

New CoC Standard 5.9: Smoking Cessation for Patients with Cancer

Starting January 1, 2026, the American College of Surgeons Commission on Cancer (CoC) requires cancer programs to comply with the new standard for future CoC accreditation.

» Reporting Requirements:

Cigarette Smoking Screening



The number of newly diagnosed cancer patients screened for cigarette smoking at their initial cancer care visit.

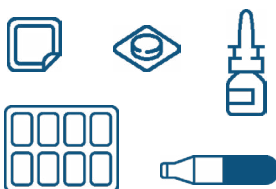
Cessation Treatment



The number of identified patients currently smoking* who received evidence-based cessation treatment.

» What Counts as a Cessation Treatment? *(must be provided within 30 days of screening)*

FDA-Approved Pharmacotherapy



Nicotine patch, gum, lozenge, nasal spray, inhaler (if available)



Varenicline or bupropion

Behavioral Interventions



Individual or group counseling



Referral to quitline or community resource



Enroll in mobile health program

» Implementing Standard 5.9: System-Level Strategies

- **EMR Workflows:** Add prompts and orders for screening, meds, and referrals at every visit.
- **Staff Training:** Train teams on best practices for tobacco cessation.
- **Tracking & Reporting:** Monitor rates and share data to improve care.
- **Leadership Support:** Gain commitment and resources to sustain services.

For additional information on implementing standard, review [CA Quits Health Systems Toolkit](#).

» Why This Matters?

Quitting cigarettes or the use of any tobacco and nicotine products after a cancer diagnosis improves health outcomes and reduces health care costs.

For additional information, visit the American College of Surgeons [Commission on Cancer website](#) or review the [CoC Standard 5.9 Resource Guide \(PDF\)](#).

*Current smoking is defined as any smoking within the past 30 days.