

Spirometry with bronchodilator test

The purpose of the test

Spirometry is a pulmonary function test used to measure lung volumes, ventilation capacity, and the effect of bronchodilator medicines on lung function. The test can help to identify the cause of respiratory symptoms, diagnose respiratory diseases, and evaluate the effectiveness of lung medication.

Conducting the test

The test takes about an hour. During the test you will breathe through the spirometer mouthpiece according to the nurse's instructions. The test is painless, but to achieve reliable results you need to blow out with the right technique for several times, as long and hard as you can. During the test you will inhale a bronchodilator medicine to help open your airways.

Preparation for the test

- 24 hours without alcohol
- 4 hours without coffee, tea, energy drinks, cola, or other stimulants
- 4 hours without a heavy meal (but not fasting)
- 2 hours without smoking
- 2 hours without intense physical activity

Please note that respiratory infections are a contraindication to the test. It is necessary to wait at least for two weeks after recovery from a respiratory illness, such as flu, before the test can be done. If you become ill or need to reschedule your appointment, please contact the customer service line at (03) 5656 4600 (Mon-Fri 7.30am-5pm, Sat 10am-5pm, Sun 10am-4pm).

Medication before the test

The referring physician will give you instructions regarding the use or discontinuation of lung medication before the test, according to the purpose of the examination:

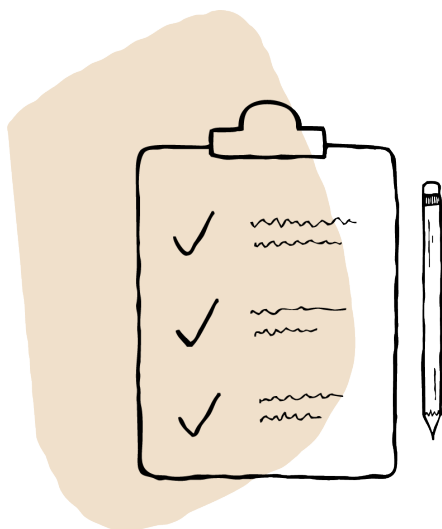
Diagnostic Spirometry

Medications that effect the lungs should be discontinued before the spirometry according to separate instructions (reverse side). Discontinue the following medications:

Other than lung medications should be taken normally. If you are unsure about medication instructions or unable to discontinue medication, please contact customer service!

Control Spirometry

Regular lung medication should be taken normally, also on the day of the test.



Before the diagnostic spirometry you should avoid the following medications (trade names):

Sympathomimetics

- for 12 hours: Airomir, Adrenalin, Epipen, Rasepinephrine, Bricanyl, Buventol, Ventoline, Ventolin (inject)
- for 2 days: Cycloterol, Fomeda, Foradil, Formaxa, Formoterol, Oxis, Serevent
- for 3 days: Onbrez, Striverdi

Anticholinergics

- for 24 hours: Atrovent
- for 3 days: Eklira, Incruse, Spiriva
- for 7 days: Seebri

Anticholinergic+Sympathomimetic

- for 24 hours: Atrodual, Atrovent comp, Ipratropium/Salbutamol
- for 3 days: Duaklir, Anoro, Inspiolto
- for 7 days: Ultibro, Bevespi

Leukotriene antagonists

- for 4 days: Astecon, Montelukast, Singulair, Zafirlukast

Theophyllines, xanthine derivatives

- for 3 days: Amonicont, Retafyllin, Theofol and Theofol comp, Theospirex inj

Cromones

- for 1 day: Intal, Tilade

Corticosteroids

- for 4 weeks (if the purpose is to test a situation where there is likely no steroid effect): Aerobec, Alvesco, Asmanex, Beclomet, Budesonide, Budiair aerosol, Flixotide, Fluticasone, Novopulmon, Pulmicort
- Hydrocortisone, Medrol, Prednisolone, Prednisone, Solomet (only to be paused if used for the treatment of asthma or COPD)

Corticosteroid + Long-acting sympathomimetic

- If only the sympathomimetic effect needs to be ruled out, the pause is for 2 days or 3 days.
- If the steroid effect needs to be ruled out as well, the pause is for 4 weeks: Bufomix, Flutiform, Innovair, Salflumix, Salmeson, Salmex, Salmeterol/Fluticasone, Seretide, Symbicort (2 days or 4 weeks), Atectura, Relvar (3 days or 4 weeks)

Corticosteroid+Anticholinergic+Sympathomimetic

- If the anticholinergic or sympathomimetic effect needs to be ruled out, the pause is for 3 or 7 days.
- If the steroid effect needs to be ruled out as well, the pause is for 4 weeks. Trelegy (3 days or 4 weeks), Trimbow, Enerzair (7 days or 4 weeks)

Other anti-inflammatory medications

- for 5 days: Daxas
- for 3 days: Cough medicine
- for 12 hours: Ephedrine