

My Quit Smoking Plan

A Personal Commitment to Better Health

This is your personal quit plan. Take time to fill this out thoughtfully. Research shows that people who make a written plan are more likely to succeed. Keep this somewhere visible as a reminder of your commitment to yourself and your family.

1. My Quit Date

I will quit smoking on: _____ (Choose a date within the next 2 weeks)

2. Why I'm Quitting

List your personal reasons. Be specific. These will motivate you when cravings hit.

For my children:

For my health:

For my family:

Other reasons:

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3. My Support Team

Who will support you? Write down names and phone numbers you can call when you need help.

Supportive friend/family member #1:

Phone number:

Supportive friend/family member #2:

Phone number:

Healthcare provider:

Phone number:

Free Quit Resources:

1-800-QUIT-NOW (1-800-784-8669) - Free coaching 24/7

Text QUITNOW to 333888 - Free text support

Smokefree.gov - Free apps and online support

4. My Smoking Triggers

When do you usually smoke? Identify your triggers so you can plan alternatives.

Times of day I usually smoke:

Situations that make me want to smoke:

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Emotions that trigger cravings:

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5. My Coping Strategies

What will you do instead of smoking? Plan ahead for cravings. Most cravings last only 5-10 minutes.

When I crave a cigarette, I will:

Healthy distractions I can use:

Physical activity I'll try:

6. My Nicotine Replacement Plan

Using NRT doubles your chances of success. Check what you'll use:

- Nicotine patches
- Nicotine gum
- Nicotine lozenges
- Nicotine mouth spray
- Prescription medication (talk to your doctor)
- Combination therapy (e.g., patch + gum)

Where I'll get my NRT:

When I'll start using it:

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7. Preparing My Environment

Before your quit date, remove all smoking reminders:

- Throw away all cigarettes
- Remove lighters and ashtrays
- Wash all clothes that smell like smoke
- Clean car interior
- Wash curtains and bedding
- Tell friends/family about my quit date
- Stock up on healthy snacks and water
- Download a quit-smoking app

8. Celebrating My Success

Plan rewards for yourself at key milestones:

After 24 hours smoke-free, I will:

After 1 week smoke-free, I will:

After 1 month smoke-free, I will:

After 3 months smoke-free, I will:

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9. My Commitment

I commit to quitting smoking for my health, my family, and my future. I know it won't be easy, but I am ready. I have a plan, I have support, and I have hope. Every day smoke-free is a victory.

Signature: _____ Date: _____

10. If I Slip Up

If you smoke a cigarette, don't give up. Most people try several times before quitting for good. Learn from it and keep going.

If I slip, I will:

Who I'll call for support:

Remember: You are stronger than any craving. Your family needs you healthy. You can do this. One day at a time.