

CLINICAL EVALUATION OF THE DEGREE OF TOLERANCE TO THE PHYSICAL EFFORT (ERGOMETER/TREADMILL)

If there is no doubt that you have a coronary artery disease or if there has already been diagnosed, with this stress test your referring doctor will be able to assess the presence and the severity of the blockage of these arteries.

So, if you have had angioplasty or coronary artery bypass graft, this test will monitor the success of the procedure and decide about an appropriate rehabilitation program for you.

What kind of equipment is used? Will I have pain?

The stress test involves a simple exercise (on a bicycle ergometer/treadmill), while your body is monitored by several instruments such as an electrocardiograph (ECG), a device for measuring blood pressure.

The ECG records the electrical activity of the heart that receives the information from the electrodes that are applied on your chest and back (the contact with your skin is painless).

The apparatus for measuring the P.A. is used to maintain under constant control your blood pressure.

How is the test? What may be "too much" for me?

During the test, the doctor will gradually increase the effort, tailored to your ability to exercise, which will occur every 2 or 3 minutes; the doctor will monitor closely the performance of your heart through the tools above mentioned.

Any changes on the electrocardiogram and blood pressure, as well as any shortness of breath or chest pain, will be valued by the doctor as possible signals of a coronary obstruction.

How long will the test take?

Usually the exercise test lasts 6 to 10 minutes, anyway the doctor will follow you very closely and you can stop the test if you think that is no longer safe for you.

What the test result might mean for me?

If there are detected signs of coronary artery disease, your doctor may suggest you further investigation or a change of treatment. If your test is negative (no change in the ECG, blood pressure normal behavior), your risk of having coronary artery disease is very low.

Exercise testing has a good sensitivity; this means that could detect coronary artery disease, when present, in approximately 90% of cases.

If you want further explanation you can discuss with your doctor.

The diagnosis of coronary artery disease will be made only according to the test results.

**INFORMED CONSENT SHEET FOR THE EFFORT TEST
ERGOMETER / TREADMILL**

Before the test I had a talk with the doctor about the specific modalities of the execution of the examination.

I am aware that the test consists of a physical effort performed on a cycle ergometer or treadmill, that the effort will be expanded in the achievements of specific electrocardiographic and / or clinical criteria; I know that the test may be interrupted if I am particularly tired and I am aware that during the test will be continuously measured the heart activity and the blood pressure at regular intervals.

I am also aware that:

- Disorders that might arise during the investigation (chest pain, difficulty breathing, palpitations, feeling faint);
- The athlete must notify the medical staff as soon as these symptoms are present;
- The risks inherent in the survey, even if prescribed and conducted in accordance to the most modern medical knowledge;
- The possible diagnostic alternatives;
- The right to the withdraw my consent at any time without any explanation;

I was finally informed that NON-PERFORMANCE SURVEY INDICATES:

- A) a lack in the clinical and diagnostic process and consequently a weak formulation in the final diagnosis;
- B) the inability to establish a proper treatment .

Before the test I have been examined / the child has been examined by the doctor who found that there are no conditions under which the test should be postponed or suspended.

The equipment and the staff will be readily available to deal with any emergency.

I have read and fully understood the above information and I declare that I got answers at any request of clarification.

In order to:

1. Ascertain the state of the cardiovascular system;
2. Define the nature of cardiac accused;
3. Decide on further clinical and therapeutic procedures with the specific knowledge derived from this survey.

Implemented the received information I

AGREE

DO NOT AGREE

To the execution of the above-mentioned exam

Date,

Athlete's signature

Stamp and doctor's signature

TO BE SIGNED INCASE OF MINORS

Parent: Surname name: _____ date of birth _____ Signature _____

Tutor: Surname name: _____ date of birth _____ Signature _____

AGREEMENT REVOCATION

I _____

born in _____ on the ____/____/____

REVOKE the agreement given on the _____ to the execution of the above-mentioned exam

Tricesimo,

Patient's or tutor's signature in case of minor

Stamp and doctor's signature