Provincial PFT Recommendations Project

Developing approaches and information to guide selection of the “right” Pulmonary Function Test (PFT) for the “right” reason for the “right” patient

Supporting family physicians’ awareness, confidence, and consistency in selecting the most prudent lung tests for the most common pulmonary presentations encountered in primary care
Why does this matter?

- Over **600,000** Albertans have a current diagnosis of asthma or Chronic Obstructive Pulmonary Disease (COPD) *(Alberta Health Interactive Health Data Application (2019))*
- An estimated **20-70%** of patients are undiagnosed due to the underuse of post-bronchodilator spirometry*
- In **33%** of Canadian adults seen by a specialist, asthma couldn’t be established objectively despite a recent physician diagnosis*
- Up to **6%** of patients diagnosed with asthma instead had an unrecognized serious cardiorespiratory condition*
  
  *Aaron SD et al. Underdiagnosis and Overdiagnosis of Asthma. 2018*

**Recommendations for common pulmonary presentations**

- **Asthma** – **Spirometry**
- **COPD** – **Spirometry**
- **Chronic (or subacute) Cough** - **Spirometry**
- **Interstitial lung disease** – **Full PFT**
- **Undifferentiated shortness of breath** – **Full PFT**

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Practice Reflections

- Consider ordering of appropriate objective measure of lung function testing before a trial of medication as per recommendations
- Consider accessing Netcare to find lung testing results
- Consider use of the HQCA Panel Report for Asthma; visit request.hqca.ca to sign up online

Interested in learning more? Contact us at: MedicineSCN@albertahealthservices.ca