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## PEI Smoking Cessation Program (SCP): Overview

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Provincial Tobacco Control Coordinator  
Health Promotion Unit  
Chief Public Health Office  
Department of Health and Wellness

Created Nov 25, 2025

# Introduction

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- SCP Overview
- Program Forms
- SCP Enrollment
- Education/Resources



## PEI Smoking Cessation Program

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- The PEI Smoking Cessation Program helps PEI residents who wish to stop smoking, vaping, using other tobacco products by covering 100% of the cost of nicotine replacement therapy (NRT) or specific smoking cessation prescription medications.
- Access via healthcare services (acute care, community based) and community pharmacies
- Once per year, eligible PEI residents can receive a single continuous course (minimum 6 weeks to maximum 18 weeks in a row) of treatment.

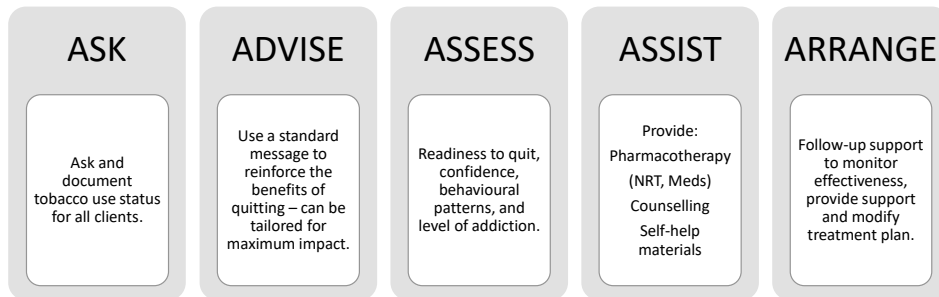
PEI Chief Public Health Office

- The PEI Smoking Cessation Program helps PEI residents who wish to stop smoking, vaping, using other tobacco products by: covering 100% of the cost of nicotine replacement therapy (NRT) or specific smoking cessation prescription medications.
- Access via healthcare services, community pharmacies
- Once per year, eligible PEI residents can receive a single continuous course (minimum 12 weeks in a row; maximum 18 weeks in a row) of treatment.

### **Available treatments:**

- Option 1: Non-Prescription Nicotine Replacement Therapy (NRT) Products (patches, gum, lozenges, inhaler, spray/mist)
- Option 2: Prescription smoking cessation medications (Zyban® or Champix®).

## *Ottawa Model for Smoking Cessation*



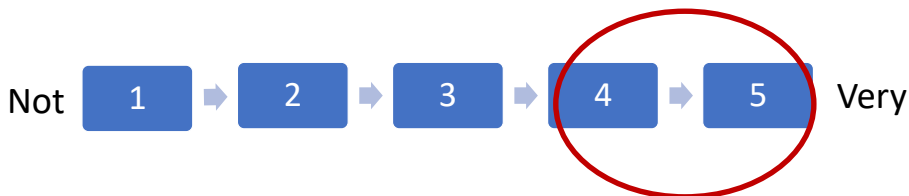
**An evidence-based approach that can be used in all healthcare settings.**

Best practice evidence: Based on OMSC (5A's) - Ask, Advise, Assess, Assist, Arrange

## Readiness To Quit:

Using Scaling as an  
Assessment Tool:

Importance and Confidence



- Level 4 or 5 indicates readiness to quit
- Readiness completed within 30 days of quit date

Prince Edward Island Health & Wellness

A person's motivation to quit and their confidence to quit can change from day to day, sometimes hour to hour.

Using scaling to assess an individual's readiness to quit tobacco products is an important strategy used in helping people quit.

**Scales are useful in addressing the extent to which a person is ready to change.**

The OSCM uses two scales to identify how **important quitting is at that moment**, and how **confident the person feels about quitting**.

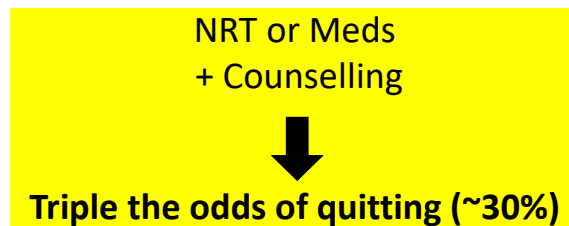
This is empowering information which can help an individual identify their motivators to quit and overcome barriers to making a quit attempt.

**Patient's must identify at least 4 or 5 on each scale to be eligible for the smoking cessation program.**

## Cessation Support Works

### Two components

- Nicotine Replacement Therapy (NRT) or Prescription Medications (bupropion, varenicline)
- Counselling



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There are two primary components to evidence-based smoking cessation treatment:

First, we have pharmacotherapy, which includes Nicotine Replacement Therapy (NRT)—such as patches, gum, lozenges, inhalers, spray/mist—and prescription medications like bupropion or varenicline. These work by reducing withdrawal symptoms and cravings, helping individuals manage the physical dependence on nicotine.

Second, we have counselling, which supports the behavioural aspect of quitting. This can include one-on-one or group counselling, quitlines, and digital tools that provide coping strategies, accountability, and encouragement.

When these two components are used together, they are significantly more effective. Research shows that combining behavioural support with pharmacotherapy triples the odds of a successful quit attempt, compared to using either one alone or no support at all.

This integrated approach is the cornerstone of our Smoking Cessation Program and what we encourage for all individuals seeking to quit tobacco or vaping products.

## Changes in Coverage

- Patients may switch course of treatment or between one dosage strength to another within **30 days** of starting their treatment.
  - New Intake Form [action plan] must be completed. Send to pharmacare and patients' pharmacy
  - Approval by provincial tobacco control coordinator is not required
- Follow up: Offer 1-2 weeks after initial consultation (recommend 3 follow ups after program start)
- **If beyond 30 days, changes will not be accommodated.**
- Travel supply

Chief Public Health Office 2024

1. During a course of treatment, patients may switch between one dosage strength to another only when picking up their fills covered for the course of treatment.
2. Patients are permitted to switch the course of treatment (e.g., switch from one type of nicotine replacement therapy to one of the prescription smoking cessation medications or vice versa) **at the 14-day follow-up appointment or within 30 days of starting their initial treatment with an SCP provider.**
3. After this initial period, changes to the treatment plan will not be accommodated under the program.
4. Travel supply

## Special Circumstances:

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### Early Re-enrollment

- There may be exceptions to Islanders wanting to enroll more than once per calendar year, please reach out to the Tobacco Control Coordinator to review it on a case-by-case basis.

### Age of consent:

- a) No minimum age to enroll.
- b) Consideration for prescribing NRT for youth under 18 - moderately or severely addicted to nicotine and motivated to quit.
- c) If NRT is prescribed and in the best interest of the patient—where the benefits outweigh the risks—the responsibility for the decision lies with the provider.

Chief Public Health Office 2024

**Eg. Someone enters hospital after only completing a couple weeks of the program and is looking to return to it 6-8 months later when health and readiness have improved**



## Roles and Responsibilities

Role	Responsibilities
Patient/Client	Express interest, consent to enroll, use NRT or prescription medication
Provider	Screen, assess readiness for quitting, complete consult form, educate, track progress, Submit forms, liaison with CPHO Follow-ups at 2, 6, 10 weeks (recommendation)
Pharmacare	Enroll eligible patients (ex. Ready to quit; PEI Health Card; not enrolled in the program within the past 12 months).
CPHO	Submit form to pharmacare and manually enter Consult Form into PHDMS (database)
Pharmacy	Dispense approved NRT or Rx

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### Expansion of Program:

1. Primary Care Networks: Complete consult forms, submit directly to pharmacare for approval
2. Pharmacist: Complete consult forms, submit directly to pharmacare for approval.



## Action Plan (Intake Form for Drug Cost Assistance): Paper

-To be completed at the same time as the consult form

-Sent to Pharmacare for program enrollment/eligibility

-Also completed for any product changes within 30 days of starting the program

**Smoking Cessation Program: Intake Form for Drug Cost Assistance**

**Health PEI**  
One Island Health System  
**Santé Î.-P.-É.**  
Un système de santé insulaire

**Date:** \_\_\_\_\_  
(or in ink on applicable patient label)

**Patient FHT/ABIS:** \_\_\_\_\_

**First Name:** \_\_\_\_\_

**Last Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Gender:** ☐ Male ☐ Female ☐ Identify as: \_\_\_\_\_  
(If no contact info on patient label, enter FHT in below)

**Address:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Cell:** \_\_\_\_\_ **Email (if available):** \_\_\_\_\_

**LOCATION:** ☐ Kings PC ☐ Queens East PC ☐ Queens West PC ☐ East Prince PC ☐ West Prince PC ☐ PEI Cancer Treatment Centre  
☐ Cardiac and Pulmonary Health ☐ Adult Care ☐ Home Care ☐ Long-term Island ☐ Open Health ☐ Other

**Fax form to: Client's Pharmacy**  
**PEI Smoking Cessation Program**  
**902-620-3354,**  
**and PEI Pharmacare**  
**902-368-4905**

**TOBACCO CESSATION ACTION PLAN**

<b>Reviewed Contraindications</b>	<input type="checkbox"/> 7 mg	<input type="checkbox"/> 14 mg	<input type="checkbox"/> 21 mg	<input type="checkbox"/> 28 mg	<input type="checkbox"/> 35 mg	<input type="checkbox"/> 42 mg
Long Acting NRT (Patch)	7 mg x 1 wk	14 mg x 2 wks	21 mg x 4 wks	28 mg (21mg + 7mg) x 6 wks	35mg (21mg + 14mg) x 6 wks	42 mg (21mg + 21mg) x 6 wks
		14 mg x 4 wks	21 mg x 4 wks	28 mg (21mg + 7mg) x 4 wks	35mg (21mg + 14mg) x 4 wks	42mg (21mg + 21mg) x 4 wks
		7 mg x 2 wks	14 mg x 2 wks	21 mg x 2 wks	28 mg (21mg + 7mg) x 2 wks	35 mg x 2 wks
			7 mg x 2 wks	14 mg x 2 wks	21 mg x 2 wks	28 mg x 2 wks
Short Acting NRT	<input type="checkbox"/> Inhaler	<input type="checkbox"/> Gum: 2mg	<input type="checkbox"/> Gum: 4mg	<input type="checkbox"/> Lozenge: 1mg	<input type="checkbox"/> Spray: 1mg	
		<input type="checkbox"/> Gum: 4mg	<input type="checkbox"/> Lozenge: 2mg	<input type="checkbox"/> Spray: 2mg		
Medication	<input type="checkbox"/> Varenicline <input type="checkbox"/> Bupropione <input type="checkbox"/> Reviewed appropriate use, dose, duration of medication					
	Notes (free text)					

**VAPING CESSATION ACTION PLAN**

<b>Reviewed Contraindications</b>	<input type="checkbox"/> 12 mg	<input type="checkbox"/> 14 mg	<input type="checkbox"/> 21 mg	<input type="checkbox"/> 28 mg	<input type="checkbox"/> 35 mg	<input type="checkbox"/> 42 mg
Long Acting NRT (Patch)	12 mg x 1 wk	14 mg x 2 wks	21 mg x 4 wks	28 mg (21mg + 7mg) x 6 wks	35mg (21mg + 14mg) x 6 wks	42 mg (21mg + 21mg) x 6 wks
		14 mg x 4 wks	21 mg x 4 wks	28 mg (21mg + 7mg) x 4 wks	35mg (21mg + 14mg) x 4 wks	42mg (21mg + 21mg) x 4 wks
		7 mg x 2 wks	14 mg x 2 wks	21 mg x 2 wks	28 mg (21mg + 7mg) x 2 wks	35 mg x 2 wks
			7 mg x 2 wks	14 mg x 2 wks	21 mg x 2 wks	28 mg x 2 wks
Short Acting NRT	<input type="checkbox"/> Inhaler	<input type="checkbox"/> Gum: 2mg	<input type="checkbox"/> Gum: 4mg	<input type="checkbox"/> Lozenge: 1mg	<input type="checkbox"/> Spray: 1mg	
	<input type="checkbox"/> Spray: 1mg	<input type="checkbox"/> Gum: 2mg	<input type="checkbox"/> Lozenge: 1mg	<input type="checkbox"/> Spray: 2mg		

Personal Health Information on this form is collected under Prince Edward Island's Health Information Act, as it relates to and is necessary for determining assessment of needs and eligibility for benefits under the PEI Pharmacare Program (Smoking Cessation Program). If you have any questions about this collection of Personal Health Information, you may contact the Provincial Tobacco Control Coordinator at 902-368-4528.

**PROVIDER INFORMATION**

**Healthcare Provider Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_ **Date:** yyyy-mm-dd

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Primary care/Community Providers (except Pharmacy): The form is called 'Intake Form for Drug Cost Assistance'.

Pharmacy providers: Submit this form electronically on the PHDMS



PEI Smoking Cessation Program: Nicotine Replacement Therapy (NRT) Titration Schedule

Table 1: Patient Assessment Tool: NRT

NICOTINE PATCH	
<b>Patient smokes 40+ cigarettes per day:</b> Nicotine Patch 42 mg (21 mg x 21 mg) daily x 6 weeks; then Nicotine Patch 35 mg (21 mg x 14 mg) daily x 4 weeks; then Nicotine Patch 28 mg (21 mg x 7 mg) daily x 2 weeks; then Nicotine Patch 21 mg daily x 2 weeks; then Nicotine Patch 14 mg daily x 1 week; then Nicotine Patch 7 mg daily x 2 weeks.	<b>Patient smokes 20-39 cigarettes per day:</b> Nicotine Patch 21 mg daily x 6 weeks; then Nicotine Patch 14 mg daily x 4 weeks; then Nicotine Patch 7 mg daily x 2 weeks.
<b>Patient smokes 35-39 cigarettes per day:</b> Nicotine Patch 35 mg (21 mg x 14 mg) daily x 6 weeks; then Nicotine Patch 28 mg (21 mg x 7 mg) daily x 4 weeks; then Nicotine Patch 21 mg daily x 2 weeks; then Nicotine Patch 14 mg daily x 1 week; then Nicotine Patch 7 mg daily x 2 weeks.	<b>Patient smokes 30-34 cigarettes per day:</b> Nicotine Patch 28 mg (21 mg x 7 mg) daily x 6 weeks; then Nicotine Patch 21 mg daily x 4 weeks; then Nicotine Patch 14 mg daily x 2 weeks; then Nicotine Patch 7 mg daily x 2 weeks.
<b>Patient smokes 30-34 cigarettes per day:</b> Nicotine Patch 28 mg (21 mg x 7 mg) daily x 6 weeks; then Nicotine Patch 21 mg daily x 4 weeks; then Nicotine Patch 14 mg daily x 2 weeks; then Nicotine Patch 7 mg daily x 2 weeks.	<b>Patient smokes &lt;20 cigarettes per day:</b> Nicotine Patch 7 mg daily x 6 weeks.
NICOTINE GUM	
<b>Patient smokes 20+ cigarettes per day:</b> Nicotine Gum 4 mg pieces.	
<b>Patient smokes &lt;20 cigarettes per day:</b> Nicotine Gum 1 mg or 2 mg pieces.	
NICOTINE LOZENGES	
<b>Patient smokes 20+ cigarettes per day:</b> Nicotine Lozenge 4 mg.	
<b>Patient smokes &lt;20 cigarettes per day:</b> Nicotine Lozenge 2 mg.	
NICOTINE INHALER	
<b>Use 6-12 cartridges per day or as needed for the first 6 weeks.</b>	
NICOTINE SPRAY	
<b>Patient smokes 20+ cigarettes per day:</b> Nicotine Spray 2mg.	
<b>Patient smokes &lt;20 cigarettes per day:</b> Nicotine Spray 1mg.	

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Table 2: Patient Assessment Tool: Vaping Cessation

Profile	Dependence	Estimated Nicotine Consumed (mg)	Recommended Starting Dose (mg)
LIGHT ACTING (PATCH)			
Light Vape User (low dose)	<ul style="list-style-type: none"> <li>Periodic use. Social use.</li> <li>No cravings.</li> <li>No withdrawal symptoms if going without vaping for 24 hours.</li> <li>Nicotine concentration (a-eq/dl) &lt; 20mg.</li> </ul>	0-20mg per day	14mg
Moderate Vape User	<ul style="list-style-type: none"> <li>Daily use.</li> <li>Cravings present.</li> <li>Vape within 30 minutes of waking.</li> <li>Few/mild withdrawal symptoms if going without vaping for 24 hours.</li> <li>Nicotine concentration (a-eq/dl) &gt; 20mg.</li> </ul>	20-40mg per day	21mg
Heavy Vape User (high dose)	<ul style="list-style-type: none"> <li>Increasing use.</li> <li>Intense cravings.</li> <li>Vape within 30 minutes of waking.</li> <li>Noticeable withdrawal symptoms if going without vaping for 24 hours.</li> <li>Nicotine concentration (a-eq/dl) &gt; 20mg.</li> </ul>	40mg+ per day	35mg
SMOKE ACTING (GUM, LOZENGE, INHALER, SPRAY)			
Gum or lozenge: 2-4mg every 30 minutes as needed			
Inhaler: 1 cartridge every 30 minutes as needed			
Spray: 1mg: 1-2 sprays 1-2 times/day			
2mg: 1-2 sprays 1-2 times/day			
*If unsure of light or heavy user choose 21mg (moderate vape user)			

For program inquiries, please contact the Provincial Tobacco Control Coordinator at [smoking@gov.pe.ca](mailto:smoking@gov.pe.ca) or (902) 362-4319.

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## Education/Training:

<https://www.youtube.com/watch?v=gZtZ20xr8M8>

Disclaimer: Not all comments made by the presenter represent current practice in PEI. Providers are expected to follow direction by the Smoking Cessation Program. In PEI, only one NRT method is covered 100% in the PEI Smoking Cessation Program.

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Note: At time 1:35-Discussion of special populations; review of counselling strategies; case studies

## Frequently Asked Questions

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1. What NRT products are covered by the Smoking Cessation Program?
2. Can a patient/client receive more than one type of NRT while enrolled in the Smoking Cessation Program?
3. What if a patient/client relapses?
4. What if a program is interrupted and they don't complete it, are they able to enroll again?
5. What if the patient/client wants to change NRT product during the program?
6. What are common resources that patients/clients can access to support their smoking cessation journey?

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**Q: What NRT products are covered by the Smoking Cessation Program?**

NRT patch; short acting NRT (inhaler, gum, lozenge, mouth spray/mist) and prescription medication (Varenicline or Bupropion)

**Q: Can a patient/client receive more than one type of NRT while enrolled in the Smoking Cessation Program?**

Patient/clients are eligible for one method under the Smoking Cessation Program (ex. NRT or Medication). Patient/Clients may choose to use a combination of NRT methods to assist with smoking cessation. Only one method under the Smoking Cessation Program is covered.

**Q: What if a patient/client relapses?**

Relapse is a normal part of the quitting journey. Patient/Clients are always welcome to re-enroll in the program once per calendar year (12 months)

**Q: What if a program is interrupted and they don't complete it, are they able to enroll again?**

Special circumstances such as illness/hospitalization are considered; providers should contact the Provincial Tobacco Control Coordinator for approval. If approved, a new consult and action plan will be required.

**Q: What if the patient/client wants to change NRT product during the program?**

Patients/Clients may change NRT product within 30 days of starting the Smoking Cessation Program. No approval by the Provincial Tobacco Control Coordinator is required. Providers must submit a new Action Plan form.

**Q: What are common resources that patients/clients can access to support their smoking cessation journey?**

There are several free resources/programming to offer patient/clients: Smoker's Helpline, Community Mental Health and Addiction and Live Well PEI program.

## Smoking Cessation Resources

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- Smoker's Helpline: Support to anyone looking to quit smoking/vaping/other tobacco products
  - Call: 1-866-366-3667;
  - Visit: <https://smokershelpline.ca>
- Livewell PEI - Resources
  - Visit: [www.livewellpei.ca](http://www.livewellpei.ca)







**LIVE WELL PEI**  
*together we can*

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## Questions?

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**Contact Information for the Provincial Tobacco Control  
Coordinator:**

**Phone:** 902-368-4319

**Email:** [quitsmoking@ihis.org](mailto:quitsmoking@ihis.org)

**Web:** [www.princeedwardisland.ca/quitsmoking](http://www.princeedwardisland.ca/quitsmoking)

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