

# Endobronchial Valve Patient Assessment Referral Guidance

mMRC DYSPNOEA SCALE:	Clinical Assessment:
<p><b>0</b> I only get breathless with strenuous exercise.</p> <p><b>1</b> I get short of breath when hurrying on level ground or walking up a slight hill.</p> <p><b>2</b> On level ground, I walk slower than people of the same age because of breathlessness, or I have to stop for breath when walking at my own pace on level ground.</p> <p><b>3</b> I stop for breath after walking about 100m or after a few minutes on level ground.</p> <p><b>4</b> I am too breathless to leave the house, or I am breathless when dressing or undressing.</p>	<p><b>Most recent FEV<sub>1</sub>:</b> <b>FEV<sub>1</sub>/FVC Ratio:</b></p> <p>Smoking Status:  <input type="checkbox"/> Never  <input type="checkbox"/> Current ___ pack/s per ___ day  <input type="checkbox"/> Previous ___ pack/s per ___ day</p> <p style="text-align: right;">Y    N</p> <p>Do you cough up phlegm/mucous daily?    <input type="radio"/>    <input type="radio"/></p> <p>Are you on regular puffers/medications to help manage your symptoms?    <input type="radio"/>    <input type="radio"/></p> <p>Have you had 3 or more respiratory Infections in the last year?    <input type="radio"/>    <input type="radio"/></p>

Refer patient for further assessment if:	How to refer:
<ul style="list-style-type: none"> <li>FEV<sub>1</sub> ≤59%</li> <li>Suspected advanced emphysema</li> <li>Shortness of breath on minimal exertion (e.g. mMRC ≥ 2)</li> </ul> <p style="text-align: center; margin-top: 20px;"><b>despite optimal medical management</b></p>	<p>Standard named referral letter to desired physician unless otherwise stated.*</p> <p><b>Include reason for referral: Assessment of suitability for advanced treatment options i.e., endobronchial valve/bronchoscopic lung volume reduction.</b></p> <p>Attach patient history including relevant clinical details i.e., suspected severe emphysema, spirometry results (i.e., FEV<sub>1</sub> ≤59%), symptoms (i.e., SOB on minimal exertion mMRC ≥ 2), smoking history, exacerbation history, current medication].</p>