

First Name:  
Age:  
Sex:  
Weight:  
Height:

Identification:  
Ward:  
Race:  
Physician:  
Operator:

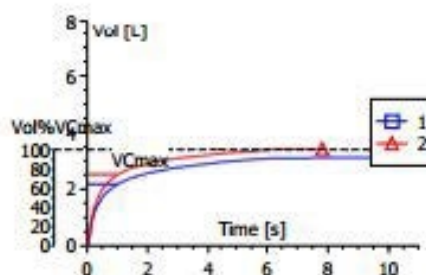
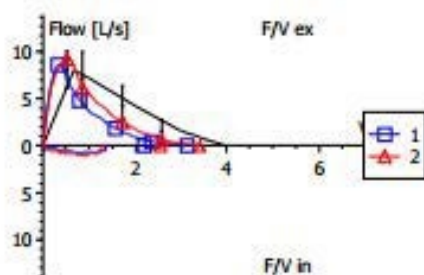
## Spirometry

		Ref	PRE	%(PRE/Ref)	Post	%(Post/Ref)	Post Chg%
FVC	[L]	3.97	3.11	78.3	3.41	85.9	9.76
FEV 1	[L]	3.08	2.17	70.5	2.52	81.9	16.17
FEV 3	[L]	4.01	2.75	68.7	3.09	77.0	12.08
FEV 1 % FVC	[%]		69.90		73.98		5.84
FEV3 % FVC	[%]		88.68		90.56		2.12
MMEF 75/25	[L/s]	3.24	1.21	37.5	1.76	54.5	45.32
PEF	[L/s]	8.00	8.57	107.2	9.16	114.6	6.93
ATS error code			1		1		0
IC forced	[L]	3.04					

Date

20/01/20

20/01/20



\*\*\* INTERPRETATION (PRE)

Moderate expiratory flow limitation.

Slight expiratory flow limitation in the range of deep expiration.

Further lung function measurement recommended.

\*\*\* INTERPRETATION (POST)

Slight expiratory flow limitation.

Further lung function measurement recommended.

<input type="checkbox"/> Within Normal Limit	<input type="checkbox"/> Mildly Restrictive Ventilatory Impairment
<input type="checkbox"/> Poor Effort	<input type="checkbox"/> Moderately Restrictive Ventilatory Impairment
<input type="checkbox"/> Mildly Obstructive Ventilatory Impairment	<input type="checkbox"/> Severely Restrictive Ventilatory Impairment
<input type="checkbox"/> Moderately Obstructive Ventilatory Impairment	<input type="checkbox"/> Small Airway Disease
<input type="checkbox"/> Severely Obstructive Ventilatory Impairment	

