



DELAWARE CARDIOVASCULAR ASSOCIATES

34453 King Street Row
Lewes, DE 19958
302-644-7676

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302-537-7676

**PLAIN TREADMILL
(FOR NON CARDIAC REHAB PATIENTS)**

MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

NAME _____ APPOINTMENT: _____

THIS TEST TAKES APPROXIMATELY 1 TO 1 ½ HOURS

**FAILURE TO FOLLOW THESE INSTRUCTIONS MAY REQUIRE US TO RESCHEDULE
YOUR TEST**

- 1. NO CAFFEINE OR DECAF PRODUCTS 24 HOURS PRIOR TO PROCEDURE**
2. You may drink water at any time.
3. **NO SMOKING** 2 hours prior to your test.
4. **MEDICATIONS:**
 - A. Stop all erectile dysfunction medications 24 hours prior to test
 - B. Stop any medication on list attached 48 hours prior to test.
5. Wear a 2-piece outfit (no dresses or one piece outfits, please.) Clothing should be loose and comfortable.
6. Please wear comfortable walking shoes.
7. **FAILURE TO GIVE 24 HOURS NOTICE FOR CANCELLATIONS WILL RESULT IN A \$50 FEE BILLED TO YOU, FOR ADMINISTRATIVE & MEDICATION COSTS INCURRED.**



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DRUGS TO AVOID FOR EXERCISE STRESS TESTING
(ARE NOT A REASON TO CANCEL TESTING)

CALCIUM CHANNEL BLOCKERS

ADALAT
AMLODIPINE
BEPRIDIL
CALAN/CALAN SR/CORERA HS
CARDENE

CARDURA
DILACOR (XR)/DILTIAZ T/TIAZAC
DILTIAZEM/CARDIZEM CD
DYNACIRC
FELODIPINE
ISOPTIN (SR)
ISRADIPINE
NICARDIPINE
NIFEDIPINE/NEFEDIPINE SR
NIMODIPINE
NIMOTOP
NORVASC
PLENDIL
PROCARDIA
VASCOR
VERAPAMIL/VERAMAPIL SR
VERELAN/VERELAN PM

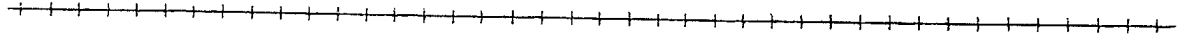
NITRATES

NITROGLYCERIN
*NITRO-DUR, NITRSOSTAT
*NITROLINGUAL PUMPSPRAY
IMDUR/MONOKET
* ISOSORBIDE MONONITRATE
ISOSORBIDE DINITRATE
*DILATRATE/ISORDIL/SORBITRATE

BETA BLOCKERS

ACEBUTOLOL/SECTROL
ATENOLOL/TENORMIN
BETAPACE/ SOTALOL
BETAXOLOL/KERLONE
BISOPROLOL/FUMARATE/
ZEBETA/ZIAC
BLOCADREN
BREVIBLOC
CARDIZEM
CARTEOLOL/CARTROL
COREG/CARVEDILOL
CROZIDE
ESMOLOL/BREVIBLOX
INDERIDE
KERLONE
LABETALOL/TRANDATE/NORMADYNC
LEVATOL
LOPRESSOR/METOPROLOL/TOPROXL/
SUCCANETE/TARTRATE
NADOLOL/CORGARD/CORZIDE
NEBIROLOL/BYSTOLIZ
NORMODYNE
PENBUTOLOL/LEVATOL
SECTRAL
TENORETIC
TIMOLOL/BLOCADREN TIMOLIDE
TRANDATE
ZEBETA
VISKEN TABS/PINDOLOL
INDERAL

♥ Delaware Cardiac Imaging Centers ♥



Silverside ♥ Glasgow ♥ Dover ♥ Lewes ♥ Milford ♥ Bethany

Patient Name _____ Age _____ Birthday _____ Date _____
Primary Care Physician _____ Ordering Cardiologist _____

EXERCISE

Baseline ECG: _____

Exercise Time _____ minutes _____ seconds METS _____ DP _____

Exercise was terminated due to _____ Exercise Tolerance _____

Resting HR _____ Maximum HR _____ % MPHR _____

Resting BP _____ Peak BP _____ mm/Hg BP response _____

During exercise () Normal ECG response to exercise
() ST depression consistent with ischemia
() ST segment abnormalities occurred not interpreted due to _____

Arrhythmias noted () _____ () NONE

This is () Positive () Negative () Non-diagnostic stress test for ischemia

ECHO

Resting ECHO _____

Stress ECHO _____

Physician Interpreting ECG: _____ Date: _____

Faxed to: _____ At: _____ along with EKG report.

Sender's Signature and date: _____

Commonly used Drinks and Foods Containing Caffeine

Coffee

Brewed drip coffee	60-180 mg/5 oz cup
Brewed percolated coffee	40-179 mg/5 oz cup
Instant coffee	30-190 mg/5 oz cup
Decaffeinated brewed coffee	2-5mg/5 oz cup
Decaffeinated instant coffee	1-5 mg/5 oz cup

Tea

Brewed commercial tea	20-90 mg/5 oz cup
Brewed imported tea	25-110 mg/5 oz cup
Instant tea	2-20 mg/5 oz cup
Iced tea	67-76 mg/12 oz cup

Cocoa

Chocolate milk

	2-20mg/5 oz cup
	25-110 mg/8 oz cup

Food

Milk chocolate	1-15 mg/1 oz
Dark semisweet chocolate	5-35 mg/1 oz
Bakers chocolate	average 26 mg/1 oz
Chocolate syrup	average 4 mg/1 oz
Chocolate cake	13.8 mg/92 g serving (1/16 of a 9in cake)
Chocolate candy	7.7 mg/1 oz bar
Candy, chocolate covered	2.8 mg/1 oz bar
Chocolate ice cream	4.5 mg/ 2/3 cup
Chocolate pudding, instant	5.5 mg/1/2 cup
Nut fudge brownie	7.7 mg/1 1/4 oz

Soft drinks

Coca-cola	45.0 mg
Cola, decaf	trace-0.18 mg
Dr. Pepper	39.6 mg
Dr. Pepper, sugar free	39.6 mg
Jolt Cola	70.0 mg
Mellow Yellow	54.0 mg
Mountain Dew	54.0 mg
Mr. Pibb	40.5 mg
Pepsi Cola	38.4 mg
Diet Pepsi	36.0 mg
Tab	46.5 mg

Some OVER-THE-COUNTER Drugs that contain Caffeine

Anacin	32 mg
Excedrin	65 mg
No Doz	100 mg

Prescription Meds Containing Caffeine

Cafergot (all forms)	100 mg
Darvon Compound	32.4 mg
Fiorinal	40 mg
Synalgos- DC	30 mg
Wigraine (all forms)	100 mg

Prescription Meds containing THEOPHYLLINE*

Theo-24	Theoclear LA	Theovent Long-Acting
Bronkodyl	Slo-bid Gyrocaps	Sustaire
Theospan-SR	Uniphyll	Theobid Jr. Duracap
Theo-Dur Sprinkle	Theophylline S.R.	Elixophyllin SR
Slo-Phylline Gyrocaps	Constant-T	Quibron-T/SR
Theochron	Theolair-SR	Theobid Duracap
Theo-Dur	Aerolate	Respbid

**See PDR for more complete list.