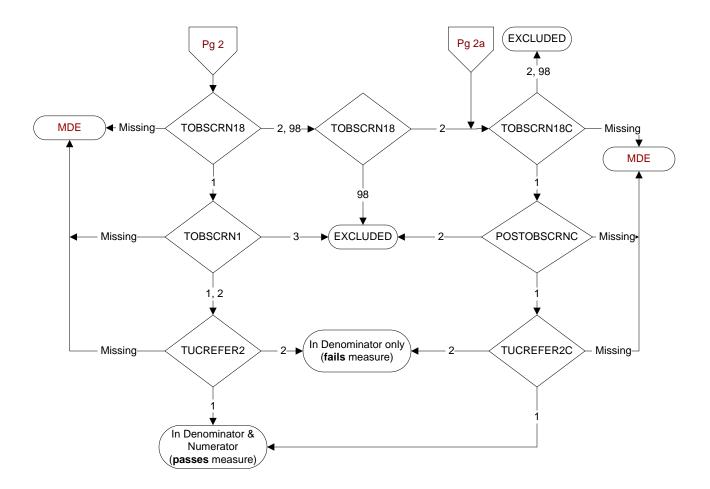


1 of 2



TOBSCRN18 (PI)

During the past year was the patient screened for tobacco use by an acceptable provider using the **National Clinical Reminder for Tobacco Use**? 1. Yes

2. No

98. Patient declined to answer National Clinical Reminder for Tobacco Use screening questions

TOBSCRN1 (PI)

Enter the response to Tobacco Use Screening question #1 "Do you smoke cigarettes, or use tobacco every day, some days, or not at all?"

- 1. Every Day
- Some Days
 Not at all
- 3. Not at all

TUCREFER2 (PI)

During the past year, did the provider provide information about behavioral counseling or treatment options other than medication to assist patient with quitting smoking or using tobacco using the National Clinical Reminder for Tobacco Use? 1. Yes 2. No

TOBSCRN18C (PI)

During the past year, was the patient screened for tobacco use by an acceptable provider?

- 1. Yes 2. No
- 98. Patient declined to answer screening questions

POSTOBSCRNC (PI)

Was the tobacco screening done on (computer to display tobscrndtc) positive for tobacco use? 1. Yes 2. No

TUCREFER2C (PI)

During the past year, did the provider provide information about behavioral counseling or treatment options other than medication to assist patient with quitting smoking or using tobacco? 1. Yes

2. No