



# **Exercise Induced Bronchoconstriction (EIB)**

#### What is Exercise Induced Bronchoconstriction testing?

Exercise induced bronchoconstriction or EIB, is a combined breathing and exercise test. The test can help identify what type of breathing trouble you have, if any, when you exercise. A spirometry breathing test is done before and after you exercise on a treadmill. Spirometry can show how much air you can breathe in and out. It also shows how fast you can breathe in and out. The spirometry results are compared before and after you exercise to see what changes there are in your breathing.

A laryngoscopy may be scheduled after the EIB test. A laryngoscopy is often done to identify if your vocal cords may be causing you to have trouble breathing with exercise.

## How do you get ready for the test?

Please follow these directions when getting ready for this test. These medicines will affect the results of some of these tests and need to be stopped before the testing is done. If the medicine is not stopped before the test we will not be able to complete the test.

✓ Stop this **inhaled** medicines for **7 days** before your appointment:

Spiriva® (tiotropium)

✓ Stop these **inhaled** medicines for **48 hours** before your appointment:

Advair® (Serevent® and Flovent®)

Serevent® (Salmeterol)

Symbicort® (Pulmicort® and Foradil®)

Foradil® (Formoterol)

Perforomist<sup>™</sup> (Formoterol)

Brovana™ (arformoterol)

Intal® (Cromolyn), Tilade® (Nedocromil)

✓ Stop these **inhaled** medicines for **24 hours** before your appointment:

Atrovent® (Ipratropium),

Combivent® (Albuterol and Ipatropium)

DuoNeb® (Albuterol and Ipatropium)

✓ Stop these **oral** medicines for **24 hours** before your appointment:

Accolate® (zafirlukast)

Zyflo® (zileuton)

Singular® (montelukast)

✓ Stop these **oral** medicines for **24 hours** before your appointment:

Volmax®, Ventolin®, Proventil®, Proventil Repetabs® (Albuterol), Metaprel® (Metaproterenol), Bricanyl®, Bethaine® (Terbutaline)

✓ Stop these **inhaled** medicines for **6-8 hours** before your appointment:

Proventil HFA®, Ventolin HFA®, ProAir® (Albuterol), Xopenex® (Levalbuterol), Maxair® (Pirbuterol), Alupent®, Metaprel® (Metaproterenol), Primatene® Mist.

- ✓ Continue to take all your other medicine as you usually do.
- ✓ Adults If a laryngoscopy is scheduled at the same time, do not eat for 2 hours before the test is scheduled.
- ✓ Children If a laryngoscopy is scheduled at the same time, do not eat for 3 hours before the test is scheduled.

#### What is done during the test?

You will do a number of breathing tests before and after you exercise. The technician will explain what you need to do during the breathing and exercise test. Before the testing begins EKG electrodes will be placed on your chest to monitor your heart. A pulse oximeter will be placed on your earlobe or fingertip to monitor your oxygen.

Once ready, you will do the breathing tests, usually spirometry. After doing the breathing tests you will exercise on a treadmill. A physician or physician's assistant will be present during the exercise test. This test may be ordered inhaling cold air while exercising. If this is the case, you will breathe on a mouthpiece while exercising. After the exercise is finished, you will do the breathing tests again.

If your doctor has scheduled you for a laryngoscopy this will be done right after you exercise. During the laryngoscopy a doctor will place a small tube (fiberoptic probe) in your nose. The tube is passed through your nose to the back of your throat. The movement of the vocal cords can be seen with the probe. **Please do not eat 2 - 3 hours prior to the test if a laryngoscopy has been scheduled.** 

### How long will the test take?

The exercise testing time often takes 1½ hour. Actual exercise time does not take 1½ hours. The rest of the test period is to prepare you for the test and observe you after the test.

#### How do you get to your test?

On the day of your scheduled test, report to room A310a in the Pulmonary Physiology Unit, (PPU), located on the 3<sup>rd</sup> floor of the May building. If you have questions please call the Pulmonary Physiology Unit at 303-398-1530.

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