

Suite 100, 3916 Macleod Trail SE, Calgary, AB, T2G 2C5
587.534.0513 1.877.390.3788 403.365.4321

### **REQUISITION FORM**

| Referral Date: DD/MM/YY  | Appointment Date: DD/MM/YY  |  |
|--|---|--|
| Urgency of Referral Urgent Semi-Urgent Routine   |   |  |
| Please fill in all the requested information below.  | REFERRING PHYSICIAN INFO  |  |
| Last Name First Name  Street Address  City Province Postal Code  Date of Birth DD/MM/YY Male Female Other  AMC Height Meight KG  Phone Email                   | Phone Fax  Family MD  CC Dr. Signature  |  |
| <ul> <li>Complete pulmonary function test</li> <li>*Repeat months</li> <li>PFT + MIPS/MEPS</li> <li>Spirometry</li> <li>Methocholine Challenge Test</li> </ul> | □ Spirometry and diffusion capacity (DLCO) □ Certified respiratory educator (CRE) assessment and complete PFT □ Bronchial Provocation (Mannitol inhalation challenge require full PFT in 6 months)  L/CLINICAL CONCERNS |  |

# PREP INFORMATION

- The complete pulmonary function test takes around 45 minutes to 1 hour.
- The patient may need to stop inhalers 4 hours prior to the test or as advised.
- Smoking should be avoided 2 hours prior to the test.
- Patient should avoid heavy meal prior to the test.

# **CONTRAINDICTIONS**

If you had any of the following, please inform the booking administrator as your appointment would need to book accordingly:

- Myocardial infarction (heart attack) or Cerebral Vascular Accident (stroke) within the last month.
- Currently actively coughing up blood.
- Any surgery or procedure done within the last 6-8 weeks.



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|--|--|--|
| Urgency of Referral Urgent Semi-Urgent Routine                   |  |  |
| PATIENT INFO Please fill in all the requested information below. | REFERRING PHYSICIAN INFO   |  |
| Last Name First Name   | Referring Physician  |  |
| Street Address   | Location   |  |
| City Province Postal Code  | PRAC ID  |  |
| Date of BirthDD/MM/YY Male Female                                | Other Phone Fax  |  |
| AMC Height Weight  | KG Family MD   |  |
| PhoneEmail   | CC Dr. Signature   |  |
| TEST REQUEST   |  |  |
| Complete pulmonary function test *Repeat months                  | Spirometry and diffusion capacity (DLCO)   |  |
| ☐ PFT+MIPS/MEPS  | <ul> <li>Certified respiratory educator (CRE) assessment<br/>and complete PFT</li> </ul> |  |
| Spirometry   | Bronchial Provocation  |  |
| Methacholine Challenge Test                                      | (Mannitol inhalation challenge require full PFT in 6 months)                             |  |
| REASON FOR REFERRAL/CLINICAL CONCERNS                            |  |  |

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RespiratoryPlus

### **Pulmonary Function Test (PFT):**

A Pulmonary Function Test (PFT) measures how well your lung's performance is. It identifies issues and can help diagnose medical conditions related to breathlessness, coughing, and other breathing problems. The test includes Spirometry, Diffusion capacity and Lung volumes, which measures how much air your lungs can hold, how quickly you can move air in and out of your lungs and how well your lungs deliver oxygen to your bloodstream.

#### **Lung Volumes**

This test measures the total volume of air in the lungs, including both the air you can exhale forcefully and the air that remains after a maximal exhalation. It provides information about lung capacity and can help diagnose conditions like restrictive lung disease or hyperinflation.

#### PFT + MIPS/MEPS:

Maximum inspiratory pressure and maximum expiratory pressure are two essential measurements that provide vital information when patient's PFT shows restrictive pattern with normal DLCO. It measures the maximum strength of respiratory muscles.

### **Spirometry:**

Spirometry is a common diagnostic test used to assess lung function. It measures the volume of air that a person can inhale and exhale, as well as the speed at which they can do so. These measurements can help evaluate lung health, diagnose respiratory conditions like asthma or chronic obstructive pulmonary disease (COPD), monitor disease progression, and assess the effectiveness of treatment. This test could be ordered if a patient has wheezing, cough, shortness of breath or as a follow up to assess their lung condition management.

### **Diffusion Lung Capacity (DLCO):**

The DLCO test, also known as the diffusing capacity of the lungs for carbon monoxide, is a pulmonary function test that measures the ability of the lungs to transfer gases from the air into the bloodstream. It provides information about the efficiency of the lung's gas exchange function. The DLCO test is useful in evaluating conditions such as pulmonary fibrosis, emphysema, and other lung disorders that affect the gas exchange process. It can aid in diagnosis, monitoring disease progression, and determining treatment options. DLCO test cannot be performed on its own and is ordered along with Spirometry or complete Pulmonary Function testing.

#### **Bronchial Provocation Test (Mannitol Inhalation Challenge):**

It is a test to assess bronchial hyperresponsiveness by bronchial provocation using indirect stimuli such as mannitol. Mannitol challenge test have been found to be safe and useful in identifying patient with asthma. Mannitol testing is more specific but less sensitive than methacholine for asthma.

#### **Certified Respiratory Educator Assessment:**

Professionals with specialized training help people manage their asthma and COPD. During respiratory assessment, certified respiratory educators will educate the patient on proper inhaler techniques and educating them about their lung condition. It can help the patient manage their lung condition and achieve their health goals.

### **Methacholine Challenge Test:**

Methacholine challenge test (also known as bronchoprovocation test) is performed to evaluate how "reactive" or "responsive" your lungs are. It can help doctors evaluate symptoms suggestive of asthma such as cough, shortness of breath, wheezing and chest tightness.