

STRESS ECHOCARDIOGRAPHY

Patient's Id: 3032
Patient's Name: Mr. xxxxxxxx
Ref. By: xxxxxxxxxxxxxxxx
26/04/2012

Reg. Date: 23/04/2012
Age / Sex: 54 Yrs / M
Reporting Date:

| | | |
|----------------------------|---|--|
| Protocol | : | DOBUTAMINE + ATROPINE (0.3mg) |
| Indication | : | CAD ASSESSMENT |
| Medication | : | No beta-blocker/calcium channel blocker /digoxin/ivabradin/AAD/Nitrates |
| Target Heart Rate | : | 166 bpm |
| Heart Rate Achieved | : | 153 bpm (ECGs attached) |
| Percentage of THR Achieved | : | 92 % |
| Maximum BP | : | 110/70 mmHg |
| Maximum Dose given | : | 40 micgm/Kg/min |
| Reason for termination | : | Test Completion |

Contd.....

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Reg. Date: 23/04/2012

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M

Ref. By: xxxxxxxxxxxxxxxxx

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Baseline echocardiography revealed normal LV motion with resting global LVEF was 55-59 %.
{P.S. Detailed baseline report}

RWMA were assessed PLAX, PSAX Apical 4 chamber and 2 chamber views.

RWMA:

LAD region:

NO RWMA SEEN AT BASELINE OR DURING STRESS / RECOVERY

RCA region:

NO RWMA SEEN AT BASELINE OR DURING STRESS / RECOVERY

Cx region:

NO RWMA SEEN AT BASELINE OR DURING STRESS / RECOVERY

There was normal systolic thickening.

LVEF increased to 75 %

COMMENTS:

- No angina / presyncope / hypotension during protocol.
- PATIENT HAD RUNS OF JUNCTIONAL RHYTHM INTERMITTENTLY DURING THE INFUSION.
- NSR ACHIEVED DURING PEAK DOSE.

IMPRESSION:

Dobutamine stress echocardiography is **Negative** for inducible myocardial ischemia.

DR xxxxxxxxxxxxxxxxx
MD, DM (CARDIOLOGY)
Consultant Cardiologist