



# **Initial Assessment Report**

#### **Consultation Completed:**

Mr McKay5 is a 47 year old man who has had asthma since before 2006 and has been taking treatment equivalent to **Step 1** of the BTS / SIGN Asthma Guidelines. This is his **1**<sup>st</sup> entry to the Lung Health software.

## **Diagnosis**

Main pointers to an asthma diagnosis include:

- Patient has been on the Asthma Register since before 2006
- Reports symptomatic benefit from inhaled therapy

Other Supporting Information:

Patient has previously scored 2 or 3 on Royal College of Physicians (RCP) 3
 Questions, indicating poor asthma control

Other Supporting Information:

• An observed response to therapy in the practice

#### **Personal Features**

He is a non-smoker.

#### **Control**

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

- The Royal College of Physicians Three Questions 2/3 (high is poor)
- The patient has had no exacerbations in the last 12 months
- The patient used their reliever inhaler 3-4 times last week
- The patient's PEF is 75.00% of expected

#### **Clinical Examination**

The patient underwent a clinical examination today and the following abnormal findings were noted:

- Patient's percussion was unknown
- Patient's breath sounds were unknown

### **Drug Therapy**

The therapy recommendation from this consultation is:

This patient is reporting symptoms that should be controllable. Consider moving up to Step 2 by adding a low dose inhaled steroid.

Easyhaler Salbutamol 200mcg dry powder inhaler 1 puff, as required daily remains unchanged.

Easyhaler Budesonide 200mcg dry powder inhaler 1 puff, once daily has been started.

Patient is currently taking no non-respiratory medication

#### Other Checks and Advice

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**

#### **Employment**

No work related factors have been found.

#### **Triggers**

No triggers have been identified.

#### **Vaccination Status**

- The patient's flu vaccincation is not up to date but the vaccine is not currently available.
- Pneumococcal vaccination is up to date and is not due for some time.

## **Education Materials and Management Plan**

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

Information about the Asthma UK online advice website has **not** yet been given to the patient.

Asthma UK online resouces have **not** yet been given to the patient, and the patient has not been made aware of them.

A Peak Flow meter has been issued to the patient with the details:

# **QOF Codes Reported**

Asthma Register Asthma		5-Byte v2 H33	CTV3 H33	Value
Reversibility	Peak flow rate before bronchodilation	339A	XaEHe	450
RCP 3 Questions	Asthma not disturbing sleep Asthma daytime symptoms Asthma restricts exercise	663O 663q 663e	663O. XaIIZ 663e.	
Smoking	Never smoked	1371	XE0oh	

Review ID:463

Nurse Summar	У		
Nurse Name:	Nurse Signature:	Date:	
GP Recommen	dations and Requests		
	Nurse Advisor to implement the		
system	with the Practice Treatment Pro	nocoi on the practice computer	
GP Name:	GP Signature:	Date:	
Review appointment	required? Yes/No	give date:	

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