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# Smoking Cessation Protocol

Behavioral & Hypnosis-Based  
Intervention

Structured preparation, one-session  
quit method, clinical follow-up included

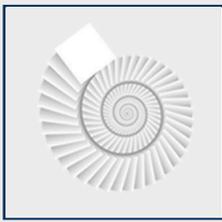


Smoking Cessation Info



Referral Form

JC



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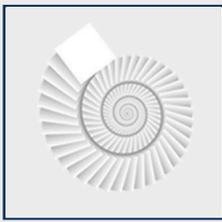
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# Clinical Smoking Cessation Protocol

## Behavioral & Hypnosis-Based Intervention

This program provides a structured, evidence-informed method for rapid smoking cessation using a combination of hypnotic conditioning, behavioral re-patterning, and cognitive association change. It is designed to support both primary-care patients and pre-operative individuals who require cessation to reduce medical and surgical risk.

The method emphasizes subconscious integration, identity-level change, and systematic reinforcement to produce lasting abstinence. The protocol includes a required pre-session preparation phase, a one-session intervention option for most patients, and a defined follow-up schedule to ensure stability and relapse prevention.



# Protocol Overview

## Structure, Methodology, and Clinical Rationale

This smoking cessation protocol utilizes a multi-phase approach that blends behavioral strategies with subconscious re-patterning. The goal is to rapidly break the automatic associations connected to nicotine while strengthening a non-smoker identity at both the cognitive and subconscious levels.

The protocol includes:

### 1. Pre-Session Preparation

All patients complete a required preparation phase consisting of:

- nightly hypnotic audio conditioning
- association-weakening practices
- removal of smoking materials
- behavioral priming for cessation day

### 2. One-Session Intervention

Most patients complete cessation in a single 2–3 hour session, which includes:

- individualized intake and assessment
- hypnotic desensitization
- cognitive association change
- NLP-based craving interruption
- identity-level reinforcement

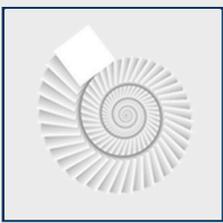
### 3. Follow-Up Reinforcement

Patients receive structured follow-up at:

- day 5
- week 2
- one month

Additional support is provided if clinically relevant.

This structured approach ensures both acute cessation and long-term stability, reducing relapse risk and improving patient outcomes



# Pre-Session Patient Instructions

## Required Preparation for Successful Cessation

All patients complete a brief but essential preparation phase before the cessation session. This phase conditions the subconscious mind, weakens nicotine-based associations, and primes the nervous system for complete cessation.

### 1. Nightly Conditioning Recording (Required)

Patients listen to a short hypnotic audio every night for 5–7 days prior to their session.

This recording:

- reduces anticipatory anxiety
- strengthens internal motivation
- prepares the subconscious for craving interruption
- begins detaching identity from smoking

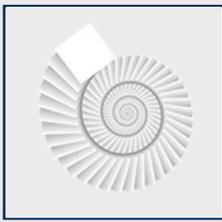
Consistency is required for optimal outcomes.

### 2. Removal of Smoking Materials

Within 24 hours before the session, patients remove:

- cigarettes
- lighters
- ashtrays
- vape pens or cartridges
- smoking-related objects

This eliminates environmental cues that trigger automatic behavior rates.



## Continued: Pre-Session Preparation

### 3. Hydration & Light Nutrition

Patients should be well hydrated and lightly nourished on the day of the session. Avoid heavy meals, alcohol, or high caffeine intake.

### 4. Avoid Smoking Immediately Before the Session

Patients may smoke normally until the night before. No smoking within 3–4 hours of the session.

### 5. Bring Any Remaining Emotional or Situational Triggers

Patients may bring:

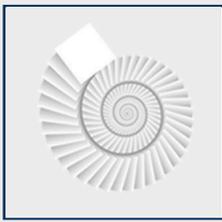
- stressful situations
- times of high craving
- emotional triggers
- routines associated with smoking

These triggers are integrated into the intervention.

### 6. Session Expectations

- duration: approx. 2–3 hours
- patient remains conscious and in control
- hypnosis feels like deep relaxation
- many patients experience an immediate shift to “I’m done.”

Proper preparation significantly increases success rates.



# Session Structure

## Overview of the Clinical Intervention

Each smoking cessation session is structured to create rapid, permanent change at both the cognitive and subconscious levels. The session lasts approximately 2–3 hours and includes assessment, hypnotic conditioning, and reinforcement.

### 1. Intake & Assessment

The session begins with a brief but targeted assessment to identify:

- primary smoking triggers
- automatic patterns and routines
- emotional or situational factors
- previous quit attempts
- dependency level

This ensures that the intervention is tailored to the patient's specific patterns and needs.

### 2. Hypnosis-Based Intervention

The core of the session includes:

- guided hypnotic desensitization
- systematic association change
- craving-interruption techniques
- subconscious reinforcement
- identity-based reframing (“non-smoker identity”)

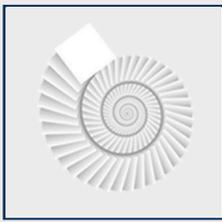
The patient remains conscious and in control, experiencing a state of deep focus and relaxation. This allows the subconscious mind to update outdated patterns connected to nicotine.

### 3. Reinforcement & Integration

Following the hypnotic work, patients receive:

- post-session instructions
- reinforcement strategies
- optional audio resources

This integration phase strengthens the new neural associations and supports long-term abstinence.



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# Follow-Up Protocol

## Structured Reinforcement After the Intervention

Follow-up care is a core component of this protocol and is used to monitor stabilization, reinforce identity-level change, and address any remaining triggers. Most patients do not require additional sessions, but structured contact ensures long-term abstinence and reduces relapse risk.

### 1. 5-Day Follow-Up

The first follow-up is conducted approximately five days after the session and includes:

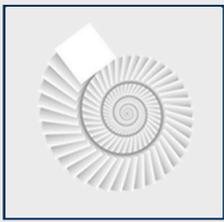
- assessment of stability and confidence
- review of behavioral changes
- reinforcement of the non-smoker identity
- brief correction of any lingering triggers or patterns

Most patients report complete cessation by this point.

### 2. 2-Week Follow-Up

At the two-week mark, patients typically experience improved clarity, better breathing, and higher energy. This check-in includes:

- evaluation of overall adaptation
- strengthening of new behavioral associations
- confirmation that nicotine cues have resolved
- additional support if any situational stressors arise



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## Continued: Follow-Up Protocol

### 3. 1-Month Follow-Up

At one month, the new neurological and behavioral pathways have generally consolidated. This follow-up includes:

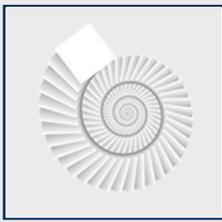
- confirmation of long-term abstinence
- reinforcement of ongoing success
- final review of any environmental triggers
- encouragement for continued health maintenance

### Optional Additional Support

If clinically necessary, patients may receive:

- an additional brief hypnotic reinforcement session
- a targeted intervention for emotional triggers
- a craving-reset audio resource

Most patients successfully quit in one session, but support remains available if needed.



# Session Pathway Determination

## Criteria for One-Session vs Multi-Session Approach

Most patients successfully quit through a single session. A smaller subset benefits from a gradual or multi-session structure based on dependency level and emotional factors.

### 1. One-Session Cessation (Standard Protocol)

A single 2–3 hour session is recommended when:

- smoking is under ~20–25 cigarettes/day
- cravings are primarily habitual
- dependency is moderate and stable
- patient is motivated and ready
- no significant trauma-linked triggers are present

Most individuals in this category maintain long-term abstinence with one session and standard follow-up.

### 2. When Multi-Session Support Is Indicated

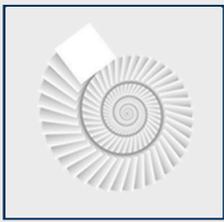
A 2–3 session pathway may be recommended when:

- smoking exceeds 1 pack/day
- smoking is heavily emotion-driven
- past quit attempts repeatedly failed
- the patient fears abrupt cessation
- trauma or high emotional load is present

This approach allows for gradual reduction, emotional stabilization, and deeper subconscious restructuring.

### 3. Clinical Discretion

Session structure is determined during intake based on dependency, emotional factors, and patient readiness. Recommendations are explained clearly, and support is adjusted as needed



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# Contraindications & Suitability

## Patient Safety and Eligibility for Hypnosis-Based Cessation

This protocol is appropriate for the majority of patients seeking to stop smoking; however, certain conditions require caution, medical clearance, or an adjusted approach.

### 1. Suitable for Most Patients

This intervention is generally appropriate for patients who:

- are medically stable
- are psychologically stable
- demonstrate readiness to quit
- have the ability to focus for brief periods
- have no severe untreated psychiatric conditions

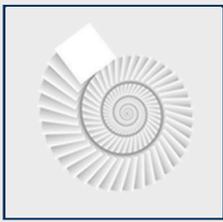
Hypnosis is safe, non-pharmacological, and does not interfere with medications or medical treatment.

### 2. Contraindications (Require Medical Clearance)

Caution or medical clearance is advised for patients with:

- active psychosis or schizophrenia
- untreated bipolar disorder
- uncontrolled epilepsy or seizure disorders
- severe cognitive impairment
- dementia
- acute substance intoxication
- recent traumatic brain injury

In these cases, physician approval is required before proceeding.



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# Contraindications & Physician Collaboration

## Contraindications (Require Medical Clearance)

Certain conditions warrant caution or physician approval prior to hypnosis-based cessation, including:

- active psychosis or schizophrenia
- untreated bipolar disorder
- uncontrolled epilepsy
- severe cognitive impairment
- dementia
- traumatic brain injury (recent)
- acute substance intoxication

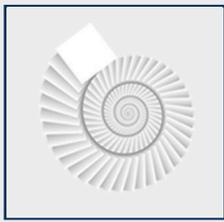
If any of these apply, medical clearance is required before proceeding.

### Physician Collaboration

Communication with referring physicians is welcomed, especially regarding:

- surgical timelines
- relevant medical conditions
- medication changes
- patient stability concerns

This ensures the protocol is administered safely and effectively and aligns with the patient's broader medical care.



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# About the Practitioner

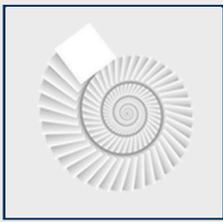
## Jade Calkins, C.Ht., NLP Practitioner

Jade Calkins is a Clinical Hypnotherapist and NLP Practitioner with advanced training in mind-body psychology. She holds certifications in EMDR and Mental Emotional Release Therapy, allowing her to integrate psychological insight with subconscious re-patterning techniques.

She also has professional experience in behavioral intervention, supporting clients through structured, evidence-based behavioral practices. Her combined background in clinical hypnotherapy, behavioral intervention, and mind-body psychology provides a strong foundation for effective smoking cessation and long-term behavior change.

Her clinical focus includes smoking cessation, emotional regulation, trauma-informed intervention, and identity-level behavioral change. Jade combines evidence-informed hypnotic conditioning with strategic behavioral methods to create rapid and lasting cessation outcomes.

With a trauma-aware and neurologically grounded approach, she emphasizes patient safety, individualized assessment, and structured follow-up. Jade collaborates with physicians and allied health providers to ensure cohesive care that aligns with each patient's broader medical and psychological needs.



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# Thank You

## For Reviewing This Smoking Cessation Protocol

Thank you for taking the time to review this protocol for smoking cessation. Your collaboration and support make it possible for patients to access effective behavioral and subconscious interventions that complement their medical care.

If you have questions, would like to refer a patient, or would like additional materials, please feel free to contact me directly.

### Contact Information



Jade Calkins  
Clinical Hypnotherapist & NLP Practitioner  
Certified in EMDR & Mental Emotional Release Therapy  
Background in Behavioral Intervention & Mind-Body Psychology

Phone: 909-491-5897  
Fax: 866-993-3171  
Email: [info@jadecalkins.com](mailto:info@jadecalkins.com)  
Website: [jadecalkins.com](http://jadecalkins.com)  
Office: 1085 Bonita Ave, La Verne, CA

### QR Code Access



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