



Date: _____

REGULAR GRADED EXERCISE TEST INSTRUCTIONS (RGXT)

Dear _____, You are scheduled for a

Regular Stress Test on _____ with Dr. _____.

Please arrive **10 minutes early to register** in the front lobby of Campbell County Memorial Hospital.

You will walk on a motorized treadmill that will increase in speed and elevation. Your blood pressure and EKG will be monitored to determine your body's response to the increased workload. The procedure will take approximately 1 hour.

MEDICATIONS:

DO NOT TAKE THE FOLLOWING MEDICATIONS AS THEY MAY ALTER THE TEST:

Do not take Heart or Blood pressure medications the morning of the test: _____

Do not take Viagra or Levitra 24 hours before the test

Do not take Cilalis 72 hours before the test

Do not take medications containing caffeine 12 hours before your test (fiorinal, Excedrin, no doz, etc.)

Please discuss Asthma medications with your physician before the test (bring inhalers with you)

Pleas discuss Diabetes medications (insulin and oral med) with your physician before the test.

Please bring list of your current medications with you

Routine medications may be resumed after the test is completed unless otherwise directed by your physician.

24 HOURS BEFORE THE TEST: AVOID TOBACCO, ALCOHOL

12 HOURS BEFORE THE TEST: AVOID CAFFEINE (coffee, tea, colas, chocolate and decaffeinated beverages)

FOOD: Eat breakfast and drink water. **DO NOT EAT after _____,**

APPAREL: Comfortable short sleeve shirt, pants and **comfortable walking shoes. No sandals, boots or flip flops.**

GOOD NIGHT'S REST is essential for your performance in the Stress Test laboratory.

If you have any questions or concerns, please feel free to call us at **688-2330**, Monday through Friday 8AM to 5PM.