

Respiratory Testing Referral Form

By Appointment Only

Patient Information:

Patient Name		
Patient DOB		WSIB No. if applicable:
Primary Phone #		Alt Phone #:
Health Card # & Version Code		OSMH MRN (if known)
Patient is able to give consent for this procedure:	Y: <input type="checkbox"/> N: <input type="checkbox"/> SDM Name if No: SDM Contact Info:	Medications:

Pulmonary Function Testing:

- Spirometry only
- Post Bronchodilator Spirometry
- Full PFT (Pre & Post spirometry, Lung Volumes, CO Diffusion)
- Maximal Static Pressures (MIPS & MEPS)
- Arterial Blood Gases Room Air with Oxygen _____l/m via NP
- Oximetry at rest with exercise with Oxygen _____l/m via NP
- Home Oxygen Assessment (includes ABG's &/or oximetry)

Bronchial Provocation Testing

- Methacholine Challenge Exercise Challenge
- ★ Spiriva will block Methacholine Response

Note: Challenge studies require a previously documented pre & post spirometry. Methacholine and exercise studies cannot be done on the same day. Patients must be cleared from a cardiac standpoint.

Clinical Information:

Diagnosis:
 Pertinent History:
 Medications:
 Known Allergies:

Referring Physician:

Date Sent		
Referring Physician	Physician Name (print): _____	Physician CPSO #: _____
	Physician Signature: _____	
Office Telephone #		Fax:

Respiratory Testing Preparation Instructions

These tests are to determine the ability of your lungs to move air and to exchange gasses. They are intended to assist physicians in determining and/or treating respiratory conditions. How do I prepare for my testing?

Medication:

If you do not see your breathing medication on these lists please ask your physician for direction.

- **Do not take 6 hours before** testing short acting Bronchodilator (Blue Puffer) ie: Salbutamol (Albuterol, Apo-Salvent, Alti-Salbutamol, Gen-Salbutamol, Ventolin, etc)
- **Do not take 12hrs before** test: Atrovent, Duovent, Combi-Vent
- **Do not take 24 hrs before** test: Choledyl, Phyllocontin, Quibron, Uniphyl, Theodor, Serevent, Oxeze, or Foridil
- **Take:** all other medications I the usual manner unless you are told not to by your doctor who ordered the test.

Note: If shortness of breath bothers you when you stop taking your medications begin taking them again in the usual manner and inform the Respiratory Therapist doing the testing

Bronchial Provocation Tests

Methacholine Challenge

- Bring list of medication(s)

Exercise Challenge & Oximetry with Exercise

- Wear comfortable shoes suitable for walking on a treadmill (*please avoid wearing sandals or heels, if possible*)

Need to Cancel or Reschedule?

OSMH Central Scheduling requires 24 hours minimum notice of a request to cancel or reschedule an appointment

If there are any questions about your appointment, please phone Central Scheduling with a minimum 24 hours' notice

705-325-2201 ext. 3151