

# Spirometry Administration

## Spirometry

Coordinator's initials

\_\_\_\_\_

(aaa)

Has Safety Assessment form been completed for subject?

- Yes  
 No

**If NO, then STOP. Complete the Safety Assessment before performing the spirometry test.**

Safety Issues: [safety\_concerns]

Spirometry: [safety\_actions\_p4\_spiro]

Albuterol & post-BD: [safety\_actions\_p4\_albut]

Do you use inhaled medication for your breathing?

- Yes  
 No

If yes, when was the last time you used your inhaled medication:

Date of last dose

\_\_\_\_\_

(mm/dd/yyyy)

If yes, time of last dose

\_\_\_\_\_

(23:59)

## Pre-bronchodilator Pulmonary Function Testing

**All spirometry tests to be done in seated position.**

Date of spirometry

\_\_\_\_\_

Was a filter applied to the spirette (post-COVID19 visits)?

- Yes  
 No

Time pre-bronchodilator spirometry started

\_\_\_\_\_

(23:59)

Check here if pre-bronchodilator test not done and add reason in comments below

- Not done

## Post-bronchodilator Pulmonary Function Testing

Time albuterol administered

\_\_\_\_\_  
(23:59)

Check here if albuterol not done and add reason in comments below

Not done

## Subject's spirometry after albuterol

Time post-bronchodilator spirometry started

\_\_\_\_\_  
(23:59)

Check here if post-bronchodilator spirometry not done and add reason in comments below

Not done

## DLco:

**Note: Do NOT conduct DLco if albuterol is not administered**

Time of DLco

\_\_\_\_\_  
(23:59)

Was a filter applied to the DLco device (post-COVID19 visits)?

Yes  
 No

Slow vital capacity, SVC

\_\_\_\_\_

Check here if DLco test not done and add reason in comments below

Not done

PFT Comments

\_\_\_\_\_