

Stress Echocardiogram

	(Allix identification ia	ibei fiere)		
URN:				
Family name:				
Given name(s):				
Address:				
Date of birth:		Sex: □M	\Box_{F}	

(Affix identification label bare)

Facility:

A. Interpreter / cultural needs	
An Interpreter Service is required?	No
If Yes, is a qualified Interpreter present? $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	Νo
A Cultural Support Person is required?	No
If Yes, is a Cultural Support Person present? Yes N	No
B. Condition and treatment	
The doctor has explained that you have the following condition: (Doctor to document in patient's own word	_
This condition requires the following investigation. (Doctor to document - include site and/or side where relevant to the procedure)	

The following will be performed:

There are two parts to this test.

In the first part of the test, a cardiac scientist performs an echocardiogram, using an ultrasound machine. An echocardiogram checks how your heart functions when resting.

You lie on your left side. To ensure good contact between your skin and the probe, surgical jelly is placed at several different sites on your chest. During this part of the test you hear loud swishing noises. This is the blood flowing through the valves of your heart.

In the second part of the test, your heart is exercised or 'stressed'. If you can walk easily, you can walk on the treadmill. The speed and slope of the treadmill will increase every 3 minutes. This makes your heart do more work. The test will be stopped if you have chest pain, become very tired or very short of breath (puffed).

When your heart is working as hard as possible, you stop exercising and quickly lie down on the bed. More echocardiogram pictures are taken.

If you have difficulty walking, the doctor may decide to use a drug called 'Dobutamine'. This drug copies the effect of exercise on the heart and makes the heart work faster and harder.

A small needle is inserted into the back of your hand. The Dobutamine is given slowly through this needle over the next twenty minutes.

If you feel unwell you should tell staff at once.

C. Risks of a stress echocardiogram

In recommending this procedure your doctor has balanced the benefits and risks of the procedure against the benefits and risks of not proceeding. Your doctor believes there is a net benefit to you going ahead.

There are risks and complications with this investigation. They include but are not limited to the following.

Common risks and complications (more than 5%) include:

- Mild angina
- · Shortness of breath
- Musculoskeletal discomfort

Rare risks and complications (less than 1%) include:

- Abnormal heartbeat that usually settles without treatment.
- Build up of fluid in the lungs. You may need medication to treat this.
- Chest pain. This is treated with medications.
- Heart attack.
- Death as a result of this procedure is extremely rare.

Side effects of Dobutamine:

You may suffer:

 Headache, nausea, vomiting, restlessness, muscle cramps or weakness, chest pain, shortness of breath (feeling puffed), dizziness, palpitations and rash.

D.	Significant risks and investigation
	options

(Doctor to document in space provided. Continue in Medical Record if necessary.)	

(Doctor to document in space provided. Continue in Medical Record if necessary.)	



Stress Echocardiogram

	(, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,		
URN:				
Family name:				
Given name(s):				
Address:				
Date of birth:		Sex: M	□ _F	

(Affix identification label here)

Facility:

F. Patient consent

I acknowledge that the doctor has explained;

- my medical condition and the proposed investigation, including additional treatment if the doctor finds something unexpected. I understand the risks, including the risks that are specific to
- other relevant procedure options and their associated risks.
- my prognosis and the risks of not having the procedure.
- that no guarantee has been made that the procedure will improve my condition even though it has been carried out with due professional care.
- if immediate life-threatening events happen during the procedure, they will be treated based on my discussions with the doctor or my Acute Resuscitation Plan.
- a doctor other than the Consultant may conduct the procedure. I understand this could be a doctor undergoing further training.

I have been given the following Patient Information Sheet/s:

Stress Echocardiogram

- I was able to ask questions and raise concerns with the doctor about my condition, the proposed investigation and its risks, and my treatment options. My questions and concerns have been discussed and answered to my satisfaction.
- I understand I have the right to change my mind at any time, including after I have signed this form but, preferably following a discussion with my doctor.
- I understand that image/s or video footage may be recorded as part of and during my investigation and that these image/s or video/s will assist the doctor to provide appropriate treatment.

On the basis of the above statements,

I request to have the procedure		
Name of Patient:		
Signature:		
Date:		
Patients who lack capacity to provide consent		
Consent must be obtained from a substitute decision maker/s in the order below.		
Does the patient have an Advance Health Directive (AHD)?		
☐ Yes Location of the original or certified copy of the AHD:		
No ► Name of Substitute Decision Maker/s:		
Signature:		
Relationship to patient:		
Date: PH No:		
Source of decision making authority (tick one): Tribunal-appointed Guardian		
Attorney/s for health matters under Enduring Power of Attorney or AHD	r	
☐ Statutory Health Attorney		
If none of these, the Adult Guardian has provided consent.		

G. Doctor/delegate statement

I have explained to the patient all the above points under the Patient Consent section (G) and I am of the opinion that the patient/substitute decision-maker has understood the information.

Name of Doctor/delegate:
Designation:
Signature:
Date:

H. Interpreter's statement

I have given a sight translation in

(state the patient's language here) of the consent form and assisted in the provision of any verbal and written information given to the patient/parent or guardian/substitute decision-maker by the doctor.

Signature:

Date:



Consent Information - Patient Copy Stress Echocardiogram

1. What is a stress echocardiogram?

The stress echocardiogram measures the function of the heart, lungs and blood vessels. It is done to help diagnose blocked arteries in the heart (coronary artery disease) and also provide specific information about valvular disease and pressure in the heart and lungs.

There are two parts to this test.

First, a cardiac scientist performs an echocardiogram using an ultrasound machine. An echocardiogram checks how your heart functions when resting.

You lie on your left side. To ensure good contact between your skin and the probe, surgical jelly is placed at several different sites on your chest. During this part of the test you hear loud swishing noises. This is the blood flowing through the valves of your heart.

In the second part of the test, your heart is exercised or 'stressed'. If you can walk easily, you can walk on the treadmill. The speed and slope of the treadmill will increase every 3 minutes. This makes your heart do more work and you will exercise quite hard. The test will be stopped if you have chest pain, become very tired or very short of breath (puffed).

When your heart is working as hard as possible, you stop exercising and quickly lie down on the bed. More echocardiogram pictures are taken.

If you have difficulty walking, the doctor may decide to use a drug called 'Dobutamine'. This drug copies the effect of exercise on the heart and makes the heart work faster and harder. A small needle is inserted into the back of your hand and the Dobutamine is given slowly through this needle over the next twenty minutes.

If you feel unwell you should tell staff at once.

2. What are the risks of this specific procedure?

In recommending this procedure your doctor has balanced the benefits and risks of the procedure against the benefits and risks of not proceeding. Your doctor believes there is a net benefit to you going ahead

There are risks and complications with this investigation. They include but are not limited to the following.

Common risks and complications (more than 5%) include:

- Mild angina
- · Shortness of breath
- · Musculoskeletal discomfort

Rare risks and complications (less than 1%) include:

- Abnormal heartbeat that usually settles without treatment.
- Build up of fluid in the lungs. You may need medication to treat this.

- Chest pain. This is treated with medications.
- · Heart attack.
- Death as a result of this procedure is extremely rare.

Side effects of Dobutamine:

You may suffer:

 Headache, nausea, vomiting, restlessness, muscle cramps or weakness, chest pain, shortness of breath (feeling puffed), dizziness, palpitations and rash.

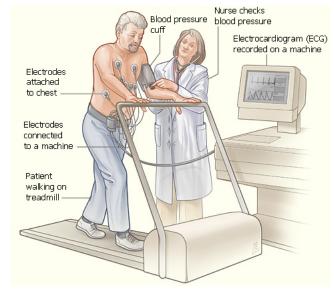


Fig 1. National Heart, Lung and Blood Institute

3. Before Your procedure

- Eat a light snack and only drink water 2-3 hours before.
- Do not do any strenuous exercise on the day of the procedure.
- Take your usual medication, <u>unless your doctor or</u> <u>hospital has advised otherwise</u> and bring a list of your medications to the hospital.
- Read and follow any other instructions or information given to you by your doctor/hospital.
- Wear shorts, pants or a skirt suitable for exercising in.

Notes to talk to my doctor about:

 Wear comfortable non-slip shoes suitable for riding a bike or for walking.

notes to talk to my dester about			