



PULMONARY FUNCTION REQUISITION

RESPIRATORY THERAPY SERVICES
Cowichan District Hospital
Room 321 – 3045 Gibbins Road
Duncan, BC V9L 1E5
Phone: 250-737-2030 Local: 18008
Fax: 1-250-519-1552

NAME: _____
ADDRESS: _____
PHONE: _____ ALT.#: _____
PHN: _____ DOB: ____/____/____
M D Y

FAX COMPLETED REQUISITION TO: 1-250-519-1552 (Please note: This is the CDH Booking. Located at RJH)

Preliminary Diagnosis: _____ Symptoms: _____

Requesting Physician (please print) _____ Signature: _____

Cc: (1) _____ (2) _____

Office Fax Number: _____

Does patient have an infectious disease requiring contact precautions (ie: TB or MRSA) _____

- *Flow Volume Loops** – Pre/Post Bronchodilator (suspected Asthma or COPD)
- *Full PFTs** (detailed studies) [Diff. Diagnosis of abnormal spirometry → esp. low FVC, ILD (Fibrosis/Sarcoidosis)].
- MIP/MEP** – Muscle Strength Testing.
- Home Oxygen Assessment** ABG with oximetry, exercise oximetry /titration or if indicated by absence of qualification; overnight oximetry.
- ABG with Oximetry**
- Overnight Oximetry** - Level IV Diagnostic for evaluation of sleep disordered breathing.
- Six Minute Walk test** Functional assessment of Cardio-Pulmonary Disease (BODE-index)

- Indicates ABGs will be done with oximetry by protocol if FEV 1 is < 1.0 L or when FEV 1.0 is less than 50% predicted.

(see reverse for patient instructions)

APPOINTMENTS - Pre-booked appointments only.

LOCATION OF LAB:

- Patient must register @ Central Patient Registry –Emergency Entrance Cowichan District Hospital
- Testing is performed in Room 321 [3rd floor – follow the signs]
- Parking in main lot at west end of hospital.
- Handicapped parking available by the Main Entrance.

RESULTS

- Available in 7 – 14 days.

PATIENT INFORMATION:

Pulmonary Function Testing

Withhold medications:

- Short-acting bronchodilators or anticholinergics for six (6) hours prior to testing.
- Serevent or combo long-acting bronchodilators, i.e. Symbicort for 24 hours prior to testing.
- Discontinue long acting Theophylline 36 – 48 hours prior to testing and short-acting 24 hours prior.

Diffusion Testing: (Part of Full PFTs)

- Refrain from smoking x 24 hours
- Avoid alcohol x 4 hours prior to testing
- No meal 2 hours prior to testing
- No recent strenuous exercise

PLEASE CONTACT US BY PHONE AT 250-737-2030 LOCAL 18008 IF YOU ARE UNABLE TO MAKE YOUR APPOINTMENT.