



TOBACCO TREATMENT PROVIDER CODE OF ETHICS

Purpose: This code of ethics is intended to guide the practice of Tobacco Treatment Providers. We recognize that Tobacco Treatment Providers are also members of other professional disciplines and will be guided by the code of ethics from these professions as well.

Tobacco Treatment Providers strive to maintain the highest level of professional competence as well as ethical professional and personal conduct. A Tobacco Treatment Provider agrees to all of the following:

- 1) Tobacco Treatment Providers respect the privacy, dignity, perspectives, and cultures of all individuals, and ensure fair and equitable treatment for all patients.
- 2) Tobacco Treatment Providers observe principles and organizational policies regarding informed consent and confidentiality of individuals.
- 3) Tobacco Treatment Providers provide patients with all the relevant and accurate information and resources they need to make well-informed decisions regarding tobacco use and the treatment for tobacco dependence.
- 4) Tobacco Treatment Providers accurately represent their capabilities, education, training and experience, and act within the boundaries of professional competence.
- 5) Tobacco Treatment Providers are truthful in dealings with the public and never misrepresent or exaggerate potential treatment benefits or services.
- 6) Tobacco Treatment Providers avoid activities which may be or may be perceived to be a conflict of interest or unethical in nature.
- 7) Tobacco Treatment Providers fulfill their professional obligation to maintain the highest possible level of competence through continued study and training as required to maintain their certification.
- 8) Tobacco Treatment Providers are tobacco-free. This includes no use of e-cigarettes or vaporizers, which are classified as tobacco products. If a Tobacco Treatment Provider begins using tobacco, they must a) discontinue the provision of tobacco treatment until they are again tobacco and vape free, b) engage in evidence-based tobacco treatment, and c) only resume provision of tobacco treatment once they are again tobacco-free.