



## CARDIAC PET-CT WITH MPI & MBF SCAN

### *Patient Instructions and Consent*

**ALL CARDIAC PET/CT IMAGING IS PERFORMED AT:**

**100 Rice Mine Road Loop, Suite 101**

**Tuscaloosa, AL 35406**

Test Date: \_\_\_\_\_ Arrival Time: \_\_\_\_\_

### What is it

A Cardiac PET (Positron Emission Tomography)/CT scan is a non-invasive advanced heart imaging test that uses a small amount of a short-acting radioactive tracer, along with a specialized camera/scanner, to measure blood flow to your heart muscle at rest and again under stress. The level of radiation is low — generally lower than a traditional nuclear stress test — and is not associated with any known immediate side effects. A brief low-dose CT scan is taken as part of the study to help produce clear, accurate images. The scan looks for areas of poor blood flow or damage (prior heart attacks), assesses whether prior stents or bypass grafts are working as they should, and evaluates whether your heart is healthy enough for non-cardiac surgery or exercise.

- Decreased blood flow can indicate a blockage in one or multiple arteries in your heart.
- PET also measures the actual amount of blood flowing to your heart muscle (blood flow reserve), which can identify problems in the small vessels that other tests may miss.

The test typically takes 45 minutes to 1½ hours. You will be monitored throughout.

### About Your Rubidium PET Scan

Rubidium-82 is a tracer used to show blood flow to your heart muscle. It is given through an IV in your arm. Your body handles it much like potassium, so healthy heart muscle picks it up quickly and areas with reduced blood flow show up differently on the images.

Rubidium-82 breaks down very fast — half of it is gone about every 76 seconds — so it clears from your body within minutes and the radiation dose is low compared to most other heart scans.

No adverse drug reactions to the rubidium tracer itself have been reported in published literature or post-marketing surveillance. Any side effects you may feel during the test, such as flushing, shortness of breath, or a brief change in heart rate, come from the stress medication given as part of the study, not from the tracer.

### Possible side effects — regadenoson (Lexiscan) stress agent

The stress agent used for this test is regadenoson, sold as Lexiscan. It is given as a single injection through the IV. As noted above, the side effects below come from this medication rather than from the rubidium tracer. Most begin within a minute or two of the injection and pass quickly.

#### Common — reported in 5% or more of patients

Shortness of breath or an urge to breathe deeply • headache • flushing • chest discomfort • chest pain • angina or changes on the ECG • dizziness • nausea • abdominal discomfort • altered or metallic taste • feeling hot

#### Less common



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A drop in blood pressure or, in some patients, a rise in blood pressure • slow heart rate or heart block • palpitations or irregular heartbeat • tingling or numbness • neck, jaw or throat discomfort • back, arm or leg discomfort • dry mouth, vomiting or diarrhea • feeling jittery • generally feeling unwell

### Rare but serious

- Wheezing, bronchospasm or difficulty breathing. This is more likely if you have asthma or COPD — please tell us before the test and bring your rescue inhaler.
- Seizures. Regadenoson can lower the seizure threshold, and new or recurrent seizures have occurred after it is given. Please tell us if you have ever had a seizure.
- Fainting, transient ischemic attack (TIA) or stroke.
- Heart attack, dangerous heart rhythms or cardiac arrest.
- Allergic or hypersensitivity reactions, including rash, hives, swelling and throat tightness, and rarely a severe whole-body reaction (anaphylaxis).

*A reversal medication is kept immediately available whenever the stress agent is used, and cardiac resuscitation equipment and trained personnel are present throughout the test. Your heart rhythm and blood pressure are monitored the entire time. Tell the staff right away if you feel unwell at any point.*

### What happens during the test

- Step 1** On arrival your medical history is taken, medications are reviewed, an IV is started and ECG electrodes are placed on your chest.
- Step 2** You will lie flat on your back with your arms raised above your head. A short low-dose CT scan (a few seconds) is first acquired as a reference.
- Step 3** Resting Images: the tracer is given through the IV and imaging begins right away (about 5–10 minutes).
- Step 4** Stress Images: a medication that simulates stress on the heart is given through the IV, followed by a second dose of tracer, and the stress images are taken (about 5–10 minutes). You may feel flushed, warm, short of breath, or have a headache or chest pressure for a minute or two. This is expected and passes quickly.
- Step 5** You may eat and drink afterward. You will be monitored for another 15–30 minutes and then are free to go home. *Test results typically take 2–3 days.*

### Test Preparation: Non-compliance with these instructions may result in your test being rescheduled

- NO CAFFEINE for at least 12 hours before — 24 hours preferred. Caffeine blocks the stress medication and can invalidate the results.
- NO COFFEE, TEA or SODA — caffeinated OR decaffeinated.
- NO CHOCOLATE (cocoa products in candy, cakes, brownies, pudding, chocolate milk, Ensure).
- NO ENERGY DRINKS for at least 12 hours before — 24 hours preferred.
- NO FOOD for at least 6 hours before the test. Water is permitted and encouraged.
- NO TOBACCO or NICOTINE 12 hours before (no smoking, chewing or vaping).
- NO jewelry around your neck and no metal buttons on your shirt.
- NO lotions or powder on your chest.

### Medications to hold prior — please read carefully

| Medication                           | Hold for |
|--------------------------------------|----------|
| Aggrenox / Persantine (dipyridamole) | 48 hours |
| Theophylline / aminophylline         | 48 hours |



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|-----------------------------------------------------------------------|----------|
| Excedrin Migraine, Vivarin, NoDoz, other caffeine-containing products | 24 hours |
| Viagra / Levitra                                                      | 24 hours |
| Cialis                                                                | 7 days   |
| Nitrates: Ranexa, Imdur, nitroglycerin tablets                        | 24 hours |

### Please do

#### Take your morning blood pressure medications as prescribed.

Do not hold them unless they appear in the table above. The test cannot be performed if your blood pressure is greater than 200/90.

- Hydrate well the day before to make IV access easier.
- Beta blockers: this test uses a medication stress agent rather than a treadmill, so beta blockers usually do NOT need to be held. Take yours as prescribed unless specifically told otherwise.
- Diabetic medications: hold any long-acting insulin if you are not eating. You can take them as soon as you eat after the test.
- Tell us if you are pregnant, think you may be pregnant, or are breast-feeding.
- Tell us if you have asthma, COPD or use inhalers, and bring your rescue inhaler with you.
- Tell us if you have ever had a seizure, or take medication for seizures.
- Tell us if you have a pacemaker, implantable defibrillator (ICD) or other implanted cardiac device.

### The scanner

You will lie flat on your back on a scan table that moves slowly through a short, open ring. It is not a long, enclosed tunnel. For this test you need to be able to:

- Get on and off the scan table (a step and staff assistance are available).
- Lie flat on your back with your arms raised above your head.
- Hold still in that position for approximately 30–45 minutes.

The scan table has a weight limit of 551 lbs and the scanner opening is 76 cm (about 30 inches) across. If you are unable to do the above, you are not a candidate for this test at the Rice Mine Road Loop location — please call the office so the test can be rescheduled to another location.

Please wear comfortable, non-restrictive clothing with no metal at the chest or waist (no underwire bras, zippers, snaps or belt buckles at chest level). Do NOT wear overalls, coveralls, full-length slippers, dresses or tight undergarments that could interfere with testing procedures.

### Visitors

Due to the size of our waiting room designated for this test, we ask that you do not bring visitors unless absolutely necessary. All visitors will be required to wait out front in the main lobby for the duration of the test. Only patients will be allowed in the testing waiting area. We appreciate your understanding and cooperation.

### Prior use of the stress medication — to be completed by the patient

Please answer these questions before your test. If you have had a reaction to a stress medication in the past, we need to know before anything is given to you.



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|                                                                                                                        |                                                                                                                 |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| Have you ever received regadenoson (Lexiscan), adenosine, or dipyridamole (Persantine) for a heart stress test before? | <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>Not sure</b> |
| If YES — did you have any reaction to it?                                                                              | <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>                                          |
| If you had a reaction, approximately when was it?                                                                      | _____                                                                                                           |
| Did you require treatment or emergency care for that reaction?                                                         | <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>                                          |

If you had a reaction, please describe what happened (for example: rash or hives, swelling, wheezing or trouble breathing, chest pain, fainting, seizure, severe headache, prolonged symptoms):

\_\_\_\_\_

### If you answered YES to a previous reaction

Tell the technologist before the test begins. Do not receive the stress medication until a physician has reviewed your history. An alternative approach may be available.

Patient / representative initials: \_\_\_\_\_ Reviewed by staff: \_\_\_\_\_ Date: \_\_\_\_\_

### Consent

I, \_\_\_\_\_, have received and understand these instructions and I consent to have the test performed by Alabama Heart & Vascular Medicine at 100 Rice Mine Road Loop, Suite 101, Tuscaloosa, AL 35406.

I, \_\_\_\_\_, understand that if I do not follow these instructions fully and am not able to perform the test, I am responsible for the cost of medication (\$250).

### Cancellation policy

I, \_\_\_\_\_, understand that if I do not cancel at least 2 business days prior to the test, I am responsible for the cost of medication (\$250).

\_\_\_\_\_  
**Patient Signature**

\_\_\_\_\_  
**Date**

*Prep windows follow the ASNC imaging guidelines / SNMMI procedure standard for PET nuclear cardiology procedures. Site to verify tracer-specific details against the package insert and with the Nuclear/PET Physician Authorized User before use. Revised 8/27/26.*