

**impact**

**Lung Health**  
Asthma Guided Consultation

A stylized graphic element in purple and pink, resembling a swirl or a stylized 'L' shape, positioned to the right of the text.

## 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:	