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Title: Impact of two spirometry training programs on test quality in Dutch general practices

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Body: Background - We studied the impact of two spirometry training programs on the quality of spirometry tests in Dutch general practices. Methods - The investigated training programs were CAHAG's "CASPIR duo course" for GPs and practice nurses, and the spirometry training for practice nurses and assistants as developed by "Cohesie general practice care group". We took random samples from practices' spirometry databases before and after training. Two experienced pulmonary function technicians (PFTs) reviewed all tests. Primary outcome was the proportion of tests complying with ERS/ATS quality criteria ('adequate tests'). We considered $\geq 60\%$ adequate tests (previously observed in a GP laboratory) as the desired performance level for each practice. Multivariate multilevel logistic regression analysis was used to calculate odds ratios (ORs) for pre-/post-training differences in outcomes. Results - 29 practices (15 CASPIR, 14 Cohesie) participated, 1065 spirometry tests were reviewed. For CASPIR the pre-training % adequate tests was 39.1%, post-training 51.0% (OR=1.60; 95%CI 1.12, 2.30). Before CASPIR training 2 practices (13.3%) reached the desired performance level, after training 7 (46.7%). For the Cohesion program pre- and post-training rates were 45.3% versus 44.1% (OR=0.93; 95%CI 0.65, 1.33) for the primary outcome. At pre-training 4 Cohesion practices (28.6%) reached the performance level, post-training 1 practice (7.1%). Conclusions - Overall, structured spirometry training seems to have a positive impact on general practices' spirometry quality, but does not necessarily lead to the desired performance level in every practice.