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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

Full Lung Function (Spirometry, lung volumes and gas transfer)

Spirometry (pre & post bronchodilator)

FeNO - Fractional Exhaled Nitric Oxide

Bronchial Provocation Test (Mannitol)

Respiratory Muscle Strength
(MIPS & MEPS, lying and standing spirometry)

6 Minute Walk Test

Air O₂

Overnight Oximetry

Skin Prick Testing

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 assessment.

6 minute walk test

Required by Medicare/ DVA to support application for supplemental oxygen on exercise.

FeNO

Measures the concentration of Nitric Oxide (NO) released from epithelial cells of the bronchial wall. This helps to identify airway inflammation, and therefore supports a diagnosis of asthma and likelihood to respond to inhaled cortico-steroids. Also helps to determine adherence to steroids and/or if dosage should be increased.

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

- 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 Mammilol (a sugary powder), to inhale. Between doses you will perform a breathing test to assess your response to Mammilol. 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, Alromir, Atrovent, Intal, Tilade.

12 Hours before test

Pulmicort, Flixotide, Alvesco, Qvar, Arnuity.

24 Hours before test

Nuelin (Theophylline).

48 Hours before test

Sereotide, Symbicort, Serevent, Breo ellipta, Oxis.

72 Hours before test

Spiriva, Seebri, Bretaris, Ultibro, Anoro ellipta, Birmica, Incruse ellipta, and antihistamines like Zyrtec, Telfast, Claratyne, Polaramine, Phenergan. Singulair.

4 Days before