



CARDIOVASCULAR WELLNESS

Heart Disease & Hypertension

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INSTRUCTIONS EXERCISE STRESS TEST

NAME: _____ **DATE / TIME:** _____ **AM/PM**

**If you are unable to keep your scheduled appointment, please notify our office 48 hrs prior to the test.
Missing a scheduled stress test may result in a \$50 charge.**

A stress test is a special type of test that is used to measure the heart's tolerance for exercise and detect various forms of heart disease. This test combines mild exercise on a treadmill with an electrocardiogram (EKG) to measure the heart's activity both at rest and while working. A stress test is performed to determine causes of chest pain, to determine the exercise capacity of the heart, to determine appropriate exercise levels in those initiating an exercise program, and to identify rhythm disturbances during exercise. There may be additional reasons for your health care provider to request this test.

**PLEASE FOLLOW INSTRUCTIONS CAREFULLY TO AVOID BEING RESCHEDULED.
INFORM US IMMEDIATELY IF YOU COULD BE PREGNANT OR
HAVE PHYSICAL LIMITATIONS THAT MAY PREVENT YOU FROM WALKING ON A TREADMILL.**

48 HOURS BEFORE YOUR TEST

NO Viagra, Cialis, Levitra, or Revatio

24 HOURS BEFORE YOUR TEST

NO Beta-blockers such as atenolol, metoprolol, Toprol XL, Lopressor, Coreg, carvedilol, Bystolic, bisoprolol (UNLESS otherwise directed by your physician).

CONTACT us if you have questions regarding medications.

12 HOURS BEFORE YOUR TEST

DO NOT smoke or use any nicotine products.

NO coffee or tea of any kind.

NO decaffeinated coffee or tea of any kind.

NO colas or soft drinks, including those labeled caffeine free.

NO chocolate (candy, cakes, pies, cocoa, white chocolate, etc.).

NO Anacin, Excedrin or other drugs containing caffeine.

DIABETICS if you take insulin at bedtime, only take half of your usual dose.

THE DAY OF YOUR TEST

DO NOT eat, drink or smoke for 4 hours prior to your test.

DO have water, juice or lemonade to ensure that you are well hydrated.

DO take your medications as usual, **EXCEPT** those listed above, **UNLESS** otherwise directed by your physician.

DO NOT take any oral diabetic medications or insulin until after your test.

BRING ALL MEDICATIONS INCLUDING INHALERS with you in their original containers or a list that includes dose and how often you take each one. We may instruct you to take certain medications before, during, or after your test.

WEAR comfortable loose fitting clothing.

WEAR enclosed shoes appropriate for WALKING. No slip-ons, sandals, house shoes, or dress shoes. Sneakers preferred.

DO NOT apply lotions or powder to your chest area on the day of your test.

ARRIVE 30 minutes prior to your appointment time.

ALLOW at least 1 ½ hours to complete the test.

RESULTS will be communicated to you by your physician after interpretation on a follow up appointment.