

## Before Your Treadmill Test

*Please read before signing the consent form*

By signing the consent form for your treadmill test, you are telling us that you agree with these statements:

- It is my choice to have this treadmill exercise test. I understand that this test will show how well my heart is working. It may also show the reason for certain problems I am having. The results of this test will help my doctors manage my heart symptoms.
- I will let clinic staff monitor my vital signs and other symptoms during this test.
- I understand that the treadmill will increase in speed and slope every 3 minutes. At some point, I will feel very tired or have other symptoms that will make me stop the test.
- I know that this test involves some risks. These risks include changes in heart rhythm. In less than 1 in a 1,000 patients who take this test, there is risk of heart damage. This risk is higher if I take a hot shower after the test. In about 1 in 10,000 patients who take this test, there is a risk of sudden death.
- I have the right to stop the test at any time.
- I can ask that my test results not be shared with anyone else without my consent.
- I am aware that medical staff will supervise my test. They will interrupt the test if they have any concerns about my well being. They will also provide treatment for symptoms, if needed.
- All my questions about this treadmill test have been answered.



*Please read this handout before you sign the consent form for your treadmill test.*

### Questions?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

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