Purpose: Parental smoking has been associated with increased rates of sudden infant death syndrome, low birth weight, atis media, asthma, and decreased lung growth. Our purpose is to assess rates of screening and counseling for parental tobacco use in the context of their child’s visit to primary care providers in Mississippi.

Methods: Cross-sectional surveys representing probability samples of Mississippi adults were administered in 2012. The mixed-mode design includes an RDD frame and an address-based frame to reduce bias due to wireless substitution.

Results: 2266 Mississippi adults completed surveys, 523 were parents and 352 were parents who had a child seen by a pediatrician (61.3%), family practitioner (36.1%), or some other type of primary care provider (2.6%) in the past year. Among parents, 94.0% agreed that it is appropriate for a child’s doctor to encourage smoking parents to quit smoking, 53.1% reported that their child’s doctor had asked if anyone in the household smokes, 38.2% had been asked if smoking is appropriate for a child’s doctor to encourage smoking parents to quit smoking, 53.1% reported that it is appropriate for a child’s doctor to encourage smoking parents to quit smoking, and 38.2% (33.1%, 43.3%) 24.5% (20.0%, 29.0%) 58.9% (45.9%, 71.9%) 35.1% (29.1%, 41.1%) 21.4% (16.3%, 26.5%) 25.8% (20.4%, 31.2%) 33.1% (22.5%, 43.7%) 23.1% (5.5%, 40.7%) 19.5% (13.1%, 25.9%) 25.3% (17.0%, 33.6%) 33.1% (22.5%, 43.7%) 23.1% (5.5%, 40.7%) 19.5% (13.1%, 25.9%) 25.3% (17.0%, 33.6%) 6.3 (3.0, 13.3) 6.0 (2.8, 12.8) 6.0 (2.8, 12.8) 6.0 (2.8, 12.8) 6.0 (2.8, 12.8) 6.0 (2.8, 12.8) 6.0 (2.8, 12.8) 6.0 (2.8, 12.8)