

# THE HEART GROUP

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## Stress Echocardiogram Stress Test

Name: \_\_\_\_\_ Date of Test: \_\_\_\_\_ Time of Test: \_\_\_\_\_

### PLEASE READ THIS INFORMATION CAREFULLY

This sheet explains the diagnostic test that your physician has prescribed for you.

**DESCRIPTION:** You will be exercising on a treadmill after having an ultrasound of your heart completed. When you have completed your walk on the treadmill we will ask you to quickly lie on your left side so we can complete the ultrasound on your heart when your heart is pumping the strongest.

**PURPOSE:** This study is performed to detect coronary artery disease, damage from prior heart attacks and to determine the result of stents, bypass, balloon and rotator procedures.

**PREPARATION:** No food 2 hours PRIOR to your test. You may take your morning medications with a small amount of water or juice, unless instructed otherwise by your physician. If you are diabetic and use insulin, please take 1/2 of your regular insulin dose with fruit juice and toast at least 2 hours PRIOR to your appointment. **NO CAFFEINE PRIOR TO YOUR TEST** (this includes decaffeinated coffee, tea, soda and hot chocolate). Please wear comfortable shoes or sneakers. No nicotine 12 hours prior.

### PROCEDURE:

1. When you arrive for your study you will be asked to read and sign a consent form for the study to be performed.
2. You will have ECG patches placed on your chest that will be used to record ECGs before, during and after exercise to monitor your heart rate and rhythm.
3. The stress technologist will obtain your medical history and current medications. Please bring a list of your current medications with you.
4. You will exercise on a treadmill until you experience fatigue. The treadmill increases in speed and elevation every three minutes to increase your workload. The total length of your exercise will vary to your exercise tolerance. After you exercise you will be monitored until your heart rate and blood pressure return to normal.

If you are pregnant or currently nursing, please inform your doctor or technologist before this study is performed.

The total time for the procedure will be 1 hour.

**PLEASE NOTE: If you are unable to keep your appointment, a 24-hour notice will be required. To cancel your appointment please call 481-7384 between 7:00 am and 4:00 pm or 397-5484 between 8:00 am and 5:30 pm.**