Stress Test / Stress Echo Requisition
SMBD Jewish General Hospital
Pavilion E-206

Date: ____________________________ Time: ____________________________

- Bring appropriate exercise clothing.
- Light breakfast only (no coffee or tea).
- Bring all of your medication with you.
- You have been advised by your physician to:
  - Continue all medications
  - Hold the following medication(s) before the test: __________ for ___ day(s)
  - __________ for ___ day(s)

Referring MD(s) ____________________________ Information: ____________________________

Information:__________________________________ __________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Stress Protocol
- Bruce
- Modified Bruce
- Submaximal
- Ramp
- Persantine
- Dobutamine
- Other

Imaging Protocol
- Echo
- MIBI (cardiolite)
- Thallium
- Other

Indication
- CAD - Diagnosis
- CAD - Prognosis
- Post MI
- Post PCI
- Post CABG
- Functional Capacity
- Arrhythmia
- Other

Risk Factors
- Fam Hx
- Smoking
- HTN
- Hi Chol
- DM

Medications Held ?
- Digoxin
- BB
- CCB
- Nitrate

Lifestyle
- Active
- Sedentary
- Unknown

Chest Pain
- Typical
- Atypical
- Nonanginal
- None

Height ______ cm ______ in

Weight ______ kg ______ lb

Resting ECG
- Normal – X0
- or
- X__ X__ X__ X__

Exercise Duration (min) METS

Reason for termination
- Chest pain
- Fatigue
- Dyspnea
- ST changes
- Arrhythmia
- SBP elevation
- Target HR
- Other

Exercise ECG
- Unchanged
- Changed

Recovery ECG
- Resolution
- Worsening
- New changes

Hemodynamics

<table>
<thead>
<tr>
<th></th>
<th>Rest</th>
<th>Peak</th>
<th>End</th>
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</thead>
<tbody>
<tr>
<td>HR</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>BP</td>
<td></td>
<td></td>
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</tbody>
</table>

ST depression

Time of Onset (min) HR BP /
Type H U D
Leads A I L AL IL AL all
Max (mm) Lead
Resolution (min)

ST elevation

Max (mm) Lead
### Stress Echo Information

<table>
<thead>
<tr>
<th>Heart Rhythm</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>Contrast?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Echo exam</td>
<td>Tape/Disc #</td>
<td>ID</td>
<td>Approach</td>
<td>5</td>
<td>6</td>
<td>Quality</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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<tr>
<td>Staff</td>
<td>Technician</td>
<td>Trainee</td>
<td>Echo MD</td>
<td>Data Entry</td>
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</tr>
</tbody>
</table>

| Resting LV diagnostic codes | 1. | 2. | 3. | 4. | 5. |

#### Baseline

- % EF:

#### Post Exercise or Low Dose

- % EF:
- Dose:

#### Peak Dose

- % EF:
- Dose:

#### Recovery

- % EF:

### CLINICALLY

- Positive
- Negative
- Indeterminate

### ELECTRICALLY

- Positive
- Negative
- Indeterminate

### Comments