

**NASSAU CARDIAC DIAGNOSTICS
SCOTT J. RATNER, M.D., F.A.C.C.
407 FRANKLIN AVENUE
FRANKLIN SQUARE, NEW YORK 11010
(516) 616-0808**

PRE-TEST INTRUCTIONS FOR STRESS TESTING

You have been scheduled for a test designed to evaluate the circulation and function of your heart. This evaluation will provide your doctor with a large amount of information that will be helpful to you. Proper preparation is necessary to obtain the most precise results. Please contact us if you have additional questions or concerns about the test.

We will call and confirm your appointment approximately 24 hours prior to your test. If you cannot keep your appointment, please let us know so that you may give your allotted time to someone else.

Certain medications for the heart or blood pressure are best discontinued prior to testing. Check with your physician or ask a member of our staff for assistance concerning this. Only your physician can advise you about your medication.

If you are having a treadmill test, please do not eat for 3 hours prior to testing.

Wear comfortable clothing and shoes in which you can walk at a brisk pace. Rubber soled shoes or sneakers are preferred.

If you are having a nuclear stress test, which may go under the name of a Thallium or Cardiolite stress test, or a Persantine or Adenosine stress test, please be aware that your test will typically require two parts. Usually, the “stress” portion is done first. This test takes a little over an hour to complete. The second or “rest” portion of the examination may be done later that day or on a different day and usually requires less than 30 minutes. We will attempt to work around your schedule as much as possible and we will give you further instructions at the time of your test.

A word on your diet: Juices and water are permitted. Milk and dairy products should be avoided prior to nuclear stress tests. Coffee, tea, and caffeinated beverages must be avoided if you are having a nuclear stress test that utilizes medication rather than walking on the treadmill.

Dr. Ratner has performed more than 20,000 tests on people from age 9 to more than 90. He has been Board Certified in both cardiovascular disease, nuclear cardiology, critical care medicine and internal medicine. Please feel free to call if you have any questions or concerns.

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Please complete the following prior to your test:

NAME: _____

TODAY'S DATE: _____

AGE: _____ HEIGHT ___ FT. _____ IN WEIGHT _____

NAME & ADDRESS OF ANY DOCTORS WHO ARE TO RECEIVE TEST RESULTS:

1. _____

2. _____

Please list any medications and the time of your last dose:

MEDICATIONS

TIME OF LAST DOSE

1. _____

2. _____

3. _____

4. _____

5. _____

Please check if you have had any of the following:

High blood pressue _____ Prior heart attack _____ Hear trouble in family _____

Diabetes _____ Prior Angioplasty _____ Chest Pain _____

High Cholesterol _____ Angina _____ Breathing Problems _____

Smoking Now? _____ Smoked In Past? _____ Allergies _____