Osler Standard Order Set

**Chronic Obstructive Pulmonary Disease (COPD)**

**Urgent Outpatient Clinic Order Set**

- COPD educator and/or Respirologist to assess and advise on the following:
  - Comprehensive self-management plan
  - Written action plan
  - Medication review and puffer technique assessment
  - Review for pneumococcal vaccine
  - Review for seasonal influenza vaccine
  - Body mass index: If BMI less than 20 or greater than 25, provide contact information for dietitian
  - Smoking cessation counselling (provide patient self referral phone number: 1-877-513-5333)
  - Advanced Care Planning
  - Provide patient with educational materials

**Outpatient Follow Up**

***Respirologist to send referral where required***

- Book follow-up appointment with Family Physician, Dr. _______________ in ________ weeks
- Book follow-up appointment with patient’s Respirologist, Dr. _______________ in ________ weeks
- OR
- Refer to Respirologist, Dr. _______________, for ongoing management of COPD: fax referral

- Other: Refer to Dr. ___________________________: fax referral
- Pulmonary Function Testing: e-referral and patient will be notified
- Pulmonary Rehabilitation to begin within 1 month of hospital discharge
- PMC: e-referral and patient will be notified
- EGH: e-referral and patient will be notified
- West Park Outpatient Pulmonary Rehabilitation Program. Fax referral to 416-243-3900

- PMC Chronic Disease Management Clinic

**Additional Orders:**

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Prescriber Signature and Mnemonic

Date/Time

Transcribed By

Date/Time

Checked By

Date/Time