary Disease \(COPD\)](#)
[Health Tips for CHF](#)
[Chronic Heart Failure \(CHF\)](#)
[Dyslipidemia \(LDLPS\)](#)
[Erectile Dysfunction \(ED\)](#)
[Low Back Pain \(LBP\)](#)

Clinical Practice Guidelines
Implementation of evidence-based clinical practice guidelines is one strategy VHA has embraced to improve care by reducing variation in practice and streamlining "best practices". Guidelines, as general tools to improve the processes of care for patient subsets, serve to reduce errors, and provide consistent quality of care and utilization of resources throughout the system. Guidelines also are instrumental for accountability and facilitate learning and the conduct of research. The guidelines on this site are those endorsed by VHA's National Clinical Practice Guidelines Council.

Other Guidelines
VHA, in collaboration with the Department of Defense (DOD) and other leading professional organizations, has been developing clinical practice guidelines since the early 1980s. Guidelines for the Rehabilitation of Stroke and Amputation and the Care Guide for Ischemic Heart Disease were among the first distributed through VHA in 1990 and 1997. Since that time, numerous others, including guidelines on Diabetes Mellitus, COPD, Major Depressive Disorder, Psychiatric Tobacco Use Cessation (TUC), and Chronic Obstructive Pulmonary Disease (COPD).

Other
[Post-Deployment Health Evaluation & Management](#)
[Medically Unexplained Symptoms, Chronic Pain & Fatigue](#)
[Post-Operative Pain](#)
[Histotoxic, Chemical, and Radiation Induced Injuries](#)
[Terrorism Pocket Guide - Non VA Ordering Information](#)

Other Guidelines
[Chronic Heart Failure \(CHF\)](#)
[Hypertension \(HTN\)](#)
[Ischemic Heart Disease \(IHD\)](#)
[Dyslipidemia \(LDLPS\)](#)

Endocrine
[Diabetes Mellitus \(DM\)](#)

Eye
[Glaucoma](#)

Genitourinary Tract
[Benign Prostatic Hyperplasia \(BPH\)](#)
[Gynecitis](#)
[Erectile Dysfunction \(ED\)](#)
[The End Stage Renal Disease \(ESRD\)](#)

Mental Health
[Major Depressive Disorder \(MDD\)](#)
[Psychoses \(PSYCHO\)](#)
[Substance Use Disorder \(SUD\)](#)

Musculoskeletal
[Low Back Pain \(LBP\)](#)

OB/GYN
[Uncomplicated Pregnancy \(UP\)](#)

Pulmonary
[Asthma](#)
[Tobacco Use Cessation \(TUC\)](#)
[Chronic Obstructive Pulmonary Disease \(COPD\)](#)

Other
[Post-Deployment Health Evaluation & Management](#)
[Medically Unexplained Symptoms, Chronic Pain & Fatigue](#)
[Post-Operative Pain](#)
[Histotoxic, Chemical, and Radiation Induced Injuries](#)
[Terrorism Pocket Guide - Non VA Ordering Information](#)

[Contact](#)
[FAQ](#)
[Policy](#)
[Presentations](#)

[Home Page](#) / [Search](#) / [Site Map](#) / [Facilities Locator](#) / [Disclaimer](#)
[Privacy & Security Statement](#) / [Freedom of Information Act](#) / [Contact Us](#) / [Accessibility](#)

Obtain and reorder CPG Toolkits & materials.

Military Health System Population Health Portal

MHS Population Health Portal



Improve the Health Status of your Population with the ...
Air Force Population Health Portal
Naval Population Health Manager
Army Population Health Information Cooperative
... the one tool for all Services, known as the MHS Portal.

A Tool-Driven web-based tool which provides detailed "Action Alerts" for Clinical, Preventive Services, Disaster and Conditions Management at the Provider as it Clinic level for your overall population:

- Click through "Action Card" design
- Use detailed clinical reports with Best/Prevalence options
- Download epidemiological guidelines with retail treatments
- Device level breakdowns connect with aggregate reports available



Demographic Filter:
Population data is stratified by parameter, service, age, and gender

Preventive Services Tab:
Easily identify and access six preventive services through visualization

- Track your success with national DSDSP benchmarks
- Click and drag visualization currently limited to Air Force (AF) and not Army elements in use

Disaster/Conditions Management Tab:
Aggregately manage 10 elements or conditions with visualization, generate reports and aggregate counts

- Track your success with national DSDSP benchmarks

REQUEST AN ACCOUNT TODAY...
<http://pophealth.afms.mil/tsphp>



The MHS Portal was developed in part for Services' request for actionable information for the Division of Health and Medical Management (DHMM) Division of the Population Health and Medical Management (PHMM) Division of the TRICARE Management Activity in collaboration with the Air Force Population Health Support Division at San Antonio and Denver patterns.

PHMM Mission:
Provides policies, instructions, programs, forms, and resources to create, improve, and sustain the health status of the population.

PHMM Vision:
The information source for population health information to facilitate the transformation of the MHS from a reactive to proactive healthcare system.

Population Health and Medical Management Division
Office of the Chief Medical Officer, TRICARE Management Activity,
1111 Lomborg Pike, Suite 100, Falls Church, VA 22041
703-681-0000, DOD 703-681, FAX 703-681-1240

CONTACT INFORMATION

Air Force Population Health Portal Col. Carol Wallace, USAF, MC, USAF AF Population Health Support Division 203 203 2000 or DOD 703 681 carol.wallace@af.mil	Army Population Health Manager Col. Peggy Gaudin RC, USAF R. RANDI-AMDD 300 703 1221 or DOD 703 1221 peggy.gaudin@army.mil	Army Population Health Information Cooperative Lt. Marjory Wynnman RC, MCN R. RANDI-AMDD 300 203 2000 or DOD 703 681 www.army.mil/pophealth.mil
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<https://pophealth.afms.mil/tsphp/login/login.cfm>