

## Quit Day Preparation Checklist

Please checkmark which items you have completed.

Throw out all cigarettes

Remove all ashtrays

Remove all lighters

Checked:

my home

car

workplace

Decided on time to replace the nicotine patch each day. Time: \_\_\_\_\_

Placed the patch in a place that will help me remember at the appropriate time each day

Told family about trying to quit smoking

Told family about trying to change my drinking

Told friends about trying to quit smoking

Told friends about trying to change my drinking

Told coworkers about trying to quit smoking

Told coworkers about trying to change my drinking

Have Cigarette/alcohol substitutes on hand (e.g., mints, crossword puzzles, sparkling water)

Remove alcohol or put in a less visible/accessible place