

Lung function testing

COVID-19 advice



Lung function testing (including spirometry, peak flow and other breathing tests) generates aerosolised droplets, and may increase the risk of transmission of respiratory viruses to healthcare workers.

Please make sure that lung function testing is needed at this time for your patient. Remember that asymptomatic patients may be infected with acute respiratory viral illnesses (including COVID-19). Prior to lung function testing, patients should be asked screening questions to assess their risk of having COVID-19, including any new acute respiratory symptoms such as fever, cough, runny nose, sore throat, and loss of sense of smell. Lung function testing should not be performed in patients who have new acute respiratory viral symptoms.

Local sites should also consider [local COVID-19 prevalence data](#) when making decisions about screening questions and the recommencement of lung function testing services.

Remember

- Lung function testing is an important objective clinical diagnostic tool.
- During the COVID-19 pandemic, testing should only be performed where indicated.
- Lung function testing should be performed using contact and droplet precautions.
- All testing needs to be performed using a bacterial/viral filter.
- During the COVID-19 pandemic, when lung function testing is required outside of the laboratory setting, it should be performed in a negative pressure or single room. If this is not possible and testing needs to occur in the inpatient ward environment, please ensure curtains are drawn around the bed area to reduce the likelihood of any aerosolised droplet dispersion.
- During testing where possible, staff should be positioned ≥ 1.5 metres away and out of the 'blast zone' or line of cough.
- During the COVID-19 pandemic, lung function tests using aerosol generating protocols should be performed only when necessary and with caution. If bronchial challenge tests are required, please refer to the [High Risk Respiratory Therapies- Nebulisers](#) advice document. Asthma can be assessed with spirometry, including bronchodilator reversibility.

Document information	
Version number	4
Original publication date	4 May 2020
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Review date	Reviewed without changes 21 December 2020
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For use by	All NSW Health clinical staff administering lung function testing during the COVID-19 pandemic



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