

Consent Form: Dobutamine Stress Echocardiogram

Purpose of the Test

Dobutamine Stress Echocardiography (DSE) measures how your heart responds to a stress test using the drug dobutamine, under medically supervised conditions. The test is an alternative to treadmill stress echocardiography in patients unable to exercise on a treadmill. Dobutamine is an adrenaline-like medicine administered via an intravenous that causes your heart to pump harder and faster and thereby producing similar effects on the heart as exercise does. The test is carried out to assist in making a diagnosis of significant coronary artery disease or to evaluate the suitability of any medical therapy or operation.

The Test

An echocardiogram is an ultrasound of the heart. Images of the heart will be taken at rest along with a standard ECG. Under supervised conditions, including continuous ECG, pulse rate and blood pressure monitoring, dobutamine is administered via an intravenous in your arm. The dobutamine will make your heart pump faster and harder and as the test progresses you may become aware of these normal sensations. Another drug, atropine, may also be used to increase the heart rate. If there are any changes of concern the doctor will stop the test. It is important that you let the doctor know if you develop chest pain or other symptoms. A second, third and possibly a fourth echocardiogram will be taken during and soon after the test to look for changes in the heart wall function associated with coronary artery disease. Further images and ECG tracings will be recorded until your heart returns to its resting state.

The equipment for the test is the latest state-of-the-art echocardiography equipment. The Heart Centre is committed to excellence and safety. It is our policy to follow the Safety and Performance Guidelines for Pharmacologic Stress Testing in Conjunction with Clinical Cardiac Imaging Procedures of the Cardiac Society of Australia and New Zealand.

Risks associated with the test

Dobutamine Stress Echocardiography is usually performed in patients with known or suspected coronary artery disease. The risks are approximately the same as sudden or unaccustomed exercise, except the amount of exercise the heart performs is carefully controlled and we take into account any medical problems you may have or symptoms you

may develop. Despite the relative safety the test has a small but definite risk of fatal and non-fatal cardiac complications.

Serious potential complications include the possibility of heart rhythm disturbance requiring resuscitation, the development of heart failure or prolonged angina (heart pain), or the development of a myocardial infarct (heart attack). The risk of one of these occurring is approximately 2 or 3 in 10,000 tests. Unfortunately as previously stated, there is also a very small risk of death occurring as a result of a dobutamine stress echocardiogram. The chance of this in the average patient is approximately 1 in 10,000 although the risks both of complications and death may be higher in patients already known to have severe coronary artery disease. Minor side effects of the test may include nausea, anxiety, tremor, dizziness, urgency and chills. These are usually temporary and quickly go at the end of the test. Please note that emergency equipment and trained personnel are immediately available to deal with any complications that may arise.

Consent to the Test

Before proceeding with the test we need your signed consent. The signing of this form is voluntary and you are free to deny consent if you so desire. By signing below you are consenting to undergo the Dobutamine Stress Echocardiogram, and you understand both the test and its purpose, and have been made aware of the risks associated with the test.

Printed Name and address

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Date of Birth.....

Signed..... **Date**.....

Stress Testing Personnel

Printed Name.....

Signed..... **Date**.....