

# Supporting Your Pregnant and Postpartum Patients Who Smoke or Vape

## A Coaching Guide

Instructions and suggested  
language to help you engage  
and counsel patients on  
tobacco use treatment





# 1 Ask

## Ask patients about their smoking or vaping during every visit.

“Do you smoke? What about vaping (using e-cigarettes) or smoking hookah? Have you smoked in the past?”

“Tell me a little about your smoking. Has anything changed since your last visit?”

## Assess your patients’ smoking patterns.

These questions can help you assess your patients’ nicotine dependence:

“How many cigarettes do you smoke per day?”

- “One to 10.”
- “More than 10.”
- “I do not smoke every day.”

“How soon after waking up do you smoke your first cigarette?”

- “Thirty minutes or less.”
- “More than 30 minutes.”
- “I do not smoke every day.”

These questions will help assess nicotine intake and dependence to guide dosing of NRT. Note that menthol cigarette use may affect nicotine dependence and make it harder to reduce use.

You can use similar questions for patients who vape:

- When assessing vaping patterns, try to gauge how much someone vapes by asking which products they use and how long they last (such as whether a cartridge, pod or disposable device lasts them more or less than two days).
- Similar to smoking, ask how soon after waking up patient first vapes.

## Ask your patients what they know about smoking, vaping and pregnancy.

Acknowledge what your patients already know and ask if you can share more information with them. If they say “yes,” use the table on Page 2 to help you share new information. If they say “no,” ask again at a later time.

**Risks of smoking during and after pregnancy**

- Preterm birth
- Low birth weight
- Some birth defects (such as cleft lip or cleft palate)
- Pregnancy complications (such as ectopic pregnancy, placental abruption and stillbirth)
- Decreased milk production (if breastfeeding)

**Risks of secondhand smoke exposure for infants and children**

- Sudden infant death syndrome (SIDS)
- Ear infections
- Respiratory infections
- Decreased lung function (which increases the risk of asthma attacks)

Less is known about the health effects of vaping, but nicotine is associated with placental insufficiency and can cause delayed growth and other complications. Vaping is not a safe alternative to smoking during pregnancy.

**“Smoking during pregnancy is dangerous for you and your baby and can cause many issues, including pregnancy complications (such as ectopic pregnancy, pregnancy that occurs outside the uterus, or problems with the placenta), higher risk of the baby being born early, delayed growth and birth defects.”**

**“Vaping is not a safe alternative to smoking. Vaping can expose your baby to the same amount of nicotine as smoking, which can affect how your baby grows.”**

**Assess your patients’ readiness to change.**

Ask an open-ended question to start assessing your patients’ readiness and motivation to make a change.

**“People often think about changing their smoking during pregnancy. What are your thoughts on changing your smoking or cutting back?”**

## 2 Assist

### Assist patients by providing counseling and medications to help them reach their goals.

Use motivational interviewing approaches to understand and clarify your patients' goals.

- Ask open-ended questions.

**“When do you crave smoking?”**

- Explore discrepancies between goals and current behaviors.

**“It sounds like avoiding smoking while you are pregnant is really important to you, but it is hard and can be uncomfortable. Can I share some ideas with you that might help?”**

- Express empathy through reflective listening.

**“It sounds like trying to cut back on vaping has been really challenging.”**

- Support self-efficacy. Encourage them to be optimistic.

**“You did really well last time. You made it one week without smoking!”**

If your patient is interested in treatment or changing their smoking, provide guidance and counseling to help them reach their goals.

- Review lessons learned with your patient from any previous attempts to stop or reduce their smoking, including issues with medications, cravings and triggers.
- Discuss anticipated challenges and think of potential strategies with your patients, including changing routines, using distraction tools and avoidance. The table on Page 4 may help.

<b>Issues To Explore</b>	<b>Strategies</b>
<p><b>Being around people who smoke or vape</b></p>	<ul style="list-style-type: none"> <li>• Tell friends and family members you are making a change and ask for help in supporting you and your baby.</li> <li>• Ask friends or family members who smoke, especially if they live with you, if they would like to change their smoking too.</li> <li>• Avoid taking breaks at work or school with others who smoke or vape. Take a break at a different time or a walk outside instead.</li> </ul>
<p><b>Places and situations that make you want to smoke or vape</b></p>	<ul style="list-style-type: none"> <li>• Avoid stores where you usually buy cigarettes or vapes. Try taking different routes so you do not have to pass those stores.</li> <li>• If you usually smoke or vape at home, try changing where you sit or rearranging the room to help break the routine.</li> <li>• If you usually smoke or vape while walking outside, during work breaks, or at specific times of the day, try changing your routine (such as taking a different route or break at a different time) or using a distraction technique (such as focusing on your breathing, doodling or coloring, or counting things around you).</li> </ul>
<p><b>Drinks or food that make you want to smoke or vape</b></p>	<ul style="list-style-type: none"> <li>• If you drink coffee, hold your cup in the hand you usually hold your cigarette or vape in, or switch to tea or another drink.</li> <li>• Continue to avoid drinking alcohol. If you are at a place that serves alcohol, try drinking seltzer, juice or something else instead.</li> </ul>
<p><b>Feelings that make you want to smoke or vape</b></p>	<ul style="list-style-type: none"> <li>• Anxiety, irritability, restlessness and cravings are all nicotine withdrawal symptoms. Reducing your caffeine intake can help with some of these symptoms. Cutting back on smoking affects how your body processes caffeine, so the same amount of caffeine will have a stronger effect.</li> <li>• If you are feeling anxious or irritable, physical activity (such as taking a walk, going outside, deep breathing or meditation) can help.</li> <li>• If you are feeling restless or having trouble concentrating, distract yourself with a simple task. For example, eat a healthy snack, chew gum, drink water, talk to a friend or take a walk.</li> </ul>

- Share pregnancy-specific resources and tools:
  - The New York State Smokers' Quitline provides enhanced coaching for pregnant people. Call 866-NY-QUITS (866-697-8487) or visit [nysmokefree.com](http://nysmokefree.com). Patients can call as many times as needed for additional coaching and support.
    - Patients whose preferred language is Chinese (800-838-8917), Korean (800-556-5564) or Vietnamese (800-778-8440) can call the Asian Smokers' Quitline or visit [asiansmokersquitline.org](http://asiansmokersquitline.org).
  - SmokefreeMOM is a texting support program that sends tips and provides support to pregnant people who smoke, even if they are not ready to quit, including customized messages to match where they are in their pregnancy. To join, text "MOM" to 222888.
  - Pregnant people can get support from women who have quit or are trying to quit smoking on the Smokefree Women Facebook page (available at [facebook.com/smokefree.women](https://facebook.com/smokefree.women)).
  - The quitSTART app offers tips, encouragement and materials to help pregnant people quit smoking. Users can also track their progress and play games or complete challenges to manage cravings.

**Only consider nicotine replacement therapy (NRT) on a case-by-case basis** for patients who have medium to high levels of nicotine dependence (for example, they smoke more than 10 cigarettes per day, with their first cigarette being within 30 minutes of waking up) and are struggling to meet their goals.

Discuss the potential risks of continued smoking compared to NRT with your patients.

- If you prescribe NRT to a patient, try to use the lowest possible dose and start with only a short-acting NRT.

## 3 Follow Up

Following up with your patients is critical, regardless of their goals. For pregnant patients, monthly or biweekly visits are excellent opportunities for a follow-up.

Following up with postpartum patients is also important since smoking relapse rates are high after giving birth.

Follow up with your pregnant patients regularly.

- Ask your patients about their progress and which strategies and tools are working. Provide encouragement and support.

**“How is it going? Were you able to try some of the strategies we came up with together to avoid smoking? How did you feel?”**

**“Did you try any of the extra coaching or support tools I shared? How did it go?”**

**“I think you are doing a great job. This is such an important step to take for you and your baby.”**

- Refer your patients to the pregnancy-specific resources and tools on Page 5 for additional support between visits.





Assess your postpartum patients' progress and follow up regularly, including about their secondhand smoke exposure at home.

- Assess the use of strategies and tools for effectiveness. Modify plans with patients as needed, including considering NRT when appropriate (see Page 5). Recommend keeping their home smoke-free.

**“Have you been able to cut back on smoking as much as you wanted by now? Do you still think you can stop smoking completely next month like we talked about?”**

**“It sounds like you are still having a hard time trying to stop smoking. Let’s discuss the risks and benefits of nicotine medications and decide together if we think that is a good option.”**

**“Feel free to share this information with your family members to explain why you are keeping your home smoke-free.”**

- Continue to follow up and provide additional supportive counseling as needed.



For more information as well as resources and clinical tools to support your patients who smoke or vape, visit [nyc.gov/health](https://nyc.gov/health) and search for **tobacco treatment**.





