

## Initial Assessment Report

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**Consultation Completed: 1st March 2019**

Dr Foster is a 48 year old man and has been taking treatment equivalent to **Step 3** of the BTS / SIGN Asthma Guidelines. This is his **1<sup>st</sup>** entry to the Lung Health software.

### Diagnosis

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Main pointers to an asthma diagnosis include:

- Patient has been on inhalers since childhood or for more than ten years

Other Supporting Information:

- An observed response to therapy in the practice

Other Supportive Test Results:

- PEF Chart Variability

### Personal Features

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He is a person who continues to smoke.

### Control

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Overall control has been assessed as **good**. Their control is based on the following:

- The Royal College of Physicians Three Questions - 0/3 (low is good)
- The patient has had no exacerbations in the last 12 months
- The patient used their reliever inhaler no times last week
- The patient's PEF is 105.97% of expected

### Drug Therapy

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The therapy recommendation from this consultation is:

*This patient reports good control on Step 3 treatment. Continue with the same regimen and plan to review in one year.*

Easyhaler Salbutamol 200mcg dry powder inhaler 1 puff, as required daily has been started.

Fostair 100mcg/6mcg Nexthaler 1 puff, twice daily remains unchanged.

Patient is currently taking no non-respiratory medication

## Other Checks and Advice

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Inhaler technique with current medication has been checked and was found to be **adequate** for current devices

Checks on prescription collection suggest poor concordance with therapy.

## Aggravating Factors

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### Employment

No work related factors have been found.

### Triggers

No triggers have been identified.

## Vaccination Status

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- Flu vaccination is up to date. **An appointment for a flu vaccination should be made for next autumn.**
- Pneumococcal vaccination is up to date and is not due for some time.

## Education Materials and Management Plan

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A written management plan has been supplied and it has been confirmed that the patient understands it.

The Asthma UK online advice website URL has been given to the patient as a resource for them to review at home.

Asthma UK resources have been received offline.

## QOF Codes Reported

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		5-Byte v2	CTV3	Value
<b>Asthma Register</b>	Asthma	H33	H33..	
<b>Reversibility</b>	Peak flow rate before bronchodilation	339A	XaEHe	550

<b>RCP 3 Questions</b>	Asthma not disturbing sleep	663O	663O.
	Asthma never causes daytime symptoms	663s	XaINa
		663f	663f.
	Asthma never restricts exercise		
<b>Smoking</b>	Current smoker	137R	137R.

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Thank you for agreeing that your data may be used anonymously for the purposes of evaluating the asthma service and for research.

## Nurse Summary

Nurse Name:	Nurse Signature:	Date:

## GP Recommendations and Requests

I authorise the NSHI Nurse Advisor to implement the above medicinal/non-medicinal intervention(s) in line with the Practice Treatment Protocol on the practice computer system		
GP Name:	GP Signature:	Date:
Review appointment required? Yes/No	If Yes, give date:	