

Common Investigations in Severe Asthma Clinic

Investigation	Helps in:					Remarks
	Diagnosis	Monitoring	Phenotyping	Evaluating for treatment response/remission	Differential Diagnoses	
Spirometry	√	√		√		
Bronchoprovocation Test (e.g. Methacholine)	√					
Impulse oscillometry	√	√				
Fractional exhaled nitric oxide (FeNO)		√	√	√		
Smokerlyser	√				√	
Full Blood Count		√	√	√		
Total IgE			√			
Aspergillus Ab					√	For patients with suspected Allergic Bronchopulmonary Aspergillosis (ABPA)
Radioallergosorbent test (RAST) or skin prick test			√			
Anti-MPO, Anti-PR3					√	For patients with suspected Eosinophilic Granulomatosis with Polyangiitis (EGPA)
Induced sputum for cell count			√			
Chest X-Ray					√	
CT Thorax					√	
Bronchoscopy					√	Suspected vocal cord dysfunction (VCD), other causes of wheeze (e.g. airway obstruction) and bronchoalveolar lavage (BAL) for cell count (Eosinophilic pneumonia, EGPA etc.)