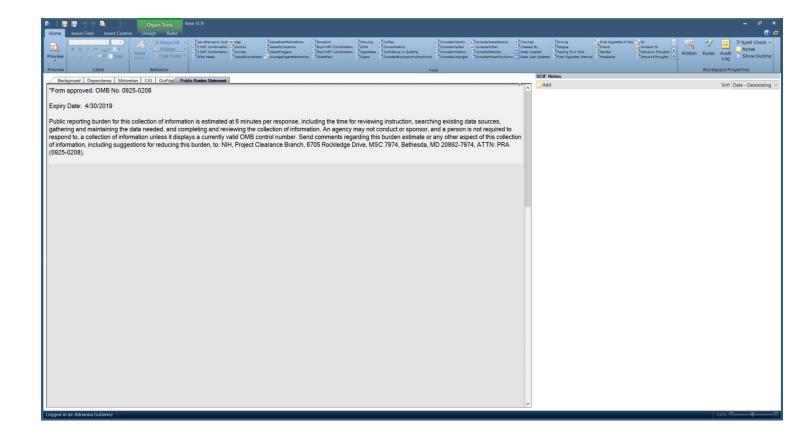
NCI/Office of Communications and Public Liaison

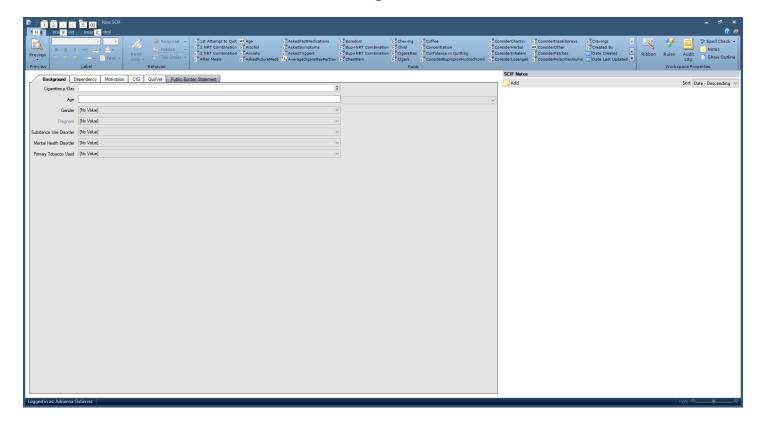
APPENDIX 1C

SMOKING CESSATION INTAKE FORM (SCIF) with SCREEN SHOTS

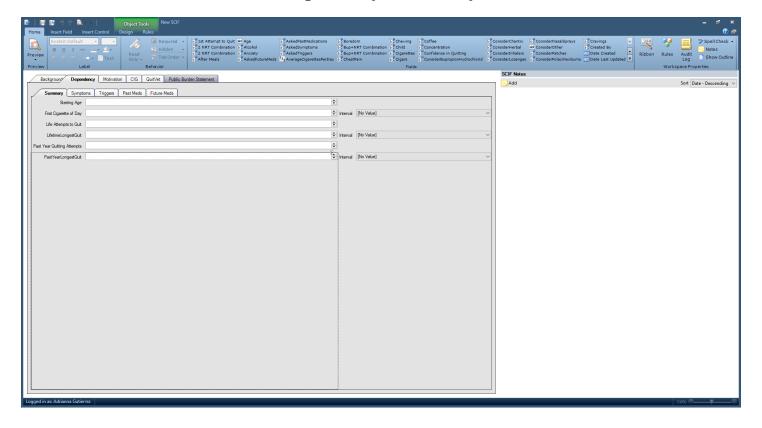
Public Burden Statement



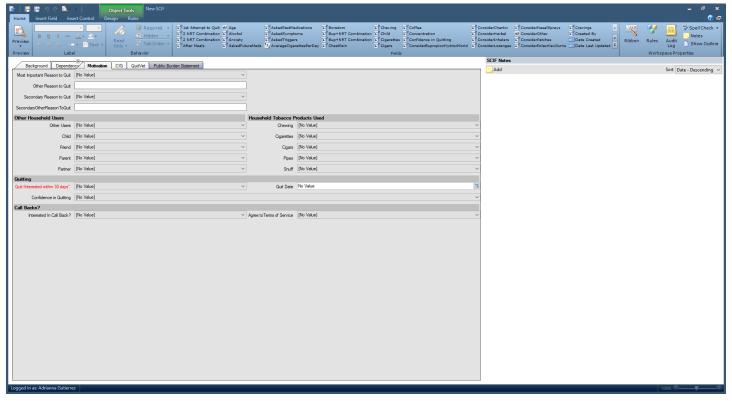
Background



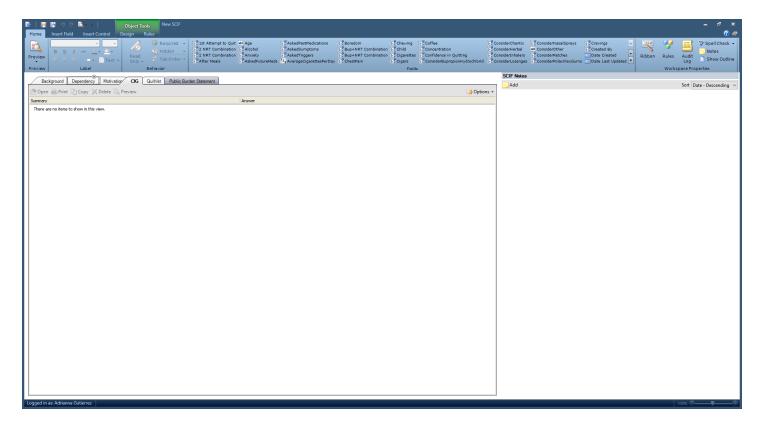
Dependency – Summary



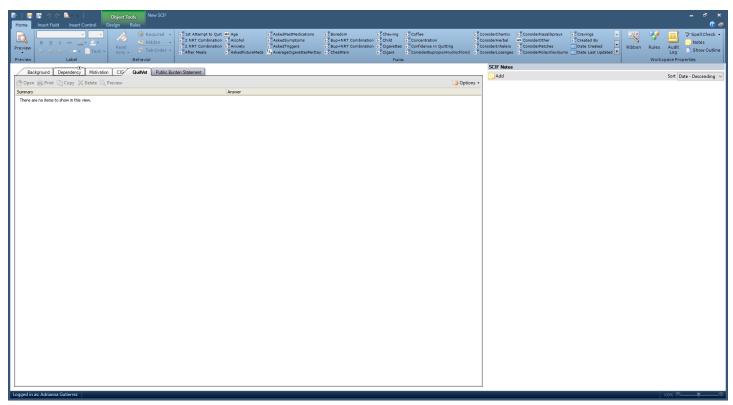
Motivation



CIG



QuitVet



Service

♦ Subject of Interaction

- Subject 1
 - o No Value
 - o Hospital/Clinic/Physician/Second Opinion
 - o General Cancer Site Information
 - o Treatment/Side Effects
 - o Hospice/Palliative Care/Home Care/Supplies
 - o Financial Assistance
 - o Monetary/Personal Property Donations
 - o Publication Request
 - o Other Inquiry
 - o Screening Mammogram
 - o Diagnostic Mammogram
 - o Pap Test
 - o PSA Test
 - o Screening Colonoscopy
 - o Screening Spiral CT for Lung
 - o Screening MRI for Breast
 - o Diagnostic MRI for Breast
 - o Other Diagnostic Test
 - o Other Screening Test
 - o CT-General Information Only
 - o CT-General Information and Search
 - o CT-CCR Clinical Trials

- o CT-Results and Outcomes
- o Support Groups/Counseling Services
- o Emotional Wellness
- o Other Psychosocial Issue
- o Suicidal Client
- o HPV
- o Heredity/Genetics/Family History
- o Environmental Risk Factors
- o Diet and Nutrition for Prevention
- o Exercise/Obesity for Prevention/Risk
- o Hormone Use and Cancer Risk
- o HIV/AIDS
- o EMF Cell Phones
- o EMF Other
- o Other Risk Factors
- o CAM General Information
- o CAM Biologically Based Products
- o CAM-Mind Body/Spirituality/Energy Med
- o CAM-Manual Therapies
- o CAM-Whole Systems
- o Medical Marijuana
- o Body/Tissue/Hair Donations
- Genetic Services
- o Report/Statistics
- O Proton Beam Radiation (txt/side effects)
- o NCI Programs & Initiatives
- o Employment at NCI
- o NCI Budget
- o NCI Funding Opportunities
- o Scientific Materials for Researchers
- o NCI & ARRA
- o Cancer.gov Comments or Questions
- o Problems with CT Search
- o NCI Logo Request
- o Artwork Request
- o NCI Other
- O Cigarettes
- o Cigars, Cigarillos or Little Cigars
- o Pipes
- o Chewing Tobacco, Snuff, or Dip
- o Other Tobacco
- o Secondhand Smoke
- Marijuana (recreational use)
- o Cessation Counseling/Information
- Subject 2 Same as 1
- Subject 3 Same as 1
- Subject 4 Same as 1
- Subject 5 Same as 1

♦ Cancer Site 1

- Aids-related cancers
- ALL
- AML
- Anal
- Biliary tract
- Bladder
- Brain
- Breast
- Carcinoma of unknown primary
- Cervical
- CLL
- CML
- Colorectal
- Endometrial/Uterine
- Esophageal
- Eye
- Gastrointestinal carcinoid tumor/GIST
- Head and neck
- Hodgkin lymphoma
- Myeloma/Plasma cell neoplasm
- Non-Hodgkin lymphoma
- Ovarian
- Pancreas
- Prostate
- Renal (kidney) and renal pelvis
- Skin cancer (nonmelanoma)
- Small intestine
- Soft tissue
- Stomach/Gastric
- Thyroid
- Break off
- Other Central nervous system
- Other Digestive
- Other Endocrine system
- Other Hematologic system
- Other Leukemia
- Other Lymphoma
- Other Musculoskeletal and connective tissue
- Other Reproductive, female
- Other Reproductive, mal
- Other Respiratory
- Other Urinary organs
- Other cancers
- Childhood cancers
- Not applicable/No specific site mentioned

♦ Special Codes

- Special Code
 - o No Value

- o CTCA Calls
- o Affordable Care Act (ACA)
- O In the news
- o Cancer Bulletin Ending
- o Recalcitrant Cancer Research Act
- o UCSF Study Call
- Special Code 2 (same as 1)

♦ Referrals Given

- Referral 1
 - o No Value
 - o CIS information service
 - o Smoking Quitline
 - o Public Inquiries
 - o POS
 - o NCI Doc/Program
 - o NCI Designated Cancer Center
 - o NCI CCR/Clinical Center
 - o NCCCP
 - o CDC-BCCEDP
 - o CDC-BCCEDP Missouri
 - o Genetics Services
 - o Other Healthcare Facility
 - o National or Community Org/Other Gov. Program
 - o International Referral
 - o Other
 - o None
 - o Break Off
- Referral 2 (same as 1)
- Referral 3 (same as 1)
- Referral 4 (same as 1)
- Referral 5 (same as 1)
- Referral 6 (same as 1)
- ◆ Follow-up Actions
 - Action 1
 - o No Value
 - o Sent information by mail
 - o Emailed information
 - Social Media post
 - o Warm transfer POS
 - Warm transfer org/agency
 - o Scheduled call back
 - o Other
 - Action 2 (same as 1)
 - Action 3 (same as 1)
 - Action 4 (same as 1)
 - Action 5 (same as 1)

- Clinical TrialsYesNo

♦ Background Screen

- Cigarettes per Day
- Age
- Gender
 - o Male
 - o Female
- Substance Use Disorder
 - o Yes
 - o No
- Mental Health Disorder
 - o Yes
 - o No

Dependency Screen:

- ◆ Age when starting smoking cigarettes
- First cigarette of the day after awakening
- In life, number of quit attempts for 1 day or longer
- Duration (beyond a day) of successful quitting
- In past year, number of quit attempts
 - First call to the quit line in the past 12 months?
- ◆ Longest time quit

◆ Types of tobacco have you used in the past 30 days

- a. Cigarettes
 - O Menthol cigarettes?
 - Yes, I usually smoke menthol cigarettes
 - No, I usually smoke other types of cigarettes (non-menthol)
 - Don't know
 - Refused
 - Not asked
- b. Cigars, cigarillos, or little cigars
- c. A pipe
- d. Chewing tobacco, snuff, or dip
- e. Any other type of tobacco

♦ Last time smoked a cigarette, even a puff :

- a. dd/mm/yyyy
- b. Don't know
- c. Refused
- d. Not asked
- Avg. Number of cigarettes smoked each day ____
- Currently smoke cigarettes every day, some days, or not at all? (Note: "currently" refers to right now, today.)
 - a. Everyday
 - b. Some days
 - o Number of days smoked in the last 30 days: ____
 - Don't know
 - Refused

Not asked

- c. Not at all
- d. Don't know
- e. Refused
- f. Not asked
- ♦ Age?
- ♦ Sex?
- ◆ If female, are you pregnant right now?

♦ Symptoms experienced after quitting

- Feeling irritable, angry, agitated
- Mood swings, depressed, down, or blue
- Nervous, anxious, jumpy
- Cravings
- Trouble sleeping, nightmares, dreams
- Has not tried to quit before (1st quit attempt)
- Weight gain
- Increased appetite or hunger
- Tired, fatigued
- Feeling ill, sick, nausea, general malaise
- Headache
- Chest pain, shortness of breath
- Stress
- Unable to concentrate
- Dizzy, lightheaded
- Shakes
- Other (please explain)

♦ Triggers

- Did not ask triggers
- After meals
- Alcohol
- Other substance abuse
- Anxiety
- Coffee
- Driving
- Fatigue
- Driving
- Phone calls
- Sadness
- Stress
- Watching TV
- Work breaks
- Nightmares
- Intrusive thoughts
- Other (please explain)

♦ Past medication to quit

- Did not ask
- Used in past

- Bupropion hydrochloride (e.g.Zyban, Wellbutrin)
- Chantrix
- Herbal
- Inhalers
- Lozenges
- Nasal sprays
- Patches
- Policrilex gums
- 2 NRT combinations
- Bup+NRT combination
- Other

♦ Future Meds

- Did not ask
- Not interested
- Bupropion hydrochloride
- Chantrix
- Herbal
- Inhalers
- Lozenges
- Nasal sprays
- Patches
- Policrilex gums
- 2 NRT combinations
- Bup+NRT combination
- Other

♦ Comorbidity

- Substance Abuse
- Other

Motivation Screen Questions:

♦ Most important reason for wanting to quit

- Restrictions placed on smokers in restaurants, at work, and other public places
- Family or friends
- To feel more in control of your life
- To improve your health
- To save money
- To improve your health
- Because your doctor told you to
- Because of your children (grandkids)
- For a healthy pregnancy
- Just tired of smoking
- Professionalism, Role model
- Religious reasons
- Extracurricular activities (e.g. basketball, jogging, dancing, volleyball, etc.)
- Age
- Concern about cancer prompted by death of family member or public figure
- Dirty/bad habit
- Other (please explain)

Did not ask

♦ Secondary Reason?

- See examples from last question
- No other reason
- Did not ask

♦ Others in the household currently using tobacco products (one or more)

- Other Users?
- Child?
- Friend?
- Parent?
- Partner?

♦ Household Tobacco Products Used

- Chewing
- Cigarettes
- Cigars
- Pipes
- Snuff

Quitting

- Quitting next 30 days?
- Quit date
- Confidence in Quitting
 - o No value
 - o Somewhat confident
 - o Confident
 - o Neutral
 - o Not confident at all

♦ Call Backs?

- Interested in call back?
- Agree to terms of service?