

## Initial Assessment Report

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**Consultation Completed: 28th September 2017**

Mrs Army is a 47 year old woman who has had asthma since before 2006 and has been taking treatment equivalent to **Step 2** of the BTS / SIGN Asthma Guidelines. This is her **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 the Asthma Register since before 2006
- Patient has been on inhalers since childhood or for more than ten years

Other Supportive Test Results:

- Bronchodilator Reversibility (> 12% and 200 ml change in FEV1 or FVC)

### Personal Features

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She is an ex-smoker.

### 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 88.89% of expected

### Drug Therapy

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The therapy recommendation from this consultation is:

*This patient is reporting good control on a low dose of inhaled steroid (Step 2). Continue same therapy. Plan to review in one year.*

Salamol 100mcg Easi-Breathe inhaler 2 doses, as required daily remains unchanged.

Beclometasone 100mcg inhaler 2 doses, 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 good 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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- The patient was given the flu vaccination today.
- The patient was given the pneumococcal vaccination today.

## 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..	
	Reversibility	339A	XaEHe	400
<b>RCP 3 Questions</b>	Peak flow rate before bronchodilation			
	Asthma not disturbing sleep	663O	663O.	
	Asthma never causes daytime symptoms	663s	XaINa	
	Asthma never restricts exercise	663f	663f.	

<b>Smoking</b>	Ex-smoker (stopped more than 6 months)	137S	Ub1na
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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.

Review ID:1663

## 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:	