



2149 E. Baseline Rd, Tempe, AZ 85283  
PH (480) 345-0034 F (480)345-4033

## EXERCISE CARDIOLITE STRESS TEST

Patient Name: \_\_\_\_\_

You are scheduled for the following test on: \_\_\_\_\_ Check in time: \_\_\_\_\_

\*\*\*\*\*ALL TESTING IS DONE AT OUR TEMPE LOCATION\*\*\*\*\*

2149 E Baseline Rd Ste 103 Tempe, AZ 85283 480-345-0034

### PREPARATIONS FOR YOUR TEST:

- Please eat a light, low fat meal 2 hours prior to test.
- Please increase your water intake 2 days prior to test.
- Please bring a snack/light meal with you, which you may eat with permission of the tech
- Allow 4-5 hours for testing
- Do not wear metal jewelry or buttons the day of testing.

<p>Please stop the following medications 24 hours prior:</p> <ul style="list-style-type: none"> <li>• Calan</li> <li>• Cardizem</li> <li>• Diltiazem</li> <li>• Isosorbide Mononitrate/Dinitrate</li> <li>• Normandyne</li> <li>• Sectal</li> <li>• Trandate</li> <li>• Verapamil</li> <li>• Zebeta</li> <li>• Ziac</li> </ul>	<p>Please stop the following medications 48 hours prior:</p> <ul style="list-style-type: none"> <li>• Atenolol</li> <li>• Betapace</li> <li>• Inderal</li> <li>• Labetalol</li> <li>• Metoprolol</li> <li>• Nadolol</li> <li>• Propranolol</li> <li>• Sotalolol</li> <li>• Tenormin</li> </ul>
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\*\*\*Any medications not listed can be taken as normal the day of your test.\*\*\*

**\*\*Please provide 24 business hours notice to cancel or reschedule this test. There will be a \$100 charge for last minute cancellations or no-shows. This fee also applies if you cannot complete the test due to not following the above instructions.\*\***

Your appointment for results is scheduled on \_\_\_\_\_ at \_\_\_\_\_

I acknowledge that I have received and understand these instructions.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date