

McLaren Thumb Region Cardiopulmonary Department

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Chemical Stress Test

Lexiscan/ Dobutamine/Dipyridamole Tech Sheet Tech Initials: _____

Patient: _____

Gender: Male Female

Date of Exam: _____

Patient ID#: _____

Age: _____

Date of Birth: _____

Ordering Physician: _____ Family Dr.: _____

Indication of Nuclear Stress test: _____

Protocol Type: Lexiscan Dobutamine Dipyridamole
 /c low level stress Dobutamine Stress Echo

Height: _____ inches

Weight: _____ lbs

Allergic to: _____

Previous exam? Yes No

Medications taken today Yes No

Specific reason for not exercising: _____

Resting HR: _____ BPM 100% Target Heart Rate _____ BPM

Peak HR: _____ BPM 85% Target Heart Rate _____ BPM

Resting BP: _____ / _____ % Age

Peak BP: _____ / _____

Symptoms: _____

Aminophylline: not required required _____ mg. IV infusion

Lexiscan _____ mg Dobutamine _____ mcg

Amt. Infused _____ cc _____ mg Time Infused _____ min _____ sec

Atropine _____ mg _____ times

Lopressor _____ mg Administered by: _____

Cardiologist to complete from here down

EKG Interpretation:

1. Baseline Electrocardiogram: _____
2. EKG Changes: _____
3. Arrhythmias: _____
4. Good Poor Hemodynamic response to Medication

Echocardiogram Interpretation: _____

Stress Test Conclusion:

1. Negative Positive Indeterminate for induced Ischemia
2. Correlate with Nuclear Findings

Interpreting Physician: _____