

Considerations prior to referring for spirometry forced manoeuvres

Have you had a recent heart attack? It is recommended that the test is performed at least a week after an uncomplicated MI (provided patient's condition has remained stable).

Have you recently had a PE/being investigated for PE? It is recommended that the test is not performed until the patient has been treated with at least 2 doses of blood thinners, if untreated wait 1 week.

Do you have an aortic aneurysm? If it has grown quickly or is >6cm then this test is not recommended.

Do you suffer from high blood pressure? If it is suspected to be excessively high it must be checked before breathing test is performed, test should be postponed until treated.

Do you suffer from angina? Chronic stable angina should not limit lung function testing (GTN spray may be required to avoid symptoms), unstable angina is a serious contraindication.

Have you had a recent pneumothorax? Lung function testing is usually safe 2 weeks after treatment.

Have you had recent abdominal surgery? It is advisable to wait at least 1-week post-surgery but longer if still healing/experiencing pain.

Have you had recent eye surgery? Using laser techniques/needles it is advisable to wait 1-2 weeks but for cataract surgery/retinal detachment repair it is recommended to wait 2-3 months.

Have you recently had thoracic surgery? Uncomplicated healing takes about 4-6 weeks, tests before this could cause sternal wound complications and pain.

Have you had recent brain surgery? Guidelines recommend waiting 3-6 weeks post-surgery if recovery is uncomplicated.

Have you recently had a stroke? If the patient has been put on the right medication (anticoagulants and/or antihypertensives) then the test can be performed (check seal on mouthpiece).

Have you had a recent bronchoscopy? Patient must wait at least 1 week before performing lung function tests.

Do you have an ear infection/think you might? A forced manoeuvre could cause the ear drum to rupture/cause excessive pain and postponing the test may be beneficial

Are you pregnant? Lung function testing should not present any problems but interpretation of the test may not be accurate (testing should be avoided in pre-eclampsia).

Are you coughing up blood? If it is unexplained/patient has no diagnosis, it is a concern as the test may cause further bleeding/contamination if it's due to infection (think TB!).

Have you recently had/do you have fluid on your lungs? It is possible to perform tests in this case but may cause pain and results may not be accurate/meaningful.

If the requestor still wants the test in any of the above cases it must be documented in the notes that they have assessed the risk and explained this to the patient and they are happy to proceed.