



Please complete this form, sign it, include patient facesheet, and fax to: 808-983-6730

Patient's Name: _____ DOB: ____/____/____
Last First M.I.

Cell Phone #: _____ Weight: _____ kg Height: _____ m Hemoglobin _____
(if already obtained within last month)

Patient's current medications: _____

Ordering Physician: _____ Physician Office #: _____ Office Fax #: _____
Please Print

Physician Signature: _____ Date: ____/____/____
Required

Diagnosis/ICD-10: _____ Reason for Test: _____

Diagnostic Procedures: Please check all that apply. Ordering MD's office responsible for obtaining auths for selected CPT codes.

_____ Spirometry _____ Spirometry Pre- & Post- Bronchodilator*
_____ Spirometry/TLC/DLCO _____ Spirometry Pre- & Post- Bronchodilator/TLC/DLCO*

***If ordering Post- Bronchodilator testing or Simple Exercise Stress Test, must check this order:**
_____ Albuterol (2.5 mg/3ml) 0.083% - 2.5 mg inhaled once via small volume nebulizer; OR
_____ Levalbuterol (1-25/3ml) inhaled via small volume nebulizer (*must obtain PF Lab Medical Director approval for Levalbuterol use*).

_____ Simple Exercise Stress Test (EIB Protocol w/ PFT)*
_____ Simple Cardiac Stress Test (Cardiology Protocol w/o PFT) If Cardiology ordering ECHO, check here: __
_____ Cardiopulmonary/MVO2 Stress Test w/ PFT

_____ 6 Minute Walk Test (6MWT) _____ MIP
_____ High Altitude Simulation Test (HAST) _____ MEP

_____ Tracheostomy Manometry Study w/ SLP speaking valve assessment

_____ Manual Chest Physiotherapy Teaching

Instructions after the test:

Patient may leave _____ Send to my office _____ Fax preliminary results (no interpretation) _____

Special instructions / Comments _____

CPT Codes for Pulmonary Function Testing

Please obtain authorization for all of the codes listed for the testing you ordered

PFT	CPT code(s)	Description
Pulse oximetry (single)	94760	
Pulse oximetry (continuous/exercise)	94761	
SpHb Hemoglobin (single)	88738	Must be ordered with 94729 unless pt has serum hemoglobin resulted in last month before PFT
Aerosol education (MDI/spacer)	94664	
Aerosol treatment (incl. education)	94640	
Spirometry	94010, 94760	
Spirometry pre-/post- bronchodilator	94060, 94760, 94640	
Total Lung Capacity/TLC (aka "body box", "plethysmography")	94726	
Nitrogen washout (TLC via gas dilution)	94727	Do not order unless patient is unable to perform: 94726
Airway resistance ("impulse oscillometry")	94728	Do not order unless patient is unable to perform: 94010, 94060, 94726
Diffusion capacity (DLCO)	94729	Must be ordered with one of the following: 94010, 94060, 94726
Spirometry/TLC/DLCO	94010, 94726, 94729, 94760, 88738	
Spirometry pre-/post- bronchodilator/TLC/DLCO	94060, 94726, 94729, 94760, 88738	
Simple exercise stress test (EIB protocol)	94617, 94761	Proctored by Pulmonologist
Simple cardiac stress test (cardiology protocol)	93015, 94761	Must have Cardiology approval to order
Cardiopulmonary Stress Testing/MVO2	94621, 94761	Proctored by Cardiologist
6 Minute Walk Test (6MWT)	94618, 94761	
High Altitude Simulation Test (HAST)	94452	
HAST with O2 titration	94453	
HAST	94452, 94453	
Tracheostomy Manometry Study	94761	Order for continuous pulse oximetry
Manual chest physiotherapy	94664	If pt uses MDI/spacer, order for education
MIP/MEP	94200, 94799	
CO2 breathing response curve	94400	
Hypoxia response curve	94450	
Gas challenges	94400, 94450	Order for concerns of CCHS