**Reason for test:**

- (circle)
  - Acute Chest Pain
  - Lung CA
  - Endometrial CA
  - Hodgkin's Lymphoma
  - Mesothelioma
  - CHF
  - Breast CA
  - Prostate CA
  - Non-Hodgkin's Lymphoma
  - Multiple Myeloma
  - Cardiomyopathy
  - Ovarian CA
  - Pancreatic CA
  - Lymphoma
  - CA-other
  - Valve disease
  - Bladder CA
  - Osteosarcoma
  - Leukemia
  - Other
  - Pre-heart transplant

**PLEASE CHECK THE FOLLOWING**

- History of MI
  - Yes
  - No
  - Date

- History of Angiography
  - Yes
  - No
  - Date

- History of PTCA
  - Yes
  - No
  - Date

- History of Cardiac Surgery
  - Yes
  - No
  - Date
  - Bypass
  - Heart Transplant
  - Aortic Valve Mitral Valve

**RISK FACTORS**

- Hypertension
  - Yes
  - No

- Diabetes
  - Yes
  - No

- Insulin
  - Yes
  - No

- High Cholesterol
  - Yes
  - No

- Smoking
  - Yes
  - No

- Family history of coronary artery disease (CAD)
  - Yes
  - No

**SYMPTOMS**

- History of chest pain in past 12 months?
  - Yes
  - No

- Does it occur in center of chest?
  - Yes
  - No

- Does it go away with rest or nitroglycerin?
  - Yes
  - No

- Experience shortness of breath?
  - Yes
  - No

- Admitted for chest pain or equivalent
  - Yes
  - No

**Brief history:**

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**ACUTE USE OF SESTAMBI** (A form of stress test, a Sesatmbi scan is a cardiac study that measures blood supply to the heart) (ER OR NON-ER):

- Primary MD or Cardiologist (first and last name; city or FAX # if non-Cedars-Sinai):
- Chest pain: Intermittent or Constant (circle one)
- Duration of chest pain: # Weeks Days Hours Minutes Seconds (circle one, fill in #)
- Chest pain during SESTAMBI injection?
  - Yes
  - No

  If no, how long before sestambi injection did chest pain resolve:
  - # Weeks Days Hours Minutes Seconds (circle one, fill in #)

- Did the patient take / receive nitroglycerin before sestambi injection?
  - Yes
  - No