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Referral Form

LUNG FUNCTION RESPIRATORY CONSULTATION

Patient Details:

Name: _____ Date of Birth: / /

Address: _____

Postcode: _____

Telephone: _____ Mobile: _____

Referred by:

Name: _____ Provider No.: _____

Signature: _____ Date: _____

Services Required:

URGENT

NON-URGENT

RESPIRATORY CONSULTATION Yes No

- | | |
|--|--|
| <input type="checkbox"/> Spirometry (pre & post bronchodilator) | <input type="checkbox"/> Pre-op Assessment |
| <input type="checkbox"/> CO Transfer | <input type="checkbox"/> Bronchial Provocation Test (Mannitol) |
| <input type="checkbox"/> Lung Volumes | <input type="checkbox"/> Lying & Standing VC |
| <input type="checkbox"/> 6 Minute Walk Test | <input type="checkbox"/> FeNO |
| <input type="checkbox"/> Air <input type="checkbox"/> O ₂ | <input type="checkbox"/> MIPS & MEPS |
| | <input type="checkbox"/> Overnight Oximetry |

CLINICAL NOTES: _____

MEDICATIONS: _____

Physician Enquiries

Dr Miriam Vassallo Ph: 07 3193 5400
Email: admin@breathewell.com.au

INFORMATION

Spirometry	Measures the amount and speed of inhaled and exhaled air, before and after bronchodilator. Used to identify and monitor impaired ventilatory function and response to bronchodilators.
CO transfer	Measures the transfer of gas from the lung to the red blood cells. Affected by emphysema, asthma, clots or bleeding in the lungs, scarring of the lung, or diseases affecting the blood vessels in the lung.
Lung volumes	Helpful in distinguishing between obstructive and restrictive disease and show effects of chronic respiratory conditions on the efficiency of the respiratory system.
Bronchial Provocation	Used to confirm the presence of asthma, may be required for employment purposes.
MIPS and MEPS	Maximal inspiratory and expiratory pressures. Measure of respiratory muscle strength.
Lying and standing VC	Measures difference in vital capacity between lying and standing. Used to assess diaphragm function.
Overnight oximetry	Continuous measurement of oxygen saturation during sleep. Part of home oxygen assesment.
FeNO	Measures the concentration of Nitric Oxide (NO) released from epithelial cells of the bronchical wall. This helps to identify airway inflammation, and therefore supports a diagnosis of a asthma and likeliness to respond to inhaled cortico-steroids. Also helps to determine adherence to taken steroids and/or if dosage should be increased/decreased.
6 minute walk test	Required by Medicare/ DVA to support application for supplemental oxygen on exercise.

PATIENT INSTRUCTIONS

ALL TESTS

- Do not smoke for at least 1 hour before the test.
- Do not consume alcohol or caffeinated drinks for 4 hours before the test.
- Do not perform vigorous exercise for 1 hour before the test
- Do not eat a large meal or have a big drink for 3 hours before the test.
- Do not wear restrictive clothes.

SPIROMETRY, 6 MINUTE WALK TEST AND FeNO

- Do not take relievers such as Ventolin, Bricanyl, Atrovent or Asmol on the day of the test. However take them if you feel you need them.
- Do not take long acting relievers such as Oxis or Serevent for 12 hours before the test.

TRANSFER FACTOR

Avoid smoking for 24 hours before the test if possible.

BRONCHIAL PROVOCATION TEST

You will be given some Mannitol (a sugary powder), to inhale. Between doses you will perform a breathing test to assess your response to Mannitol. Before this test please avoid the medications below, for the specified period. However if you feel you need them, take them, and inform our staff to reschedule the test.

Day of test	Caffeine (coffee, energy drinks, cola or chocolate), do not smoke or perform vigorous exercise.
8 Hours before test	Ventolin, Bricanyl, Asmol, Airomir, Atrovent, Intal, Tilade.
12 Hours before test	Pulmicort, Flixotide, Alvesco, QVar.
24 Hours before test	Nuelin (Theophylline).
48 Hours before test	Seretide, Symbicort, Serevent, Breo ellipta, Oxis.
72 Hours before test	Spiriva, Seebri, Bretaris, Ultibro, Anoro ellipta, Brimica Incruse ellipta, and antihistmines like Zyrtec, Telfast, Claratyne, Polaramine, Phenergan.
4 Days before	Singulair.