

Section 7: Pulmonary Function Test

All Pulmonary Function Tests (PFT) must be accompanied by a statement from an Internist, Pulmonologist or Occupational Medicine Physician stating that at the time of the test, the asbestos-related disease alleged on this claim is the probable explanation for the test result.

Please complete one copy of Section 7 for each PFT that supports the alleged diagnoses. Copies of the electronic form for just Section 7 can be found on the Trust website at www.WAStrust.com/Section7.pdf.

Copies of the supporting documentation must be attached to this claim with the relevant information bookmarked.



1. Physician Name:

2. This physician is board certified in (check all that apply):

Internal Medicine

Pulmonology

Occupational Medicine

3. Date of PFT report:

4. Results:

4a. FVC:

4b. FVC:

4c. FEV-1:

4d. FEV-1:

4e. FEV-1/FVC:

4f. TLC:

4g. TLC:

4h. DLCO:

4i. DLCO:

4j. VO MAX: