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Consent for Routine Treadmill Exercise

In order to determine the state of the blood supply of my heart muscle and as is requested by my Doctor, I will have a procedure using maximal exercise on a treadmill as a stimulus for increasing blood flow to the heart muscle.

The test, which I shall undergo, will be performed on a treadmill with the amount of effort increasing 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.

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.

There exists the possibility of certain changes occurring during the 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.

The study has been explained to me. I have had the opportunity to discuss my questions with the doctor, nurse practitioner, and/or technician. I believe that I have obtained a complete explanation regarding the procedure to be performed, 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: _____