

# Patient Education

## Smoking Tracking Sheet

Use this sheet to keep track of your smoking patterns. Every time you smoke a cigarette, write down the time, the situation you were in (e.g., driving, on the phone, on break, etc.), how you coped, whether you smoked, and how badly you felt you needed that cigarette.

Date:								
Time	Situation	Coping	# Cig	Intensity of Urge				
				No Urge	Moderate Urge		Strong Urge	
				1	2	3	4	5
				1	2	3	4	5
				1	2	3	4	5
				1	2	3	4	5
				1	2	3	4	5
				1	2	3	4	5
				1	2	3	4	5
				1	2	3	4	5