

# Spirometry

The following Pathway was developed, implemented, and refined by the American Lung Association in Minnesota. The pathway is intended to give other clinics a starting point for systems-change.

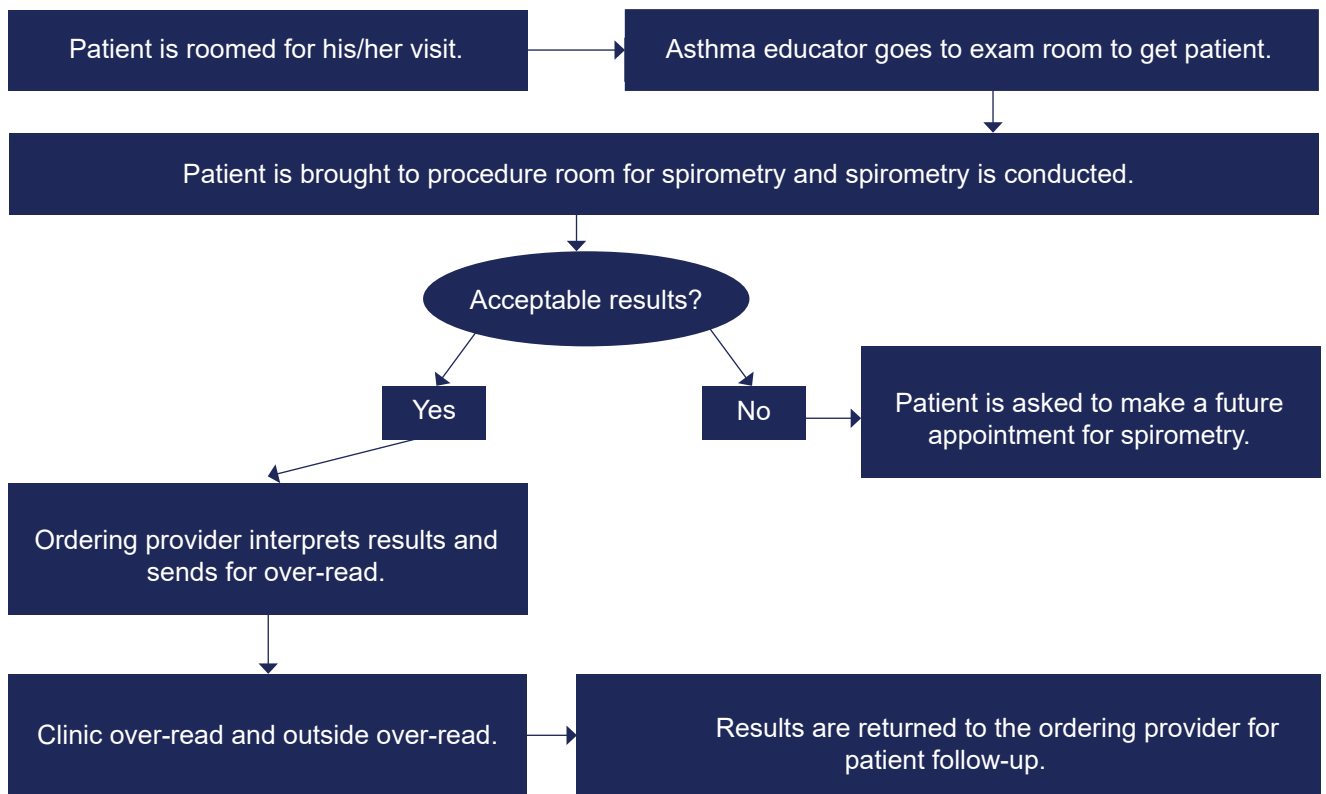
**Goal:** Implement spirometry for diagnosis and management of asthma

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