



CARDIAC DIAGNOSTIC SERVICES REQUISTION

NOTE: Tests are by appointment only. PLEASE FAX TO CLINIC AT 354-4937 PHONE 354-3301 (EXT 258)

Patient's Last Name: _____ First Name: _____

Health Card #: _____

D.O.B. _____ Gender: Male Female

Address: _____

Telephone #: _____ Alternate #: _____

Emergency Contact Person: _____ Contact #: _____

DIAGNOSTIC TESTS - PLEASE CHECK THE TEST REQUESTED AND LENGTH OF ASSESSMENT (if applicable)

HOLTHER MONITOR 24 hours 48 hours

EVENT RECORDER

AMBULATORY BP MONITORING A fee of \$25 is payable at the Information Desk prior to the test.

EXERCISE ECG STRESS TEST Previous ECG attached. Patient given Info Sheet (see reverse).

ECHOCARDIOGRAM Next Available
 Semi-Urgent (within 1 week)
 Urgent (Page Internist on duty)

Patient given Info Sheet (see reverse)

GLUCOSE VALUES (Hypoglycemia) _____

INR Values _____

INDICATION FOR TEST:

PERTINENT HISTORY:

CURRENT MEDICATIONS: For stress testing, please indicate ALL medications (Consider holding B blockers, nitrates, calcium channel blockers for 48 hours before EST". We will also review these instructions with the patient prior to and after the test.

Date of Referral: _____ Physician Phone #: _____

Physician Signature: _____ Print Name: _____

COMPLETED BY HOSPITAL TECHNICIAN		START TIME:
1. Date of Holter Recorder SIN _____	3. Date of Holter Recorder SIN _____	5. Date of Holter Recorder SIN _____
2. Date of Holter Recorder SIN _____	4. Date of Holter Recorder SIN _____	6. Date of Holter Recorder SIN _____



RE: EXERCISE TREADMILL ECG STRESS TESTING GUIDELINES

Usual indications: *

- To diagnose suspected CAD
 - To assess the adequacy of CAD therapy
 - To assess prognosis following a cardiac event or procedure
 - To evaluate patients with known or suspected arrhythmias
- * NB: For Cardiac Rehab referrals, please use the designated form.**

Some contraindications: (not a complete list)

- Recent MI (<2 days), unstable angina, left main coronary disease (if known).
- Uncompensated CHF.
- Severe aortic stenosis, other outflow tract obstruction, mitral stenosis.
- Uncontrolled arrhythmia, WPW.
- Miscellaneous: LBBB, pericarditis, PE, severe anemia, hyperthyroidism, etc.

Recommended timing of stress testing after a cardiac event or procedure:

Procedure	Time Criteria (minimum)
Successful angioplasty/stenting, ablation, pacemaker/ICD implantation, cardioversion, etc.	>2 weeks after
Acute coronary syndrome treated medically	>4 weeks after
CABG, other sternotomy	>6 weeks after

Please give instructions to patient:

- Bring comfortable clean walking shoes or sneakers for the treadmill.
- Eat a light breakfast or lunch (depending on the time of your appointment).
- For persons with diabetes, you should eat your usual diet. Bring your glucometer with you for testing as needed before and after your stress test.
- Bring all your medications with you, including any inhalers or nitroglycerin spray.
- For diagnosis of suspected CAD, consider stopping beta-blockers, diltiazem, and/or verapamil 48 hours before stress test (if deemed safe by the referring physician). Indicate this under "current medications" on the requisition form.
- Also avoid nitrates on the day of stress testing (e.g. nitroglycerin patch, isosorbide dinitrate, etc.), and indicate this under "current medications" on the requisition form.

RE: ECHOCARDIOGRAM GUIDELINES

Usual indications: *

- Heart Murmur
- Native Valvular Stenosis
- Known or suspected mitral valve prolapsed
- Congenital or inherited Cardiac Structural Disease (including Bicuspid Aortic Valve, Marfan's Syndrome, Atrial Septal Defect, Ventricular Septal Defect, Ehler's Danlos Syndrome)
- Prosthetic Heart Valves
- Infectious Endocarditis
- Pericardial Disease
- Cardiac Masses
- Interventional Procedures
- Pulmonary Disease
- Chest Pain and Coronary Artery Disease
- Dyspnea, Edema and Cardiomyopathy
- Hypertension
- Thoracic Aortic disease
- Neurologic or other possible Embolic Events
- Arrhythmias, Syncope or Palpitations
- Before Cardioversion
- Suspected Structural Heart Disease.

Please give Instructions to patients:

- An echocardiogram is a safe and painless diagnostic procedure that uses high frequency sound waves to take moving pictures of the heart. Many measurements are taken during the test to determine how well your heart is working.
- No special preparations are required. Patients may eat and perform normal activities (unless otherwise instructed), and continue to take medications as prescribed by their physician.
- The test takes approximately 45 minutes to complete. A specially trained sonographer will perform the test.
- Patients should arrive 15 minutes before the appointment time.
- Ultrasound cannot be felt and does not hurt. If patients experience discomfort, they should notify the sonographer performing the test. There are no known harmful effects from diagnostic cardiac ultrasound.
- Patients will be weighed and blood pressure will be taken at the beginning of the test.
- Patients will be asked to lie on the examining table on their left side during the test and a series of images and measurements will be acquired over the course of the 45 minutes.
- Although the sonographer performing the test can see what is occurring with the patient's heart, he/she cannot provide any information. The test must be read and interpreted by the cardiologist who will then send a report to the physician who requested the test. That physician will provide patients with the results of the test.

We are located on the main level (enter through the main front entrance and ask Information Desk for directions); you will be directed to the Emergency Room receptionist who will notify the Diagnostic Imaging department of your arrival. If you have any further questions please call 613-354-3301 Ext. 263