



Out-patient Cardiopulmonary Services Requisition

Ambulatory Clinics
Tower D, First Floor
715 Mackay Street, Pembroke ON K8A 1G8
Booking office: 613-732-2811 EXT 6612
Booking Office Fax: 613-732-6350

Please Print

Patient Name: _____

Physician Name: _____
(Print)

Date of Birth _____
YYYY/MMM/DD

Physician signature: _____

Telephone: (____) - ____ - ____

*Please Note your signature enables: * for pre and post bronchodilator tests we will administer 4 puffs of salbutamol to patients 12 years of age and older and 2 puffs of salbutamol to patients between age 6 and 12 years*

Appointment Date: _____
YYYY/MMM/DD

Appointment Time: _____

Brief history/diagnosis / CURRENT RESPIRATORY MEDICATIONS

Does the patient smoke Yes No

PLEASE CHECK OFF THE REQUIRED APPOINTMENTS

Pulmonary function tests

Complete PFT
(patient must be greater than 16 years old)

Includes:

- Spirometry (Flow Volume Loop)
- Repeat Spirometry after bronchodilator
- Diffusion Capacity
- Lung Volumes
- O2 Saturation

Spirometry - pre and post flow volume loop, O2 saturation (greater than 6 and less than 16 years of age)

Oximetry at rest and on exertion

Home Oxygen Assessment with oximetry strip and ABG if required

Arterial Blood

Maximal Inspiratory and Expiratory Pressures

Please give patient PFT instructions on reverse →

Patient Information Sheet

Your doctor has ordered a **Pulmonary Function Test**. The pulmonary function test consists of individual breathing maneuvers that measure how well your lungs are working. The results are very dependant upon patient efforts. You will be coached in order to obtain the best results. During the test you will be given a bronchodilator and a portion of the test will be repeated. This assesses your lungs' response to medication. Your test results will be interpreted by our supervising physician and forwarded to your family doctor.

PREPARATION for the Pulmonary Function Test:

- Hold "rescue" short acting puffers/inhalers for **(4) hours** prior to test unless **ABSOLUTELY** necessary (Ventolin, Bricanyl, Atrovent, Airomir, Combivent)
- Hold all other puffers/inhalers the day of the test unless advised differently by physician
- Do not smoke **(4) hours** prior to test
- Continue to take all other prescription medications as ordered
- Wear loose comfortable clothing that does not restrict your breathing
- No vigorous exercise prior to testing
- Please bring a list of your current medications including over the counter medications
- If you develop cold/flu like symptoms within **(48) hours** prior to test please call to reschedule

Register in Tower D (Delta) First Floor at 715 Mackay Street
15 minutes prior to your appointment.

Please call if you are unable to make this appointment and reschedule
613-732-2811 ext 6612