



INTERVENTIONAL CARDIOLOGY MEDICAL GROUP, INC.
23101 SHERMAN PLACE, SUITE 110 • WEST HILLS, CA 91307
PHONE (818)702-8800 • FAX (818)702-0080

Consent for Cardiac Nuclear Imaging Stress Test

In order to determine the state of the blood supply of my heart muscle and as is requested by my health care provider, I will have a heart imaging procedure using maximal exercise on a treadmill as a stimulus for increasing blood flow to the heart muscle or using Lexiscan that is a stimulus for increasing blood flow to the heart muscle as an alternative to exercise stress.

The test will be performed by either 1) Walking on a treadmill until it is determined that the appropriate level of exercise has been performed, or 2) Injecting Lexiscan intravenously over a period of 30 seconds followed by a 4- to 5- minute recovery.

If the test is performed on a treadmill, the amount of effort will increase gradually. This increase in effort will continue until symptoms such as fatigue, shortness of breath, or chest discomfort appear which would indicate to me to stop. My procedure will involve intravenous injection of approved radioactivity before stopping exercise and subsequently, a perfusion scan will be obtained. If it is determined that walking on a treadmill has not achieved an adequate level of stress, then the test will be converted to a chemical Lexiscan stress test.

There exists the possibility of certain changes occurring during the treadmill test. They include abnormal blood pressure, fainting, disorder of the heartbeat (too rapid, too slow or ineffective) and in very rare instances (less than one in 1,000) of heart attack. Every effort will be made to minimize the potential risk by careful observations during testing. Emergency equipment and trained personnel are available to deal with any unusual situations, which may arise.

If you cannot walk on a treadmill, you will sit on the exam table while Lexiscan is administered intravenously, followed by an injection of approved radioactivity. Subsequently, a perfusion scan will be obtained in the same manner as in patients who have the radioactivity injected during exercise stress. Side effects to Lexiscan that have been observed include, but are not limited to the following: flushing 44%, chest discomfort 40%, shortness of breath or urge to breathe deeply 28%, headache 18%, abdominal discomfort 13%, dizziness and light headedness 12%, nervousness 2%, and low blood pressure 2%. Further complications that may rarely occur include irregular heart rate and rhythm 0.8 to 2.6% and heart attack. I realize that although every effort will be made to keep side effects to a minimum, the side effects can be unpredictable both in nature and in severity. Discontinuing the Lexiscan injection may reverse each of these symptoms mentioned above and in less than 2% of patients Theophylline may be used to reverse the side effects.

During the performance of the test, my pulse, blood pressure, and electrocardiogram will be under surveillance and a nurse practitioner and/or physician will be available to provide immediate treatment of any complications. Emergency equipment and trained personnel are available to deal with any unusual situations, which may arise.

The study has been explained to me. I have had the opportunity to discuss my questions with the doctor or his associates, including the nuclear medicine staff, and I believe that I have obtained a complete explanation regarding the procedure to be performed, the medications to be administered and any and all potential hazards, which are thought to exist.

By signing below, I give my informed consent and agree to have this procedure.

Patient Name (Print): _____ **Date:** _____

Patient Signature: _____

Witness Signature: _____