

Physician Web Scheduler (PWS) Approved Procedures

Pulmonary Function Testing (5)

PFT COMPLETE (SPIRO, LUNG VOL, DIFF)
PFT COMPLETE W/HOME O2 QUALIFICATION
PFT COMPLETE W/MUSCLE FORCES
PFT DIFFUSION (DLCO ONLY)
PFT SPIROMETRY

Procedure Full Record

MUNSON HEALTHCARE

Procedure: PFT COMPLETE (SPIRO, LUNG VOL, DIFF)

Notes

DIAGNOSIS GUIDELINE:

NO RULEOUT OR SCREENINGS; INDICATE DISEASE OR RESPIRATORY SYMPTOMS.

Default Preparations

1. Report 15 minutes prior to testing.
2. Please bring a list of all your medications you are taking, including inhalers.
3. NO SMOKING FOR 12 HOURS PRIOR TO TESTING.
4. No heavy exercise prior to testing.
5. You may eat a light meal prior to testing.
6. Test may take up to 1.5 hours to complete.
7. See list and times to hold inhalers or nebulized meds, take all other medications as ordered.

DO NOT TAKE THE FOLLOWING MEDICATIONS:

Hold for 6 hours prior to test

Albuterol (Ventolin, Proventil, Proaire), Alvesco, Atrovent, Asthmacort, Asthmanex, Combivent, Duo-neb, Flovent, Intal, Maxair, Pulmicort, QVar, Xopenex (Levalbuterol HCL)

Hold for 24 hours prior to test

Advair, Brovana, Dulera, Foradil, Performomist, Serevent, Spiriva, Symbicort

If you have any questions regarding your test, please call (231) 935-6371.

Linked Resources

Level: Primary Resources-TECH	Type: Staff	Qty.: 1	Marked: N	Usage: First		
Linked Resources	Facility				Hrs.	Min.
K/PFT TECHNICIAN	KALKASKA MEMORIAL HEALTH CENTER				1	10
M/PFT TECHNICIAN 1	MUNSON MEDICAL CENTER				1	30
M/PFT TECHNICIAN 2	MUNSON MEDICAL CENTER				1	30
P/PFT TECHNICIAN	PAUL OLIVER MEMORIAL HOSPITAL				1	10

Procedure Full Record

MUNSON HEALTHCARE

Procedure: PFT COMPLETE W/HOME O2 QUALIFICATION

Questionnaire: Who provides your oxygen? _____

Notes

DIAGNOSIS GUIDELINE:

NO RULEOUT OR SCREENINGS; INDICATE DISEASE OR RESPIRATORY SYMPTOMS.

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2. Please bring a list of all your medications you are taking, including inhalers.
3. NO SMOKING FOR 12 HOURS PRIOR TO TESTING.
4. No heavy exercise prior to testing.
5. You may eat a light meal prior to testing.
6. Test may take up to 1.5 hours to complete.
7. See list and times to hold inhalers or nebulized meds, take all other medications as ordered.

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M/PFT TECHNICIAN 1	MUNSON MEDICAL CENTER				1	30
M/PFT TECHNICIAN 2	MUNSON MEDICAL CENTER				1	30
P/PFT TECHNICIAN	PAUL OLIVER MEMORIAL HOSPITAL				1	10

Procedure Full Record

MUNSON HEALTHCARE

Procedure: PFT COMPLETE W/MUSCLE FORCES

Notes

DIAGNOSIS GUIDELINE:

NO RULEOUT OR SCREENINGS; INDICATE DISEASE OR RESPIRATORY SYMPTOMS.

Default Preparations

1. Report 15 minutes prior to testing.
2. Please bring a list of all your medications you are taking, including inhalers.
3. NO SMOKING FOR 12 HOURS PRIOR TO TESTING.
4. No heavy exercise prior to testing.
5. You may eat a light meal prior to testing.
6. Test may take up to 1.5 hours to complete.
7. See list and times to hold inhalers or nebulized meds, take all other medications as ordered.

DO NOT TAKE THE FOLLOWING MEDICATIONS:

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Linked Resources	Facility				Hrs.	Min.
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M/PFT TECHNICIAN 1	MUNSON MEDICAL CENTER				1	30
M/PFT TECHNICIAN 2	MUNSON MEDICAL CENTER				1	30
P/PFT TECHNICIAN	PAUL OLIVER MEMORIAL HOSPITAL				1	10

Procedure Full Record

MUNSON HEALTHCARE

Procedure: PFT DIFFUSION (DLCO ONLY)

Notes

DIAGNOSIS GUIDELINE:

NO RULEOUT OR SCREENINGS; INDICATE DISEASE OR RESPIRATORY SYMPTOMS.

Default Preparations

1. Report 15 minutes prior to testing.
2. Please bring a list of all your medications you are taking, including inhalers.
3. NO SMOKING FOR 12 HOURS PRIOR TO TESTING.
4. No heavy exercise prior to testing.
5. You may eat a light meal prior to testing.
6. Test may take up to 1.5 hours to complete.
7. See list and times to hold inhalers or nebulized meds, take all other medications as ordered.

DO NOT TAKE THE FOLLOWING MEDICATIONS:

Hold for 6 hours prior to test

Albuterol (Ventolin, Proventil, Proaire), Alvesco, Atrovent, Asthmacort, Asthmanex, Combivent, Duo-neb, Flovent, Intal, Maxair, Pulmicort, QVar, Xopenex (Levalbuterol HCL)

Hold for 24 hours prior to test

Advair, Brovana, Dulera, Foradil, Performomist, Serevent, Spiriva, Symbicort

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M/PFT TECHNICIAN 1	MUNSON MEDICAL CENTER				1	0
M/PFT TECHNICIAN 2	MUNSON MEDICAL CENTER				1	0
P/PFT TECHNICIAN	PAUL OLIVER MEMORIAL HOSPITAL				1	0

Procedure Full Record

MUNSON HEALTHCARE

Procedure: PFT SPIROMETRY

Notes

DIAGNOSIS GUIDELINE:

NO RULEOUT OR SCREENINGS; INDICATE DISEASE OR RESPIRATORY SYMPTOMS.

Default Preparations

1. Report 15 minutes prior to testing.
2. Please bring a list of all your medications you are taking, including inhalers.
3. NO SMOKING FOR 12 HOURS PRIOR TO TESTING.
4. No heavy exercise prior to testing.
5. You may eat a light meal prior to testing.
6. Test may take up to 1 hour to complete.
7. See list and times to hold inhalers or nebulized meds, take all other medications as ordered.

DO NOT TAKE THE FOLLOWING MEDICATIONS:

Hold for 6 hours prior to test

Albuterol (Ventolin, Proventil, Proaire), Alvesco, Atrovent, Asthmacort, Asthmanex, Combivent, Duo-neb, Flovent, Intal, Maxair, Pulmicort, QVar, Xopenex (Levalbuterol HCL)

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M/PFT TECHNICIAN 1	MUNSON MEDICAL CENTER				1	0
M/PFT TECHNICIAN 2	MUNSON MEDICAL CENTER				1	0
P/PFT TECHNICIAN	PAUL OLIVER MEMORIAL HOSPITAL				1	0