

Exercise stress echocardiography

A patient's guide and
consent form

Your doctor has decided that you should have an exercise stress echocardiogram.

What is it?

An echocardiogram or 'echo' is a scan that uses ultrasound (sound waves) to produce pictures of the heart. The test is painless and does not use radioactivity.

During an exercise echo, your doctor will ask you to walk on a treadmill or ride an exercise bike whilst pictures are taken of your heart.

Why is it being done?

An exercise echo is performed as it allows your doctor to understand how the heart copes when it is made to work harder.

An exercise echo is useful to diagnose whether you have angina or not. It can also give your doctor information about the severity of a heart-valve problem.

What does it involve?

You will be taken into a darkened room. Three people will usually be present when you have the test - a doctor, a sonographer and an assistant.

You will be asked to undress to the waist and put on a gown that should be left open to the front. You will be asked to lie on a couch on your left hand side.

Stickers will be attached to your chest and connected to the machine. These will be used to monitor your heart rate. Your blood pressure will also be checked regularly throughout the test. A cannula may be placed in the vein in your arm, if the doctor needs to inject contrast which improves the quality of the images recorded.

Pictures of your heart will be recorded on the machine. You will then be asked to exercise, either by walking on a treadmill or riding an exercise bike. Therefore, please wear sensible clothing and footwear. The exercise will be gentle at first but will get progressively more strenuous. Occasionally the sonographer may record pictures of your heart whilst you are exercising.

When the doctor has decided that you have performed enough exercise, or if you are unable to continue, the doctor will ask you to lie back on the couch and more images of the heart will be recorded. You will continue to have your heart

rate and blood pressure monitored until you have fully recovered, which may take several minutes.

Overall the exercise echo will take up to an hour and a half to complete.

Are there any special precautions that I need to take before the exercise echo?

You should continue to take your medication, **unless** your doctor tells you otherwise. If you have any doubts, please contact your doctors' secretary or this unit.

Are there any risks in having the exercise echo?

- The exercise echo scan is extremely safe as it is just like exercising as if you were at home.
- There is an extremely small risk (less than 1 in 10,000) of developing an allergic reaction if contrast is used.

If you have had allergic reactions to any medicines before please inform your doctor before starting the test.

- If you suffer with angina, there is an extremely small risk (less than 1 in 10,000) you may have a small heart attack during the test.
- There is a very small risk of developing an abnormal heart rhythm (less than 1 in 10,000).

For patients who have been diagnosed with hypertrophic cardiomyopathy (HCM):

There is a very small risk of developing an abnormal heart rhythm (less than 1 in 500). If this occurs, it will often settle down by simply stopping the exercise test, but occasionally you may need additional treatment for this.

If you have an ICD (defibrillator) fitted this may need to be reprogrammed prior to the test. However, the ICD settings will be returned to normal at the end of the test before you leave the department

At the end of your echocardiogram

You will be able to return home after the test has been completed. You may undertake your day-to-day activities as usual.

Please affix patient label or complete details below.

Full name:

Hospital number:

NHS number:

DOB:

PIC 148: patient agreement to PI 148 - Exercise stress echocardiography

Intended procedure/surgery

Statement of health professional

(To be filled in by health professional with appropriate knowledge of proposed procedure, as specified in consent policy).

I have explained the procedure to the patient. In particular I have explained:

The intended benefits

As detailed on page..... of this booklet.

Any extra procedures, which may become necessary during the procedure:

- Blood transfusion
- Other procedure - please specify below:

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I have also discussed what the procedure is likely to involve, the benefits and risks of any available alternative treatments (including no treatment) and any particular concerns of this patient.

This procedure will involve:

- General anaesthesia
- Local anaesthesia and sedation

Statement of interpreter (where appropriate)

I have interpreted the information above to the patient to the best of my ability and in a way which I believe they can understand.

Signed:

Date:

Name (PRINT):

If a telephone / video service has been used, please document the name of the interpreter and company below

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Top copy to be filed in medical notes, carbon copy to be retained in booklet for patient.

Health professional

Signed:

Date:

Name (PRINT):

Job title:

Contact details

(If patient wishes to discuss options later)

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.....

Has a ReSPECT form been considered and, if relevant, appended to this form?

- Yes
- No

Statement of patient

Please read the patient information and this form carefully. If the treatment has been planned in advance, you should already have your own copy of which describes the benefits and risks of the proposed treatment. If not, you will be offered a copy now. If you have any further questions, do ask - we are here to help you. You have the right to change your mind at any time, including after you have signed this form.

Yes No

- I agree** to the procedure or course of treatment described on this form and have read the information leaflet on exercise stress echocardiography (PI 148) and had the opportunity to ask questions.
- I agree** to the use of photography for the purpose of diagnosis and treatment and I agree to photographs being used for medical teaching and education.

- **I understand** what the procedure is and I know why it is being done, including the risks and benefits.



Please affix patient label or complete details below.

Full name:

Hospital number:

NHS number:

DOB:

- **I understand** that any tissue removed as part of the procedure or treatment may be used for diagnosis, stored or disposed of as appropriate and in a manner regulated by appropriate, ethical, legal and professional standards.
- **I understand** that any procedure in addition to those described on this form will be carried out only if necessary to save my life or to prevent serious harm to my health.
I have listed below any procedures **which I do not wish to be carried out** without further discussion:

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I have been told in the past by Public Health that I am at increased risk of CJD (Creutzfeldt Jakob disease) or vCJD (variant Creutzfeldt Jakob disease).

Yes No

(Where patient indicates 'yes' health professional to refer to Trust CJD procedure DN092)

Patient

Patient signature:

Date:

Name (PRINT):

Confirmation of consent

(To be completed by a health professional when the patient is admitted for the procedure, if the patient has signed the form in advance).

On behalf of the team treating the patient, I have confirmed with the patient that they have no further questions and wish the procedure to go ahead.

Signed:

Date:

Name (PRINT):

Job title:

Important notes (tick if applicable).

- Patient has advance decision to refuse treatment
- Patient has withdrawn consent (ask patient to sign/date here)

Patient signature:

Date:

Name (PRINT):

Recommended summary plan for emergency care and treatment (ReSPECT)

What is ReSPECT?

ReSPECT stands for 'Recommended summary plan for emergency care and treatment'. It is a process that helps people to think about what treatment is suitable in an emergency, should they be unable to make decisions at the time.

Why is it important?

We know that, when people are very unwell, they are often unable to think clearly about what treatment they may or may not want because their brain and body are overwhelmed by the illness. It is also normal for people to feel anxious about what is happening when they are sick and in hospital, and this can also make it difficult to think clearly. This is why we think it is a good idea, where possible, for decisions about medical treatment to be made in advance – before there is an emergency situation or crisis.

How does it work?

The ReSPECT process is designed to help conversations between you and your healthcare professionals: they need to make sure you understand your health problems and which treatments may or may not benefit you. You need to make sure the healthcare professionals understand what matters most to you and whether there is anything you are particularly worried about or would want to avoid.

This conversation is used to complete a ReSPECT form that records a person's health problems, their preferences and which medical treatments may or may not be suggested. The original form should stay with the patient, though it is extremely helpful to have a record of the content of the form on their electronic patient record.

A ReSPECT form is NOT a legally binding document and can be changed or withdrawn at any point.

The ReSPECT form is often used to indicate treatments that someone may not want and/or treatments that their healthcare professionals consider would no longer be of benefit to them. If people are getting worse from progressive conditions, it may be helpful to consider in advance about things such as whether they would wish to go back into hospital and, if in hospital, what sort of treatments might or might not be helpful for them.

This often includes a decision on whether or not they should have attempted cardiopulmonary resuscitation (CPR) if their heart was to stop.

Who is it for / is this relevant for me?

This process has increasing relevance for people who have complex health needs, people who may be nearing the end of their lives and those who are at risk of sudden deterioration or cardiac arrest.

However, many people come to Royal Papworth to have major procedures or surgery with the intention of curing a progressive disease or with the intention of substantially prolonging their life and, if that is you, you may wonder how a ReSPECT discussion applies to you and others like you.

One of the key things to understand about the ReSPECT process is that it can be used simply to document a person's wishes and priorities, without setting any limitations on what treatment they should have. This is important because all the procedures and operations we do here come with the risk of complications.

In the unlikely event that things do not go as planned, it is really helpful to have some idea about a person's preferences and about their fears, worries and hopes.

Once again, the document is not legally binding, but it can help those looking after you to know what you might want if you weren't able to say for yourself.

Notes:

Royal Papworth Hospital NHS Foundation Trust

A member of Cambridge University Health Partners



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Large print copies and alternative language versions of this leaflet can be made available on request.

View a digital version of this leaflet by scanning the QR code.



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