



**Interventional Cardiac
Consultants, PLC**

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Invasive
Angiogram
Cardiac Catheterization
P.T.C.A.
Atherectomy
Stents
Rotablator
IVUS

Patient Name: _____

Echo Appt Date: _____ Time: _____

Stress Appt Date: _____ Time: _____

Non-Invasive
Holter Monitor
Echocardiography
Stress Echo
TEE
Carotid Ultrasound
Tissue Doppler
Event Monitor
Contrast Studies
EECP
ABI

2 – Day Nuclear Stress Test

Day 1: _____ Time: _____

Day 2: _____ Time: _____

- | | |
|---|--|
| <input type="checkbox"/> Nuclear Dobutamine Stress Test | <input type="checkbox"/> Exercise Treadmill |
| <input type="checkbox"/> Nuclear Adenosine Stress Test | <input type="checkbox"/> Echocardiogram |
| <input type="checkbox"/> Nuclear Exercise Stress Test | <input type="checkbox"/> Carotid Ultrasound |
| <input type="checkbox"/> Nuclear Lexiscan Stress Test | <input type="checkbox"/> Stress Echocardiogram |

Other: _____

Drink plenty of WATER prior to your appointment!

- 4 hours prior-NO food.**
- 12 Hours prior**-hold ALL forms of Caffeine / Decaf and ALL nicotine products
(Coffee, energy drinks & chocolate, patches, cigars, dip, cigarettes)
- Treadmill stress test-** Wear comfortable clothing and walking shoes.
- Lexiscan stress test-** 72 hours prior DO NOT TAKE the following medications.

- Persantine (dipyridamole)
- Aggrenox
- Theophylline
- Isosorbide, Nitro, or Nitro Patch

Bring a caffeinated beverage and snack of your choice for after the test.

**Do not wear any Metal (jewelry, pins, suspenders, metal buttons, etc.)
If you are asthmatic or use an inhaler, bring it with you at the time of the
appointment.**

Please give 24 hour notice of cancellation

Arrhythmia
Electrophysiology
Ablation
Pacemaker
Defibrillator
A/V Optimization
PPM/ICD
ILR (Reveal)

Clinical Research
Cardiac Devices
Pharmacology

Office Locations

Premier Medical Center
2035 Little Rd.
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14100 Fivay Rd.
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Hudson, FL 34667
Ph. (727) 862-3202
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