



## PULMONARY FUNCTION PHYSICIAN PRESCRIPTION

### PLEASE MARK FACILITY WHERE SERVICE(S) IS (ARE) TO BE PERFORMED:

- Munson Healthcare Cadillac Hospital (*CAD*) - Main Central Scheduling: **877-484-4536**
- Munson Healthcare Charlevoix Hospital (*CHX*) - Main Central Scheduling: **231-547-8801**
- Munson Healthcare Grayling Hospital (*GRY*) - Main Central Scheduling: **877-484-4536**
- Kalkaska Memorial Health Center (*KMHC*) - Lower Level, Scheduling Department: **231-258-3612**
- Munson Healthcare Manistee Hospital (*MAN*) - Main Lobby, Pulmonary Function: **231-398-1114**
- Munson Medical Center (*MMC*) (*Traverse City*) - Main Lobby: **231-935-6096**, Fax: **231-935-3203**
- Munson Healthcare Otsego Memorial Hospital (*OMH*) (*Gaylord*) - Central Scheduling: **989-731-2152**
- Munson Healthcare Paul Oliver Memorial Hospital (*POMH*) (*Frankfort*) - Main Lobby, Scheduling Department: **231-352-2260**

Patient Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Appointment Date: \_\_\_\_\_ Appointment Time: \_\_\_\_\_  AM  PM

Billing Diagnosis: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**\*\*\*PLEASE SEE PATIENT INSTRUCTIONS ON BACK FOR PULMONARY FUNCTION TESTS ONLY\*\*\***

### PULMONARY FUNCTION LAB

The following tests can be done at **KMHC, MMC, POMH, and MAN** (*unless otherwise noted*):

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Complete PFT - Spirometry, lung volumes, diffusion (<i>GRY and OMH</i>)</li> <li><input type="checkbox"/> Post Testing Complete PFT - Patient to take inhalers as usual (<i>GRY and OMH</i>)</li> <li><input type="checkbox"/> Spirometry (<i>CHX, GRY, and OMH</i>)</li> <li><input type="checkbox"/> Post Testing Spirometry - Patient to take inhalers as usual (<i>CHX, GRY, and OMH</i>)</li> <li><input type="checkbox"/> Lung Volumes and Diffusion (<i>GRY and OMH</i>)</li> <li><input type="checkbox"/> Spirometry and Diffusion (<i>GRY and OMH</i>)</li> <li><input type="checkbox"/> Airway Mechanics (<i>GRY and OMH</i>)</li> <li><input type="checkbox"/> Spirometry with Methacholine Challenge (<i>16 years and older, delivered only by MMC staff at MMC and KMHC</i>)</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Complete PFT with Methacholine Challenge (<i>16 years and older, delivered only by MMC staff at MMC and KMHC</i>)</li> <li><input type="checkbox"/> Muscle Force Studies, MIP/MEP (<i>MMC and CAD</i>)</li> <li><input type="checkbox"/> Exercise Challenge Study (<i>MMC only</i>)</li> <li><input type="checkbox"/> Hemoglobin draw on day of PFT testing</li> <li><input type="checkbox"/> Pentamidine Treatment 300 mg monthly for _____ months (<i>CHX, MMC, and OMH ONLY</i>)</li> <li><input type="checkbox"/> ABG (<i>CAD, MMC, and CHX</i>)</li> </ul> |
|--|---|

**I verify I have reviewed the patient's current medications and authorize delivery of the medication to be given with the above test ordered.**

\_\_\_\_\_  
PROVIDER NAME (PRINTED)

\_\_\_\_\_  
PROVIDER SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
TIME

[-----]  
 [-----]  
 PATIENT ID LABEL  
 HERE  
 [-----]  
 [-----]

**CONTINUE →**

**PATIENT INSTRUCTIONS FOR PULMONARY FUNCTION TESTING ONLY**

1. Bring this form with you and report 15 minutes prior to testing.
2. Please bring a list of all your medications you are taking, including inhalers.
3. NO SMOKING FOR 12 HOURS PRIOR TO TESTING.
4. No heavy exercise prior to testing.
5. You may eat a light meal prior to testing.
6. Test may take up to one (1) hour to complete.
7. See list and times to hold inhalers or nebulized meds, take all other medications as ordered.
8. If you have been told by a provider that you have had a collapsed lung or fluid removed from your lung in the last two (2) weeks, please call your provider to confirm it is safe to perform a breathing test at this time. If confirmed please report to the pulmonary function lab for testing.

**HOLD THE FOLLOWING MEDICATIONS IF YOU ARE HAVING A PULMONARY FUNCTION TEST:****Hold for six (6) hours prior to test:**

- Albuterol (*Ventolin, Proventil, Proair*)
- Alvesco
- Asthmacort
- Asthmanex
- Atrovent
- Armon Air
- Arnuity
- Combivent/Combivent respimat
- Duo-neb
- Flovent
- Intal
- Maxair
- Pulmicort
- QVar
- Turdorza Pressair
- Xopenex (*Levalbuterol HCL*)

**Hold for 24 hours prior to test:**

- Advair
- Air Duo
- Arcapta
- Arnoro Ellipta
- Arnuity Ellipta
- Bevespi Aerosphere
- Breo Ellipta
- Brovana
- Daliresp
- Dulera
- Foradil
- Incruse Ellipta
- Performomist
- Seebri Neohaler
- Serevent
- Spiriva/Spiriva respimat
- Stiolto respimat
- Striverdi
- Symbicort
- Tudorza
- Utribron
- Wixela

**PATIENT INSTRUCTIONS FOR METHACHOLINE OR EXERCISE CHALLENGE STUDIES (16 years and older)**

1. Methacholine Challenge delivered only by MMC staff at MMC and KMHC
2. No caffeine four (4) hours prior to testing.
3. Notify the Pulmonary Lab if you develop a cold within three (3) weeks prior to your appointment.
4. Methacholine Challenge studies may take up to one and a half (1-1/2) hours to complete.
5. Not done on children under 16 or pregnant women.
6. If you are currently taking prednisone/beta blockers, please call the lab at **231-935-6096** for special instructions (*MMC/KMHC*).
7. Bring or wear comfortable shoes to exercise in if you are scheduled for an Exercise Challenge Study.

**HOLD THE FOLLOWING MEDICATIONS IF YOU ARE HAVING A METHACHOLINE OR EXERCISE CHALLENGE STUDIES:****Hold for six (6) hours prior to test:**

- Albuterol (*Ventolin, Proventil, and Proair*)
- Alvesco
- Asthmanex
- Atrovent
- Armon Air
- Arnuity
- Combivent/Combivent Respimat
- Duo-neb
- Flovent
- Pulmicort
- QVar
- Xopenex

**Hold for 48 hours prior to test (LABA):**

- Advair
- Air Duo
- Arnuity Ellipta
- Breo Ellipta
- Brovana
- Daliresp
- Dulera
- Performomist
- Serevent
- Striverdi
- Symbicort
- Wixela

**Hold for one (1) week prior (LAMA):**

- Anora Ellipta
- Bevespi Aerosphere
- Breztri Aerosphere
- Duaklir Genuair
- Duaklir Pressair
- Incruse Ellipta
- Inspiolto Respimat
- Seebri
- Spiriva Handihaler
- Spiriva Respimat
- Stiolto Respimat
- Trelegly Ellipta
- Tudorza Pressair
- Ultibro Breezhaler

PATIENT ID LABEL  
HERE