

<b>LOGO</b> <b>CENTRE NAME</b> <b>CENTRE ADDRESS</b>	<b>Quality Operating Process</b>	<b>Document No :JSL/014</b>
	<b>Manual of Operations Smoking Elimination Policy</b>	<b>Date of Creation :5/7/2021</b> <b>Issue No. : of Revision: 4/07 /2022</b> <b>Revision No. : 00</b>

<b>SERVICE NAME :</b>	<b>SMOKING ELIMINATION POLICY</b>
<b>DATE CREATED :</b>	<b>25/06 /2021</b>
<b>APPROVED BY :</b>	<b>DOCTOR NAME</b>
<b>RESPONSIBILITY OF UPDATING :</b>	<b>MALE THERAPIST</b>

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## AMENDMENT SHEET

<b>LOGO</b> <b>CENTRE NAME</b> <b>CENTRE ADDRESS</b>	<b>Quality Operating Process</b>	<b>Document No :JSL/014</b>
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**A. Purpose:**

To set forth the policy mandating Hospital a “Smoke Free” Facility.

**B. Scope:** Hospital Wide

**C. Policy:**

- The administration of Hospital shall prohibit the sale and use of smoking materials throughout the facility.
- The hospital has been declared a “no smoking” zone.
- All patients and their attendees are counseled and educated about the adverse effects of smoking on people’s health due to active and passive smoking & encouraged to give up smoking.
- Signage for “no smoking” are displayed in both outpatient and inpatient care area of the hospital.
- Exceptions - The Hospital recognizes that for some patients there may be medical reasons to permit a patient to smoke while hospitalized. A written physician’s order must be obtained and the following criteria met.

**D. CRITERIA FOR AUTHORIZATION OF SMOKING BY PATIENT**

(Inpatient only; no outpatients are considered)

- Physician must document reasonable cause for exception which may include the following:
  1. Terminally ill patient.
  2. Patient is undergoing detoxification for substance abuse.
- The physician shall discourage smoking by the patient and explain the potential health hazards. No adolescent patient shall be approved for smoking as an inpatient.
- Patients cannot smoke in bed hence should be capable of walking as they are allowed to smoke only outside the hospital building and in the presence of a hospital staff .
- There must be documentation of the patient’s acknowledgment of the hazards of smoking in the progress notes, which should be signed by the patient, physician, and a witness.