

## **Liability Form**

**Stop Smoking** 

## **How Does Nicotine Replacement Therapy Work?**

Signature

When you smoke, the level of nicotine in your body reaches a peak immediately after smoking and then drops off rapidly until you smoke another cigarette. When used correctly, nicotine replacement therapy provides a slower release and absorption of nicotine. Unlike the dependence-reinforcing peaks produced by cigarette smoking, nicotine replacement therapy (NRT) provides a relatively steady nicotine delivery, at a high enough level to minimize withdrawal symptoms, but lower than the peak level of smoking a cigarette. By using transdermal nicotine patches, nicotine gum, or nicotine lozenges you receive less nicotine than you inhaled by smoking.

Nicotine replacement therapy does not take the place of your determination to stop smoking. It does not replace the need for making changes in your habits and behaviors related to smoking. That is why you need a comprehensive smoking cessation program along with nicotine replacement therapy. You must completely stop smoking before you begin your nicotine replacement therapy, and not use any nicotine-containing product during treatment.

Because these products, like cigarettes, contain nicotine, you should discuss with your doctor other ways to stop smoking if you are pregnant or nursing or if you have cardiovascular disease. Other contraindications (reasons for not using) may include a recent heart attack, irregular heartbeat, chest pain, allergies to drugs, rashes from adhesive tape, high blood pressure, stomach ulcers, diabetes and kidney or liver disease.

There may be other risks associated with the use of these products. Please read the NRT package insert for approved usage guidelines. If you are taking any prescription medication or are under the doctor's care for any condition, you should discuss with your doctor the potential risks of using these products.

I have read the above information and choose to use nicotine replacement therapy as part of my smoking cessation program. I understand the risk and possible complications of using such therapy. I have had an opportunity to ask questions and feel they have been adequately answered by a qualified smoking cessation class facilitator.

If I have any of the above contraindications (reason for not using), I will refer to my medical doctor for further evaluation before considering nicotine replacement therapy. However, I am aware that I can continue to participate in the class.

Date

Witness