Patients with non-specific respiratory symptoms, who cannot be diagnosed with traditional tools

**Routine Assessments**
- Symptom reports
- Lung function measurements
- Patient reports

**Introduce FeNO assessment**

- **Low FeNO levels**
  - Adults: <25ppb
  - Children: <20ppb
  - Unlikely to have asthma
  - Unlikely to have ICS-responsive inflammation
  - Consider other diagnoses
  - If no symptom improvement after ICS trial, consider:
    - Other diagnoses
    - Specialist referral

- **Intermediate FeNO levels**
  - Adults: 25–50ppb
  - Children: 20–35ppb
  - Use clinical judgement
  - Consider 1-month trial of ICS
  - Consider other diagnoses
  - If no clinical improvement after ICS trial:
    - Optimise therapy: evaluate inhaler technique, adherence and minimise triggers
    - Consider other diagnoses
    - Consider specialist referral

- **High FeNO levels**
  - Adults: >50ppb
  - Children: >35ppb
  - High likelihood of asthma
  - High likelihood of ICS-responsive inflammation
  - Initiate ICS treatment

Follow-up per routine (see Figure 2: “On-going management of established asthma”)