

Initial Assessment Report

Consultation Completed:

Mrs Potts is a 53 year old woman who has had asthma since before 2006 and has been taking treatment equivalent to **Step 1** of the BTS / SIGN Asthma Guidelines. This is her **1st** entry to the Lung Health software.

Diagnosis

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

Personal Features

She is an ex-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 5+ times last week
- The patient's PEF is 84.66% 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.*

Salamol 100mcg inhaler prn doses, 1 puff times daily remains unchanged.

Serevent 25mcg Evohaler bd doses, 2 puffs times daily remains unchanged.

Qvar 100 inhaler bd doses, 2 puffs times 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

Aggravating Factors

Employment

No work related factors have been found.

Triggers

She describes a number of specific triggers to her asthma:

- Pets / animals (*cats. horses*)
- Dust mites

Vaccination Status

- The patient's flu vaccination is not up to date but the vaccine is not currently available.
- The patient was given the pneumococcal vaccination today.

Education Materials and Management Plan

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.

QOF Codes Reported

		5-Byte v2	CTV3	Value
Asthma Register	Asthma	H33	H33..	
Reversibility	Peak flow rate before bronchodilation	339A	XaEHe	320

RCP 3 Questions	Asthma disturbing sleep	663N	663N.
	Asthma daytime symptoms	663q	XaIIZ
	Asthma never restricts exercise	663f	663f.
Smoking	Ex-smoker (stopped more than 6 months)	137S	Ub1na

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:	