The PMC supports measure NQF 0028: “Preventive Care & Screening: Tobacco Use: Screening & Cessation Intervention” because assessment and reduction of tobacco use have been proven to slow the progression of COPD and are key elements in the management of pulmonary disease. The ACP/ACC/ATS/ERS guideline states that a history of heavy smoking (greater than 40 pack-years) is a strong predictor of airflow obstruction. The US Preventive Services Task Force also recommends that clinicians ask all their adult patients about tobacco use and offer cessation interventions. Tobacco use is a modifiable risk factor and clinical evidence suggests that patient counseling and re-counseling by physicians increases attempts to quit.

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