

Cardiac Sarcoid PET-CT, Consent and Checklist

CARDIAC SARCOID PET-CT INFORMATION and PREPARATION

IMPORTANT: PLEASE READ CAREFULLY AND FOLLOW INSTRUCTIONS CLOSELY

This is a two-part test, usually undertaken over two consecutive days. Small amounts of short-lived radioactivity are used to detect abnormalities within cells in your body, particularly your heart.

Part 1: A radioactive cardiac perfusion tracer will be injected into a vein in your arm; it has no side effects, and you will experience no unusual sensations. After approximately 30 minutes, a scan of your heart will be taken (15 mins).

Part 2: A radioactive glucose tracer will be injected into a vein in your arm; it has no side effects, and you will experience no unusual sensations. Following the injection, there is a period

of rest in a quiet room for 1 hour before taking the PET images (25-35 mins). The total time taken for this procedure is 2-3 hours.

You are able to leave soon after each appointment. You will remain radioactive for a short period of time, and contact with small children and pregnant women should be limited for 4 hours from the time of each injection.

The report will be sent electronically to your referring doctor when complete.

For additional information about PET-CT please visit our website www.envisionmi.com.au

Please notify us at the time of booking if you are diabetic, as there may be extra requirements to ensure your blood sugar levels are optimal.

PREPARATION

- 1. Follow a high fat, low carbohydrate diet for 24 hours prior to your appointment.
- 2. You must fast from all food and drink (except plain water) for at least 15 hours prior to your appointment. You may take essential medications, but do not take vitamins, throat lozenges etc.
- 3. Drink 4 glasses of water during the hour prior to your appointment (1 glass every 15 minutes). You may go to the toilet as necessary.
- 4. Wear warm, metal-free clothing and remove jewellery.

Have you had any scans relevant to your current condition? i.e. PET/ MRI/CT					YE	S	NO
If YES, where? Envision	□ PRC	□ SKG	□ SCGH/FSH	Other _			
When were your diagnosed with your condition?							
Do you have diabetes?					YE	S	NO
If YES, do you take insulin?	YES	NO	Do you tak	e tablets?	YE	S	NO
Do you take any blood thinning medications, or have a blood clotting disorder?					YE	S	NO
Are you currently taking steroids?					YE	S	NO
Have you had any recent infections?					YE	S	NO
If YES, when and in which body part?							
Do you, or have you ever smoked?					YE	S	NO
If YES, how many a day and for how many years?							
I have read this form, understand the purpose of the tests, and consent to the test being performed.							
Patient Name							
Patient Signature (or signature of legal guardian)						Date	
Signature of MIT/Radiologist			Signature of MIA/Nurse				
OFFICE USE ONLY							
PATIENT ID CHECKLIST							
	DOB confirmed		GENDER confirmed				
PROCEDURE CHECKLIST							
YPE confirmed ☐ CONSENT confirmed ☐ PREP Confirmed ☐ Signature of EMI Staff							



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CARDIAC SARCOID PET-CT DIET

IMPORTANT: PLEASE READ CAREFULLY AND FOLLOW INSTRUCTIONS CLOSELY

You must follow a high fat, low carbohydrate diet the entire day before your appointment. You must then fast from all food and drink for at least 15 hours prior to your appointment. Plain water is allowed.

ALLOWED FOODS:

- Any unprocessed meat, seafood, eggs
- Butter, margarine, cream, vegetable oils
- Unprocessed cheese (i.e. not slices)
- Non-starchy vegetables asparagus, avocado, bok choy, broccoli, cabbage, capsicum, celery, cucumber, eggplant, lettuce, mushrooms, onions/shallots, spinach, squash, tomatoes, turnips, zucchini
- Nuts
- Coffee/tea (no milk), herbal tea

FORBIDDEN FOODS:

- No sugar/sweeteners in any form
- No pasta, bread, cereal, rice or legumes
- No potatoes, pumpkin, corn, peas, carrots
- No processed meats (salami, etc.)
- No fruit
- No milk
- No alcohol
- No chocolate/lollies or chewing gum



Main office

178 Cambridge Street (opp. St John of God, Subiaco)
(Free parking at rear of building)

MRI • CT • X-RAY • ULTRASOUND • NUC MED • DENTAL

Hours of Operation

Monday to Friday 8.30am – 5.00pm

Saturday 8.30am – 3.00pm (MRI only)

(MRI is available out of hours Mon - Thurs)

Tel: (08) **6**382 3888 Fax: (08) **6**382 3800

Email: bookings@envisionmi.com.au