



## **Patient Instructions for Myocardial SPECT Scan**

This purpose of this exam is to measure the blood flow to the heart muscle from the coronary arteries and measure the function of the heart. This test will take approximately **3 hours**.

1. Wear comfortable 2 piece clothing and comfortable walking shoes.
2. Nothing to eat or drink (except water) **for 6 hours prior to appointment**.
3. **Do not smoke or have caffeine for 24 hours prior to appointment. This includes chocolate, tea, cola, coffee, and even decaffeinated coffee.**
4. Do not take medications that are Beta Blockers or Calcium Channel Blockers for **24 hours**. List of medications are on next page of instructions.
5. Pain medications can be taken if tolerated on an empty stomach.

### **Explanation of Test:**

A brief review of the procedure and your cardiac history will be done. An I.V. will be placed in a vein in your arm. A radioactive tracer will be injected into the I.V. This is not an iodine based dye, there are no side effects to this tracer and it will not make you feel different. 30-45 minutes later a scan of the heart is taken with a SPECT camera. The scan will take approximately 20 minutes.

Next, you will have a Stress test. Your EKG and blood pressure will be monitored by a physician, exercise physiologist or nurse during the stress test. You will either walk on a treadmill or be given a stress test medication if you are unable to walk. A second radioactive tracer will be injected during the stress test. A snack will then be provided. You are welcome to bring your own snack if you have dietary restrictions. 30-45 minutes later a second scan is taken with a SPECT camera. This will also take approximately 20 minutes.

**The test results will be available in 5-7 business days, maybe longer.  
Someone will call you with the results.**

**Your medication for the test is ordered especially for you. If you need to cancel your appointment, you must call the office by 4:00 pm the day before your test. If your test is on Monday, you must call the office on Friday. You will be billed for the medication if there is not proper notice of cancellation. Please do not leave a message with the answering service.**

Please make sure your insurance information is correct and up to date. Our office will call your insurance company for pre-certification prior to your exam. If you need a referral for this test it will be your responsibility to obtain one from your Primary Care Physician.

**DATE OF TEST** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      **TIME** \_\_\_\_\_ :

If you have questions please call the office between 8 AM and 4 PM at **404-252-7970**

I have received and acknowledged the above information: \_\_\_\_\_



## **Medications to Discontinue before a Treadmill Stress Test, Nuclear Stress Test or Stress Echo**

Patients should not take any of these medications for **24 hours** prior to test.  
Please bring all of your medications with you; if needed you will be able to take those after stress test is complete.

### **Beta Blockers**

Acebutolol (Sectral, Monitan)  
Tiazac  
Atenolol (Tenormin)  
Betaxolol (Kerlone)  
Bisoprolol (Zebeta)  
Carvedilol (Coreg)  
Esmolol (Brevibloc)  
Lebetalol (Trandate, Normodyne)  
Metoprolol (Lopressor, Toprol XL, Betaloc)  
Madolol (Corgard)  
Pindolol (Visken)  
Propranolol (Inderal)  
Timolol (Blocadren)  
Lanoxin (Digoxin)  
Bystolic  
Ziac  
Sotalol

### **Calcium Channel Blockers**

Diltiazem (Cardizem, Diltia,  
Felopine (Plendil, Renedil)  
Isradipine (Dynacirc)  
Nicadipine (Cardene)  
Verapamil (Calan, Covera-HS)

### **Nitrates**

Nitropatch  
Imdur  
Ismo