Symptoms were identified that are deemed to be consistent with asthma

*Preferred option: High level of accuracy*

*Alternative options: Less accurate*

or

Spirometry before and after an inhaled, rapid-acting bronchodilator

Peak flow monitoring or a trial of therapy

*FVC, FEV1 and the FEV1/FVC ratio*

Spirometry results

**Consistent with asthma**

* Administer a short-acting β2 agonist, as needed, to relieve symptoms
* Start anti-inflammatory therapy, e.g. a low-dose inhaled corticosteroid
* Look for triggers by history and occupational exposure, and consider allergy testing
* Consider any relevant co-morbid conditions

**Normal**

* Consider an alternative diagnosis, and/or
* Peak flow monitoring, and/or
* Bronchial hyper-responsiveness testing
* The introduction of treatment (only for patients with a high likelihood of asthma. Diagnosis should be confirmed at a later stage)

Re-evaluate the diagnosis, control and treatment at a follow-up visit

**Figure 1:** A diagnostic algorithm for asthma12