**GSTT Advanced Emphysema Referral Proforma**

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| **Inclusion Criteria**Symptomatic emphysema despite optimal medical management (MRC 3 or more)FEV1 <50% RV >175% (measured by body box plethysmography)Non-smoker for >3 months (or willing to quit)6-minute walk distance of at least 140mReferred / completed Pulmonary rehabilitation within last 24 months**Gold Recommendations (2017), NICE Guidance 115 (2019),** **NHS Clinical Commissioning Policy: Lung Volume Reduction (2020)** | **Exclusion Criteria**Current smoker (must have stopped >3 months)Severe bronchiectasisSignificant co-morbidities (e.g. malignancy, cardiac failure) |

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| Name: | NHS Number: |
| Date Of Birth: | Referring Centre / Consultant: |
| Address:  | GP:  |
| Current Medication: | Co-morbidities: |
| Smoking status:  | Pack year history: |
| Pulmonary rehabilitation course location:  | Date of completion: |

**Lung Function Results (within the last 2 years) Date:**

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| FEV1 (L): | FEV1 % predicted:  |
| FVC (L): | FVC % predicted: |
| DLCO % predicted: | KCO % predicted:  |
| Lung volumes by: Helium dilution or Body box:(please select) |  |
| TLC (L): | TLC % predicted: |
| RV (L): | RV % predicted: |
| 6MWT distance: (if completed)  | % predicted 6MWT distance: |

**HRCT Thorax (<1.5mm slices) within last 12 months**

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| Location where CT imaging performed:  | Date: |

**Echocardiogram (useful, but not essential) Date:**

Please insert or attach report: