

## Initial Assessment Report

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**Consultation Completed: 10th October 2019**

Mr F is a 45 year old man and has been taking treatment equivalent to **Step 5** 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 had asthma symptoms for the last few years
- Reports symptomatic benefit from inhaled therapy

Other Supporting Information:

- When this patient gets a cold, it always goes to his / her chest
- When this patient is on holiday, their chest is improved
- After exertion, this patient experiences worsening chest symptoms (and it responds to inhalers)
- Triggers:
  - Perfume fumes
  - Pets
  - Passive Smoking
  - Pollen
  - Dust Mites
- Patient has previously scored 2 or 3 on Royal College of Physicians (RCP) 3 Questions, indicating poor asthma control
- Patient has concomitant eczema or hay fever

Other Supportive Test Results:

- FEV1/FVC ratio (

### Today's Spirometry

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Today's FEV1 was recorded as **1.0** litres which is **45%** of the patient's predicted value of **2.2** litres

### Personal Features

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He is an ex-smoker.

## Control

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

- The Royal College of Physicians Three Questions - 3/3 (high is poor)
- Score of 5/25 (high is good) on the Asthma Control Test
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## 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:	