

# West Herts Commissioning Pathway COPD

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**Metric**  
1.6 suspect COPD if: over 35, smokers/ ex smokers, no variation of symptoms and signs in time

**1.7 Red Flags**  
acute or severe shortness of breath,

**2.0 Primary Assessment**  
Documentation of symptoms (see 1.1), Past medical history (Asthma, Bronchiectasis, CCF, Lung Cancer), Family History (e.g. Emphysema)  
Examination - Hyperinflated chest, use of accessory muscles, wheeze or quiet breath sounds, peripheral oedema, raised JVP, cyanosis, weight loss/ cachexia, muscle wasting, pulmonary hypertension &

**Metric**  
2.6 Referral criteria  
Exacerbation AND (not responding 24-48 hours) or (1 predictor of poor outcome)  
Subacute instability

**2.7 Red Flags**

**3.0 COPD Com**  
Clarification and assessment his needed  
Dyspnoea and

**1.1 Symptom Description**  
Breathlessness on exertion; chronic cough; regular sputum production; frequent episodes of "bronchitis" or "chest infection"; wheeze

**1.2 Incidence & Prevalence**

**1.3 Self Assessment & Self Care**

**1.4 Primary Prevention**

**2.1 Dx thresholds & decision aids**

**2.2 Diagnostics (Dx)**

- 2.2.1 Anxiety and depression screening tool**
- 2.2.2 Chest X-ray** to exclude other pathology
- 2.2.3 FBC** anaemia or polycythaemia
- 2.2.4 Spirometry** demonstration of airflow obstruction. FEV1/FVC cp. expected

**2.3 Treatment thresholds & decision aids**  
assess severity

**3.2 Diagnostics (D**

- 3.2.1 Oxygen assessment**
- 3.2.2 Imaging**  
CXR  
CT Scan  
Echocardiogram

**2.4 Treatments (Tx)**

- 2.4.1 Reassurance, information, self help**  
management plan
- 2.4.2 Vaccination**  
Pneumococcal - once  
Influenza - annual
- 2.4.3 Physical, psych. therapy**  
Dietary advice (BMI >25 or <20)  
Exercise advice and support  
Pulmonary
- 2.4.4 Medication**  
Beta agonists,  
Anticholinergics  
Long Acting Beta Agonists,  
Inhaled Steroids
- 2.4.6 Smoking Cessation**  
Advise, Refer, Prescribe

**3.4 Definitive Treatments**

- 3.4.1 Education and Empowerment** for patient and carer
- 3.4.2 Active monitoring management plans**

**2.5 Rehabilitation & Review**

**3.5 Rehabilitation, Review & C**



5.0