PIONEER CARDIOVASCULAR CONSULTANTS

MEHUL SHAH MD, RAJIV ASHAR MD, DHAVAL SHAH MD, ADHIRATH DOSHI MD

TREADMILL STRESS TEST

Patient Name:	
You are scheduled for the following test on:	Check in time:
	3 Tempe, AZ 85283 480-345-0034 Sun Lakes, AZ 85248 480-345-0034
Preparations	for your test:
 Please eat a light, low fat meal 2 hours prior to test. Please increase your water intake 2 days prior to test. Please arrive 10 minutes prior to scheduled testing time. Allow 30 minutes for testing. Please wear closed toed shoes and comfortable clothing for exercise 	
Please stop the following medications 24 hours prior:	Please stop the following medications 48 hours prior:
Your appointment for results is scheduled on	at
I acknowledge that I have received and understand t	hese instructions.
Print Name Si	gnature Date