



STRESS-ECHO REQUISITION & REPORT

KAWARTHA CARDIOLOGY CLINIC
327 CHARLOTTE ST.

PETERBOROUGH, ON K9J 0B2

Tel: (705) 740-6888 Fax: (705) 749-9611

NAME _____

Address _____

Postal Code _____ Phone _____

Date of Birth _____ Age _____

Health Number _____

Ref. Physician _____

Requisition Date _____

Service Date _____ Time _____

STRESS-ECHO

Exercise Echo
 Dobutamine Echo

CARDIAC MEDS

INDICATIONS FOR TEST:

ATYP PAIN
 ANGINA
 POST MI. ___ WKS ___ MOS ___ YRS
 POST PTCA ___ WKS ___ MOS ___ YRS
 POST CABG ___ WKS ___ MOS ___ YRS
 BBB / Abn EKG
 EQUIVOCAL STRESS TEST
 CARDIOMYOPATHY
 VALVULAR HEART DISEASE
SPECIFY _____

DIASTOLIC DYSFUNCTION
 OTHER _____

CARDIAC CATHETERIZATION: Date _____

LV Function: Grade 1 2 3 4
N <50% 50-75% >75% 100%

L.M. _____
LAD _____
CIRC. _____
RCA _____
LAD Graft _____
CIRC Graft _____
RCA Graft _____

RESULT:

% MPHR _____
SYMPTOM _____ ECG. _____

pos pos
equiv equiv
neg neg

CATH: Available
Pending
Time to Scan sec. _____
Image Quality: Good
Adequate
Uninterpretable

ECHO

REST	EXERCISE
Norm <input type="checkbox"/>	Norm <input type="checkbox"/>
Equiv <input type="checkbox"/>	Equiv <input type="checkbox"/>
Abnorm <input type="checkbox"/>	Abnorm <input type="checkbox"/>

ABNORMAL TERRITORY

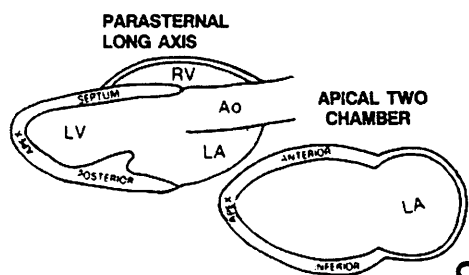
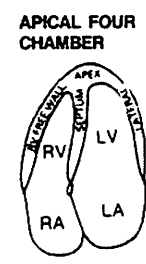
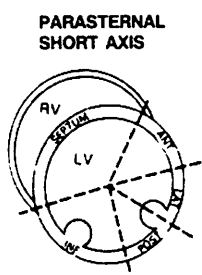
LAD Prox LAD Prox
LAD Dist LAD Dist
Cx Prox Cx Prox
Cx Dist Cx Dist
RCA Prox RCA Prox
RCA Dist RCA Dist

QUESTIONS TO BE ANSWERED BY THIS INVESTIGATION.

INTERPRETATION L.V. ESTIMATED EJECTION FRACTION Grade 1 >60% Grade 2 40-59% Grade 3 20-39% Grade 4 <20%

INTERPRETATION (See Also Ex. Test Report)

LVDD <5.7	RVD <3.0 cm	IVS THICK <1.2 cm	IVS AMP. 0.3-1.0 cm
LVSD	PA <30	PW AMP. 0.5-1.3 cm	
LA DIM. <4.0 cm	A ROOT DIM.	LVP WALL THICK <1.2 cm	LVDD
MVA	AV OPENING <4.0 cm	AO GRAD	AOV ₁
% FS 28-42		AVA	DIAM



STRESS-ECHO

STRESS-ECHO

STRESS-ECHO

SIGNATURE _____ DATE _____ STRESS-ECHO REPORT