



Queensland
Government

Stress Echocardiogram Consent

Adult (18 years and over)

Facility:

(Affix identification label here)

URN:

Family name:

Given name(s):

Address:

Date of birth:

Sex: M F I

This consent form and patient information sheet uses the words 'I/you/your/me/my' to mean the patient or another person who is providing consent on behalf of the patient.

A. Does the patient have capacity to provide consent?

- Yes → **GO TO section B**
 No → **COMPLETE section A**

You must adhere to the Advance Health Directive (AHD), or if there is no AHD, the consent obtained from a substitute decision-maker in the following order: Category 1. Tribunal-appointed guardian; 2. Enduring Power of Attorney; or 3. Statutory Health Attorney.

Name of substitute decision-maker:

Category of substitute decision-maker:

B. Is an interpreter required?

- Yes No

If yes, the interpreter has translated:

- in person over the telephone

A verbal translation is a summary of the form.

Name of interpreter:

National Accreditation Authority for Translators and Interpreters (NAATI) code:

Language:

C. Procedure details

I confirm that the doctor has informed me about the following procedure(s) and I consent to:

- Stress echocardiogram: Yes
Dobutamine: Yes No
Atropine: Yes No

D. Risks specific to the patient in having a stress echocardiogram

(Doctor to document additional risks not included in the patient information sheet)

E. Risks specific to the patient in *not* having a stress echocardiogram

(Doctor to document specific risks in not having a stress echocardiogram)

F. Alternative procedure options

(Doctor to document alternative procedure not included in the patient information sheet)

DO NOT WRITE IN THIS BINDING MARGIN

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SW9031

STRESS ECHOCARDIOGRAM CONSENT



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G. Acknowledgment and consent

I acknowledge that the doctor has explained and I understand:

- the 'Stress Echocardiogram' patient information sheet
- the medical condition and proposed procedure, including the possibility of additional treatment
- the specific risks and benefits of the procedure
- the prognosis and risks of not having the procedure
- alternative procedure options
- that there is no guarantee the procedure will improve the medical condition
- that if an immediate life-threatening event happens during the procedure, health care will be provided based on my AHD (Advance Health Directive) or ARP (Acute Resuscitation Plan). If no AHD or ARP is in place, health care will be provided in accordance with good clinical practice and the *Guardianship and Administration Act 2000 (Qld)*
- that a doctor/clinician other than the consultant/specialist may assist with/conduct the clinically appropriate procedure; this may include a doctor/clinician undergoing further training under supervision
- that if the doctor/clinician wishes to record video, audio or images during the procedure where the recording is not required as part of the treatment (e.g. for training or research purposes), I will be asked to sign a separate consent form. If I choose not to consent, it will not adversely affect my access, outcome or rights to medical treatment in any way.
- I was able to ask questions and raise concerns with the doctor.
- I understand I have the right to change my mind regarding consent at any time, including after signing this form.

I have received the following consent and patient information sheet(s):

- 'Stress Echocardiogram'
- Other (*specify*):

On the basis of the above statements,

I consent to having a stress echocardiogram.

Name of patient/substitute decision-maker:

Signature:

Date:

H. Doctor confirms

I have explained to you the contents of this form and am of the opinion that the information has been understood.

Name of doctor:

Designation:

Signature:

Date:

I. Clinical student involvement

For the purpose of undertaking training, a clinical student(s) may observe medical examination(s) or procedure(s) and may also, subject to my consent, assist with/conduct an examination or procedure on me/the patient.

I consent to a clinical student(s) undergoing training to:

- observe examination(s)/procedure(s): Yes No
- assist with examination(s)/procedure(s): Yes No
- conduct examination(s)/procedure(s): Yes No

Note: you will also have the opportunity to say yes or no to student involvement, on the day of your procedure.

For further information please see www.health.qld.gov.au/consent/students

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Stress Echocardiogram

Adult (18 years and over)

Informed consent: patient information

This patient information sheet has been given to you to read carefully and allow time to ask your doctor any questions about this procedure. Your doctor will include the consent form and a copy of this patient information sheet in your medical record.

This patient information sheet uses the words 'I/you/your/me/my' to mean the patient or another person who is providing consent on behalf of the patient.



1. What is a stress echocardiogram and how will it help me?

A stress echocardiogram is a diagnostic test to assess how your heart functions before and after exercise. It can help diagnose blocked arteries in the heart (coronary artery disease), and also provide specific information about disease of your heart valves, or pressure in the heart and lungs.

There are two parts to this test.

Part 1: A cardiac sonographer (ultrasound clinician) performs an echocardiogram, which is an ultrasound of your heart. An echocardiogram gives information about how your heart functions before exercise.

Part 2: Your heart is exercised or 'stressed'. If able, you will be asked to exercise on a treadmill (or exercise bike). The speed and slope, or resistance, will be increased every few minutes. This makes your heart do more work, and you will exercise quite hard. If you develop chest pain or become very tired, or short of breath, the test will be stopped.

If you are unable to tolerate the exercise, the doctor may decide to use a medication called 'dobutamine'. This medication copies the effect of exercise on the heart, and makes the heart work faster and harder.

When your heart is working as hard as possible, you will be asked to stop exercising and quickly lie down on the bed. More echocardiogram images are then taken.

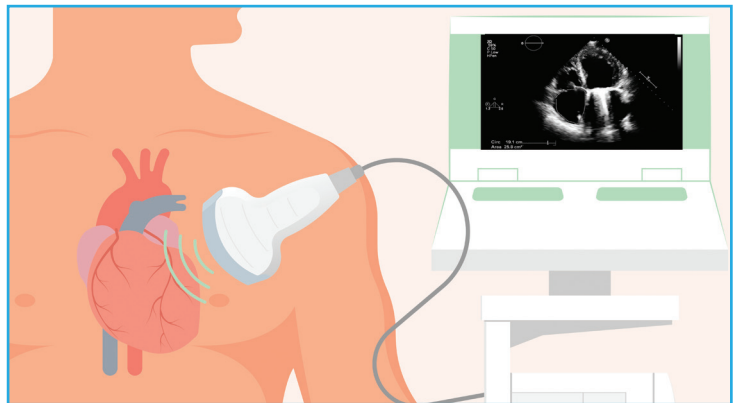


Image 1: Echocardiogram.
ID: 1806965218 (adapted). www.shutterstock.com



Image 2: Stress test performed on a treadmill.
ID: 1761854165. www.shutterstock.com

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Stress Echocardiogram

Adult (18 years and over)

Informed consent: patient information

Preparing for the procedure

The Cardiac Investigations department will give you instructions on how to prepare for the procedure. It is important to follow the instructions that are given to you. Your procedure might be delayed if you don't follow all the preparation steps.

Please tell the doctor if you:

- are breastfeeding or pregnant, or suspect that you may be pregnant
- have a drug or medication dependence.

On the day of your procedure

- You can eat and drink as per normal on the day of your procedure. However, during the 2 hours prior to your procedure time, have no more than a light snack and water.
- Do not do any strenuous exercise (such as jogging, running, fast cycling, jumping rope) on the day of the procedure.
- Please wear comfortable non-slip shoes and clothing suitable for walking or riding a bike.
- If you take medicines, most should be continued before a procedure and taken at the usual time, even on the day of the procedure, with a sip of water. There are some important exceptions:
 - your doctor will provide specific instructions about your medicines
 - take to the hospital all your prescribed medicines, those medicines you buy over the counter, herbal remedies and supplements. This may include and is not limited to blood-thinning medicines, the contraceptive pill, antidepressants and/or medicines for treating diabetes (e.g. insulin).
- If you feel unwell, telephone the Cardiac Investigations department for advice.

- Tell your doctor if you have:
 - health problems (e.g. diabetes, high blood pressure, infectious diseases, serious illnesses), including if undergoing regular treatment
 - allergies/intolerances of any type and their side effects.

There is a possibility you may not be able to drive home after the test. Please arrange for alternative transport if required.

For a substitute decision-maker of an adult without capacity to consent to having a stress echocardiogram

To prepare the patient for this procedure and to ease their concerns, tell them what they can expect to happen during the procedure. This information sheet will assist you with this.

At the discretion of the procedure staff, a parent/adult may be invited into the procedure room to support the patient

Children are not allowed into the procedure room, and they must be supervised at all times by another parent/adult.

During the procedure

Electrode stickers (small, plastic patches that stick to your skin) will be placed on your chest and back to monitor your heart rate and rhythm. Before the test begins, you will be examined by the doctor, and a resting blood pressure, electrocardiogram (ECG) and echocardiogram will be done.

For the echocardiogram, you will lie on your left side. This is to ensure a clear image of your heart. Ultrasound gel will be placed at several different sites on your chest. During this part of the test, you will hear loud swishing noises. This is the blood flowing through the valves of your heart.

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Once your baseline (resting) observations and tests are complete, you will be asked to exercise on a treadmill (or exercise bike). Observations may include cardiac rhythm, blood pressure, heart rate, respiratory (breathing) rate, and oxygen levels.

The speed and slope will be increased every 3 minutes. You will be required to exercise for about 15 minutes. This may make you feel puffed and/or cause some musculoskeletal (muscle and bone) discomfort. While you are exercising, your ECG and blood pressure will be monitored. The test is stopped once you reach your target heart rate, or earlier if you develop chest pain, fatigue, breathlessness, other limiting symptoms, or if changes on the ECG or echocardiogram concern the doctor.

If you have difficulty walking or exercising, the doctor may decide to use a medication called 'dobutamine'. Dobutamine is a medication that copies the effect of exercise on the heart and makes the heart work faster and harder.

To give the dobutamine medication, an intravenous (I.V.) cannula will be inserted into a vein in your arm. The dobutamine will be given slowly through this cannula over the next 20 minutes. During this time, the cardiac sonographer (ultrasound clinician) will take a series of ultrasound images to compare with the resting pictures.

Occasionally, another medication called atropine is used. You will notice your heart will beat faster soon after having this medication.

As atropine has the potential to raise blood pressure and affect the rhythm of your heart. Your blood pressure and your ECG will be monitored throughout the procedure. Sometimes a medication is required to reverse the effects of dobutamine or atropine.

Metoprolol is a 'beta-blocker', a medication used to reduce your heart rate and would be given through the I.V. cannula.

Shortly after having this medication, your heart will start to feel back to normal.

If you feel unwell at any point during the test, you should tell staff at once.

When the exercise (stress) component of the procedure is completed, you will be asked to immediately lie on your left side for more ultrasound images of your heart, while it is still beating quickly.

Once the images have been taken, the staff will monitor your observations to ensure they return to normal before removing the ECG and blood pressure monitoring.

Unless otherwise advised, you may eat and drink normally after your procedure.

If you no longer require the I.V. cannula, it will be removed.



2. What are the risks?

In recommending the procedure, the doctor believes that the benefits to you from having the procedure exceed the risks involved. There are risks and possible complications associated with the procedure which can occur with all patients – these are set out below.

Your doctor will discuss any additional risks, specific to your individual condition and circumstances, with you. These should be written on the consent form before you sign it.

Common risks and complications

- mild angina (causes chest pain).

Uncommon risks and complications

- the procedure may not be possible due to medical and/or technical reasons.

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Rare risks and complications

- abnormal heartbeat that usually settles without treatment
- build up of fluid in the lungs. You may need medication to treat this
- chest pain. This is treated with medications.
- heart attack
- intracranial haemorrhage (bleeding in the brain) resulting from an increase in blood pressure caused by dobutamine
- death as a result of this procedure is extremely rare.

Side effects of dobutamine

You may experience:

- headache
- nausea/vomiting
- restlessness
- muscle cramps or weakness
- chest pain
- increased blood pressure
- racing heart
- shortness of breath (feeling puffed)
- dizziness
- palpitations
- rash.

Side effects of atropine

You may experience:

- dry mouth
- dry eyes
- blurred vision
- dizziness
- chest pain
- difficulty breathing
- headache
- confusion
- nausea
- fast, pounding, irregular heart beat
- urinary retention.

Side effects of metoprolol

You may experience:

- slow heart rate
- lowering of blood pressure
- dizziness
- tiredness
- rash
- difficulty breathing.

What are the risks of not having a stress echocardiogram?

There may be adverse consequences for your health if you choose not to have the proposed procedure. You and your doctor should discuss these.

If you choose not to have the procedure, you will not be required to sign a consent form.

If you have signed a consent form, you have the right to change your mind at any time prior to the procedure.



3. Are there alternatives?

An alternative test may be available. Your doctor will discuss the most appropriate examination for your circumstances.

Making the decision to have a procedure requires you to understand the options available.

Your doctor will discuss any alternative procedure options and their risks or benefits with you, before signing the consent form.



4. What should I expect after the procedure?

Depending on your result, the doctor will discuss with you the suitable level of activity after discharge.

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If you were given atropine, your vision may be affected and it is important that you wait for it to settle and your normal vision to return before driving.

The cardiologist (doctor) will review the results and final images and send the final report to your treating team.



5. Who will be performing the procedure?

Doctors, cardiac scientists, radiographers, cardiac sonographers, pharmacists, nurses, patient support officers and administration staff make up the cardiology team. All or some of these professionals may be involved in your journey.

A doctor other than the consultant/specialist may assist with/conduct your procedure. This could include a registered doctor who is undergoing further training. All trainees are supervised according to relevant professional guidelines.

If you have any concerns about which doctor will be performing your procedure, please discuss this with the doctor.

Clinical students

For the purpose of undertaking professional training in this teaching hospital, subject to your consent, a clinical student(s) may observe medical examination(s) or procedure(s). A clinical student may also, subject to your consent, assist with/conduct a clinically necessary examination or procedure on you.

You are under no obligation to agree to an examination(s) or a procedure(s) being observed or undertaken by a clinical student(s) for training purposes. If you choose not to consent, it will not adversely affect your access, outcome or rights to medical treatment in any way.

For more information on student care, please visit www.health.qld.gov.au/consent/students



6. Where can I find support or more information?

Hospital care: before, during and after is available on the Queensland Health website www.qld.gov.au/health/services/hospital-care/before-after where you can read about your healthcare rights.

Queensland Health respects the privacy of patients and their families. To learn more about health records and personal information visit our website www.health.qld.gov.au/system-governance/records-privacy/health-personal

Further information about informed consent can be found on the Informed Consent website www.health.qld.gov.au/consent. Additional statewide consent forms and patient information sheets are also available here.

Staff are available to support patients' cultural and spiritual needs. If you would like cultural or spiritual support, please discuss this with your doctor.

Queensland Health recognises that First Nations Peoples' culture must be considered in the patient's clinical care to ensure their holistic health and individual needs are met.



7. Questions

Please ask the doctor if you do not understand any aspect of this patient information sheet or if you have any questions about your proposed procedure.

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If you have further questions prior to your appointment, please contact the Cardiac Investigations department via the main switchboard of the facility where your procedure is booked.



8. Contact us

In an emergency, call Triple Zero (000).

If it is not an emergency, but you have concerns, contact 13 HEALTH (13 43 25 84), 24 hours a day, 7 days a week.