

## MYOCARDIAL PERFUSION STUDY – PATIENT INFORMATION

- A Myocardial Perfusion Scan assesses Blood flow to your heart at rest and at stress. This is achieved by injecting a small amount of radioactive fluid into a vein in your arm which highlights the blood flow to your heart muscle. A scan using a machine called a gamma camera is taken while you are resting and another scan is taken after you have been exercised. The rest images are compared with the stress images.
- As not everyone is able to use the treadmill our Doctor will determine the most appropriate stress test for you, taking into account your medical history and physical ability, and may stress your heart using a pharmaceutical to simulate exercise. A Nurse and Doctor will be with you at all times during this process, constantly monitoring your heart.

### PATIENT PREPARATION

*The following preparation is vital to performing the scan. If you arrive without following the preparation, your scan will be rescheduled.*

1. A number of medications should generally be stopped 48hrs prior to your test. These include dipyridamole; anti-angina medication including nitrates, calcium channel blockers, and beta blockers; and asthma medications such as Theodur or Nuelin (THEOPHYLLINE and AMINOPHYLLINE). If you are taking any of these make an appointment to see your referring doctor who will advise you further. **YOU MUST CHECK WITH YOUR DOCTOR BEFORE STOPPING ANY MEDICINES.**
2. **Fast for at least 4 hours** (water is permitted).
3. **NO caffeine for 12hrs prior to your test.** This includes tea, coffee, chocolate, Milo, coca cola, DECAF tea & coffee and herbal beverages
4. Please **bring your medicines** with you and you can take them AFTER the stress phase of the test.
5. **If you have a history of asthma or lung disease** and have had a recent lung function test, please bring the results with you. These can also be emailed to [bookings@scr.com.au](mailto:bookings@scr.com.au).
6. **Wear comfortable clothes & non slip shoes.** If possible, ladies should wear a button through shirt and firm supportive bra. **NO TALC** please.

- Your test can be a lengthy process, so it is difficult to estimate the exact finishing time. We are happy to contact family to collect you when you have completed the test.
- The report takes a few hours to generate so for your convenience it will be delivered to your referring doctor. There are circumstances in which the report cannot be delivered and will require collecting preferably the next day.

## MYOCARDIAL PERFUSION SCAN PATIENT QUESTIONNAIRE

**NAME:** \_\_\_\_\_ **DATE OF BIRTH:** \_\_\_\_\_

**HAVE YOU HAD;**

- Any caffeine (coffee, tea, cola, choc, decaf, herbal drinks)? **YES** **NO**
- Any theophylline or dipyridamole in the last 48hrs? **YES** **NO**
- A previous cardiac stress test? **YES** **NO**  
If YES, when \_\_\_\_\_
- Are you able to;  
Walk on flat ground today? **YES** **NO**  
Walk uphill? **YES** **NO**

**SYMPTOMS; Have you ever had;**

- Chest pain/Angina? **YES** **NO**  
If YES, was it in the last 24hrs? **YES** **NO**
- Is it getting worse? **YES** **NO**
- Shortness of breath? **YES** **NO**
- Palpitations/Racing heart beat? **YES** **NO**
- Loss of consciousness? **YES** **NO**

**CARDIAC HISTORY; Have you ever had;**

- Heart failure? **YES** **NO**
- Proven heart attack? **YES** **NO**  
If YES, when \_\_\_\_\_
- Coronary Angiography? **YES** **NO**  
If YES, when \_\_\_\_\_
- Coronary Angioplasty/Stent insertion? **YES** **NO**  
If YES, when \_\_\_\_\_
- Coronary Bypass Surgery? **YES** **NO**  
If YES, when \_\_\_\_\_
- Valve or other heart surgery? **YES** **NO**  
If YES, when \_\_\_\_\_
- Pacemaker? **YES** **NO**  
If YES, when \_\_\_\_\_

**OTHER MEDICAL PROBLEMS; Have you ever had;**

- Asthma/Wheezing/  
Emphysema/Bronchitis? **YES** **NO**
- Diabetes/High Blood Sugar? **YES** **NO**
- High Cholesterol? **YES** **NO**
- High Blood Pressure? **YES** **NO**
- Epilepsy of seizures? **YES** **NO**
- Other serious medical problems **YES** **NO**  
If YES give details; \_\_\_\_\_
- Family history of heart disease? **YES** **NO**
- Smoker? **YES** **NO**
- Ex-smoker? **YES** **NO**  
If YES, how long since you quit? \_\_\_\_\_
- Major operations? **YES** **NO**  
If yes, give details; \_\_\_\_\_

**FEMALE PATIENTS ONLY;**

In order for our Doctor to accurately interpret your scan the following information is necessary;

- Do you have breast implants? **YES** **NO**
- Have you had a mastectomy? **YES** **NO**
- What is your bra size (inc. Cup size)? \_\_\_\_\_

**THIS PROCEDURE HAS BEEN EXPLAINED TO ME AND I HAVE NO FURTHER QUESTIONS.**

SIGNATURE OF PATIENT \_\_\_\_\_

DATE \_\_\_\_\_

WITNESS \_\_\_\_\_



## MYOCARDIAL PERFUSION SCAN

### *Patient Medication Instructions*

#### For the patient;

Please list all your medications and make an appointment to see your general practitioner. She/he will advise you what to take on the day of the test.

1.	7.
2.	8.
3.	9.
4.	10.
5.	11.
6.	12.

Please list any drug allergies you may have;

1.	4.
2.	5.
3.	6.

#### For the doctor;

This patient is scheduled for a myocardial perfusion study. Blood pressure medication(s) with antianginal properties will lower the diagnostic accuracy of a stress test, therefore –

It is preferable to cease all anti-anginal therapy such as **Beta Blockers, Nitrates, and Calcium Channel Blockers** for 48hrs prior to the test, if you feel there are no contraindications **\*\* see footnote**

- If the patient has NIDDM, hypoglycaemics may need to be reduced or not taken on the day, as fasting is requested.
- Asthmatics on Theodur or Nuelin and patients on dipyridamole should also cease these medications 48hrs prior to the test.
- Patients with asthma, COPD or lung disease will need lung function testing prior to this procedure. Patients are to bring results with them.

**\*\* In general, all patients should be anti-anginal drug free for the best and most accurate test procedure:-**

- > When stress testing is performed to detect the presence & extent of CAD, then anti-ischaemic therapy should be discontinued before the test.
- > Consideration for withdrawal of medications should also be given if the purpose of the test is for risk stratification of known CAD.
- > In contrast, when stress imaging is performed to evaluate the effectiveness of anti-ischaemic therapy in stable CAD or low risk patients it is reasonable to continue therapy.
- > Therapy should be withheld for 48hrs or preferably 4-5 half lives depending on the individual medication