

CHRONIC UNEXPLAINED BREATHLESSNESS DIAGNOSTIC PATHWAY

PRE-PATHWAY ASSESSMENT

1. Ensure no pathway contraindications (within last 4 weeks):
- Recent heart attack
 - Chest infection
 - Brain, eye or thoracic surgery
 - Known aneurysm >5.5cm
2. Perform following assessments at GP appointment:
- Past medical history including:
 - Family history of cardiac/respiratory disease (parents and siblings)
 - Allergies, Signs & Symptoms
 - Smoking History (Pack year)
 - Occupation and Exposure
 - Clinical exam including
 - Auscultation of heart and lungs
 - Blood pressure, SpO2
3. Request following investigations:
- FBC, U+E, LFT, CRP, TSH
 - proBNP
 - Chest X-ray (within period of breathlessness)
 - ECG

Presentation:

- Breathlessness for > 8 weeks
- Consider RED FLAGS

GP to:

- Consider **Anxiety, depression, deconditioning** and **raised BMI** as contributing factors.
- Perform pre-pathway assessment**

CONFIRM

- No contraindications**
- Completed** medical history, assessment and investigations
- Submit referral via **eRS** (proforma or correspondence)

CONSIDER RED FLAGS

Respiratory

- Haemoptysis, suggestion of Cancer
- Confusion, unable to speak in sentence and/or stridor.
- Unexplained reduction in SpO2 <90%
- Disproportionate respiratory rate.
- Rapidly progressing breathlessness and reduction in functional capacity (within 4 weeks):
- Rapidly Progressing Muscle weakness/Dysphagia

Cardiac

- Persistent chest pain.
- BNP >2000 ng/L
- Significant ECG abnormalities (e.g. High degree AV block).
- Loss of Consciousness or blackout

ENTRY ON TO THE PATHWAY

ENTRY ON TO THE PATHWAY

Clinical Scientists to review and triage patients for appropriate diagnostic tests.

GPAQ and mMRC issued to the patient upon acceptance.

Multiple pathway may be utilised depending on indications.

RESPIRATORY PATHWAY

IF 1 or more are true:

- Eosinophilia and/or raised CRP
- Familial history
- Significant pack year history (>12)
- Abnormal CXR
- Occupational Exposure

Spirometry, FENO, Gas Transfer

Abnormal Results

PERFORM

- Lung Volumes** (If Restrictive, Mod/Severe AFO)
- Reversibility** (raised FENO, family history, AFO <-1.04 SR, atopy)

Results categorised as **Mild** (with MRC >2), **Moderate**, **Severe**

- No evidence of:
- AFO/Restriction
 - Gas transfer impairment
 - FeNO <45ppb
 - MRC <=2

Normal Respiratory Results

HEART FAILURE PATHWAY

IF proBNP >400 ng/L

proBNP 400 - 2000 ng/L
Routine

proBNP >2000 ng/L
URGENT (2WW)

Echocardiogram Performed

Ejection Fraction >46%

Ejection Fraction <45%

Referral to Heart failure nurses.
GP Notified

Diagnosis Manageable by Primary Care

Notify GP of Results

HOLTER PATHWAY

IF 1 or more are true:

- Abnormal ECG (e.g. Sinus tachycardia, first degree heart block, RBBB and AF)
- Familial history of sudden cardiac death
- Frequent Palpitations

Dependant on presentation 24hr, 48hr tapes or 1 to 2 week monitoring

Normal Results

Significant Arrythmia or Ectopic Burden >10%

Normal ECG Results

SECONDARY CARE

Working Diagnosis to specialist for input.

Specialist input required

Comms between Specialist & GP

Referral Requirements

Diagnostic Investigations

Review and Outcome