Worksheet

The following questions assist with planning and implementing Spirometry in the primary care practice:

1. Which patients?
   - How are patients identified?
   - Is an order required or are there standing orders?
   - How often is Spirometry conducted?
   - How do we designate Spirometry and pre-post bronchodilator Spirometry?

2. When?
   - During visit?
   - Return visit?

3. Where?
   - In the same exam room?
   - In a different exam room? Procedure room?

4. Who conducts/implements the spirometry test?
   - All rooming staff?
   - Designated person? Alternate?
   - What is the plan for staff turnover?

5. Interpretation and treatment plan
   - How do the Spirometry results get to provider?
   - How does patient find out about treatment plan?

6. Documentation
   - How do results get into chart?
   - Where are the stored in the EMR?

7. Storage and consumables
   - Where are the spirometer and mouthpieces stored?
   - Where is the bronchodilator stored?
   - Is the spirometer locked up? Who has the key/code?
   - How/who reorders the mouthpieces and nose clips?

8. Billing
   - Who codes the procedure?
   - Are codes on billing sheet?
Proven pathway: Spirometry
Goal: Implement spirometry for diagnosis and management of asthma
Chronic care model: Delivery system design

Snapshot
1. Patient is roomed for visit
2. Asthma educator conducts spirometry
3. Spirometry is conducted in procedure room
4. If spirometry was obtained, ordering provider interprets the results and sends it for over-read
5. First over-read occurs at clinic and then test is faxed to the University of Minnesota for second over-read
6. Over-read results are returned to the ordering provider for patient follow-up
7. If an acceptable spirometry was not obtained, a future appointment is made for repeat spirometry

Flow diagram

Implementation details/considerations

- When is spirometry scheduled or ordered?
  - Separate visit?
  - Before, during, or after provider visit?
- Where is spirometry conducted?
  - Exam room or portable spirometer?
  - Treatment/procedure room?
  - Extra space?
- Who conducts the spirometry?
  - One person trained?
  - Several persons trained?
- How is the quality of spirometry guaranteed?
  - Training of staff to conduct spirometry and determine acceptability of results
  - Limited staff conducting and interpreting
  - Empower staff to stop testing if results are unacceptable
- Who will interpret the spirometry results?
  - One or two providers skilled?
  - All providers skilled?