



DORSET STOP SMOKING SERVICE

Note: All patient data will be kept securely and in accordance with the Data Protection Act 1998. Information can only be passed to another healthcare professional if this contributes to the provision of effective care.



From 1st April 2013 NHS Public Health transfers to the Local Authority. Any personal information provided on this form will be held by Public Health Dorset within the Local Authority.

ADVISER DETAILS:			
Name		Location/setting	
Contact Tel No.		Tutor ID	

Details below are to be completed and submitted on a monthly basis (with invoices). The details requested relate to patients who have already had their 4-week monitoring form returned to Public Health. DOB **and/or** postcode are required to link the 12-week status to the monitoring form data, and the quit date will specify which episode of care the 12-week status relates to.

Patient Name	DOB	Postcode	Quit date	SmokeStatus at 12 weeks (Quit CO verified / Not quit / Lost to follow up)

Advisor signature:	
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