



PACIFIC COAST
CARDIOLOGY
& RESEARCH

PATIENT PRE-TEST INSTRUCTIONS:

Echocardiogram

No Prep needed for this test.

*****YOU SHOULD NOT STOP ANY MEDICATIONS WITHOUT CONTACTING YOUR PRESCRIBING DOCTOR. USE THE FOLLOWING LIST IN ORDER TO SPEAK WITH YOUR DOCTOR:**

Commonly Used Beta Blockers: Blocadren (timolol), Coreg (carvedilol), Inderal (propranolol), Lopressor (metoprolol), Tenormin (atenolol), Toprol –XL (metoprolol), Trandate (labetalol), Visken (pindolol), Bystolic.

Caffeinated Food and Beverages: Coffee including “decaffeinated”, teas, cocoa and any food containing cocoa (chocolate), and soft drinks.

Echocardiogram

An echocardiogram (also called an echo) is a type of ultrasound test that uses high-pitched sound waves that are sent through a device called a transducer. The device picks up echoes of the sound waves as they bounce off the different parts of your heart. These echoes are turned into moving pictures of your heart that can be seen on a video screen.

Why It Is Done

This test is done to:

Look for the cause of abnormal heart sounds (murmurs or clicks), an enlarged heart, unexplained chest pains, shortness of breath, or irregular heartbeats.

Check the thickness and movement of the heart wall.

Look at the heart valves and check how well they work.

See how well an artificial heart valve is working.

Measure the size and shape of the heart's chambers.

Check the ability of your heart chambers to pump blood (cardiac performance). During an echocardiogram, your doctor can calculate how much blood your heart is pumping during each heartbeat (ejection fraction). You might have a low ejection fraction if you have heart failure.

Detect a disease that affects the heart muscle and the way it pumps, such as cardiomyopathy.

Look for blood clots and tumors inside the heart.

Look for congenital heart defects or to check the effectiveness of previous surgery to repair a congenital heart defect.

Check how well your heart works after a heart attack.

the specific cause of heart failure.

Look for a collection of fluid around the heart (pericardial effusion) or a thickening of the lining (pericardium) around the heart.

How To Prepare

You do not need any special preparation for a transthoracic or Doppler echocardiogram.

How It Is Done

You will need to remove any jewelry and clothes above your waist (you may be allowed to keep on your underwear if it does not interfere with the test). You may be given a cloth or paper covering to use during the test.

You will lie on your back or on your left side on a bed or table. Small metal discs (electrodes) will be taped to your arms and legs to record your heart rate during the test. A small amount of gel will be rubbed on the left side of your chest to help pick up the sound waves. A small instrument (transducer) that looks like a microphone is pressed firmly against your chest and moved slowly back and forth. This instrument sends sound waves into the chest and picks up the echoes as they reflect off different parts of the heart. The echoes are sent to a video monitor that records pictures of your heart for later viewing and evaluation. The room is usually darkened to help the technician see the pictures on the monitor.

At times you will be asked to hold very still, breathe in and out very slowly, hold your breath, or lie on your left side. The transducer is usually moved to different areas on your chest that provide specific views of your heart.

The test usually takes from 30 to 60 minutes. When the test is over, the gel is wiped off and the electrodes are removed.

Risks

There are no known risks from a transthoracic or Doppler echocardiogram. During a transthoracic echo, the technician may have to press hard on your chest with the transducer. Tell the technician if you feel any pain or discomfort.

Results

Results are usually available within 48 hours.