**A. Interpreter / cultural needs**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td>An Interpreter Service is required?</td>
<td>☐</td>
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<tr>
<td>If Yes, is a qualified Interpreter present?</td>
<td>☐</td>
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<td>A Cultural Support Person is required?</td>
<td>☐</td>
<td>☑</td>
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<tr>
<td>If Yes, is a Cultural Support Person present?</td>
<td>☐</td>
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</tbody>
</table>

**B. Procedure**

The following will be performed (Doctor/doctor delegate to document – include site and/or side where relevant to the procedure)

- The heart stops, requiring treatment with medications and/or a temporary pacing wire.
- An allergy to injected drugs, requiring further treatment.
- Minor pain, bruising and/or infection from the IV cannula. This may require treatment with antibiotics.
- An ongoing severe chest pain, requiring treatment with medications.
- A fast heart beat; this may require medications and/or further treatment.
- Heart attack.
- The heart stops, requiring treatment with medications and/or a temporary pacing wire.
- People whose kidneys are damaged (known as ‘Renal Failure’) cannot remove MRI contrast from the body. This may lead to a very rare disorder called Nephrogenic Systemic Fibrosis (NSF). NSF is a condition that results in scarring or thickening of the skin and tissues throughout the body. This scarring can lead to a tightening of muscle, tendons, ligaments, or skin that prevents normal movement and function. This condition is severely disabling and may result in death.

**C. Risks of the procedure**

In recommending a MRI Cardiac Stress Perfusion Study, the doctor believes the benefits to you from having this procedure exceed the risks involved.

The risks and complications with this procedure can include but are not limited to the following.

The main risks of this procedure are associated with the drugs that are used.

**Common risks and complications of Adenosine include:**

- No known common risks of Adenosine.

**Less common risks and complications of Adenosine include:**

- Severe shortness of breath; this may require treatment with medications.
- Ongoing severe chest pain, requiring treatment with medications.
- A fast heart beat; this may require medications and/or further treatment.
- Heart attack.

**D. Risks of MRI Contrast for patients with renal impairment**

**Specific Risks** of MRI contrast to patient’s identified as having Renal Impairment

- People whose kidneys are damaged (known as ‘Renal Failure’) cannot remove MRI contrast from the body. This may lead to a very rare disorder called Nephrogenic Systemic Fibrosis (NSF). NSF is a condition that results in scarring or thickening of the skin and tissues throughout the body. This scarring can lead to a tightening of muscle, tendons, ligaments, or skin that prevents normal movement and function. This condition is severely disabling and may result in death.
E. Patient consent

I acknowledge that the doctor/doctor delegate has explained the proposed procedure.

I understand:

- the risks and complications, including the risks that are specific to me.
- that no guarantee has been made that the procedure will improve my condition even though it has been carried out with due professional care.
- if immediate life-threatening events happen during the procedure, they will be treated based on my discussions with the doctor/doctor delegate or my Acute Resuscitation Plan.
- a doctor/doctor delegate undergoing further training may conduct this procedure.

I have been given the following Patient Information Sheet/s:

☐ MRI Cardiac Stress Perfusion Study
☐ MRI Contrast

- I was able to ask questions and raise concerns with the doctor/doctor delegate about the proposed procedure and its risks. My questions and concerns have been discussed and answered to my satisfaction.
- I understand I have the right to change my mind at any time including after I have signed this form but, preferably following a discussion with my doctor/doctor delegate.
- I understand that image/s or video footage may be recorded as part of and during my procedure and that these image/s or video/s will assist the doctor to provide appropriate treatment.
- I understand that Queensland Health may release my relevant de-identified information obtained from this and related procedures for education and training of health professionals.

On the basis of the above statements, I request to have the procedure

Name of Patient: .................................................................
Signature: .............................................................................
Date: ....................................................................................

Patients who lack capacity to provide consent

Consent must be obtained from a substitute decision maker/s in the order below.

Does the patient have an Advance Health Directive (AHD)?

☐ Yes ► Location of the original or certified copy of the AHD:

☐ No ► Name of Substitute Decision Maker/s: .................................................................
Signature: .................................................................................
Relationship to patient: ...........................................................
Date: ........................................................ PH No: .................

Source of decision making authority (tick one):

☐ Tribune-appointed Guardian
☐ Attorney/s for health matters under Enduring Power of Attorney or AHD
☐ Statutory Health Attorney
☐ If none of these, the Adult Guardian has provided consent. Ph 1300 QLD OAG (753 624)

F. Doctor/delegate Statement

I have explained to the patient all the above points under:

☐ the Patient Consent section (E)
☐ MRI Contrast - Patients with Renal Impairment Section (D) (for renal impaired patients only)

and I am of the opinion that the patient/substitute decision-maker has understood the information.

Name of Doctor/delegate: ..........................................................
Designation: ........................................................................
Signature: ............................................................................ Date..............

G. Interpreter’s statement

I have given a sight translation in

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(state the patient’s language here) of the consent form and assisted in the provision of any verbal and written information given to the patient/parent or guardian/substitute decision-maker by the doctor.

Name of Interpreter: ............................................................
Signature: ........................................................................ Date..............
1. What is a MRI Cardiac Stress Perfusion Study?

Magnetic Resonance Imaging (MRI) is an advanced imaging method that uses a strong magnetic field, radio waves and a computer to produce pictures of the body. MRI does not use x-rays. MRI pictures are very detailed. They can show both bones and soft tissues in the body.

A Cardiac MRI scan creates images of your heart as it is beating. It looks at the function of your heart and for any scarring in the heart muscle.

During a Stress Perfusion Study you will receive medications that increase the blood flow in your heart and increase how fast your heart beats (stress).

While your heart is ‘stressed’ MRI Contrast is used to examine the blood supply to your heart. For more information on MRI contrast and the risks involved in its use, please read the MRI Contrast Patient Information Sheet (if you do not have this information sheet please ask for one).

2. Will there be any discomfort, is any anaesthetic needed?

An MRI Scan is a painless procedure, no anaesthetic is required.

With the medication given in this procedure, you may develop chest pain, shortness of breath or major changes in your heartbeat. These symptoms usually last for 3 – 4 minutes while you receive the medication. They will go away within 10 seconds once the medication is stopped. Rarely, will you need any further medication to settle these symptoms. You will be closely watched by a Doctor.

Some people find that being inside the MRI machine makes them feel uncomfortable due to the confined space of the tunnel. This is known as ‘claustrophobia’. If this occurs, let the staff know as there are many different ways they can help you.

Rarely, medication may be required to help you complete the scan. If you require medication for the scan please check the procedure with MRI staff.

3. Preparation for the procedure

The medical imaging department will give you instructions on how to prepare for your scan.

- You may be told not to eat/drink any foods containing caffeine (tea/coffee, cola drinks, chocolate etc) in the hours leading up to your appointment.
- If you take medications containing Aminophylline, Theophylline or Dipyridamole (Persantin and Asasantin), please contact the medical imaging department for instructions.
- Please tell the staff if you are or suspect you might be pregnant or are breastfeeding.

4. During the procedure

Before you are taken into the scanning room,

- An electrocardiogram (ECG) may be taken. This is a paper recording of your heartbeat.
- A fine needle (IV cannula) is placed in each arm.
- Your pulse, blood pressure and heartbeat are monitored during the study. If the doctor is worried about these, the study will be stopped.

The procedure is performed in three parts:

First Part - MRI scans are done

You will not feel anything during the scan. The radio waves used to take your pictures are very noisy; you may hear thumping, and knocking sounds. You will be provided with headphones or earplugs to protect your ears from the noise.

MRI staff will not be in the room with you during the scan but they will be able to see you on a monitor and talk to you between the scans via an intercom system.

You will be given a call button to use if you need help...
Second Part - your heart is ‘stressed’ with a medication called Adenosine. This increases your heart rate.

When the Adenosine is injected you may feel side effects for 3 – 4 minutes such as:
- Facial flushing, mild headache, mild shortness of breath (feeling puffed), chest tightness, palpitations (fast heart beat), slow heart beat, low blood pressure or light headedness. These generally go away quickly (within 10 seconds) when the Adenosine infusion is stopped.

While your heart is ‘stressed’ you are given MRI Contrast. A scan is taken which helps show areas of abnormal blood flow in your heart.

A doctor will be in the scanning room, closely monitoring you during at this time.

Third Part - after a short break, more scans are taken to look at the heart muscle.

At the end of the study another ECG is done and the IV cannulas are removed.

5. After the procedure
Staff will discuss with you what level of activity is suitable after your procedure.

6. What are the risks of this specific procedure?
The risks and complications with this procedure can include but are not limited to the following.

The main risks of this procedure are associated with the drugs that are used.

Common risks and complications of Adenosine include:
- No known common risks of Adenosine.

Less common risks and complications of Adenosine include:
- Severe shortness of breath; this may require treatment with medications.
- Ongoing severe chest pain, requiring treatment with medications.
- A fast heart beat; this may require medications and/or further treatment.
- Heart attack.
- The heart stops, requiring treatment with medications and/or a temporary pacing wire.

Rare risks and complications of Adenosine include:
- No known rare risks of Adenosine.

Notes to talk to my doctor/ health practitioner about:

Common risks and complications of the actual procedure include:
- Minor pain, bruising and/or infection from the IV cannula. This may require treatment with antibiotics.

Less common risks and complications of the actual procedure include:
- An allergy to injected drugs, requiring further treatment.
- The procedure may not be possible due to medical and/or technical reasons.

Rare risks and complications of the actual procedure include:
- Death as a result of this procedure is very rare.

7. What are the safety issues when you leave the hospital?
Go to your nearest Emergency Department or GP if you become unwell.
1. **What is a MRI contrast?**

The medical imaging MRI procedure your doctor has asked you to have may use MRI Contrast. MRI Contrast is a colourless liquid that is injected into your blood stream. MRI Contrast is not a dye. It does not stain the inside of your body. It is used during MRI medical imaging procedures to allow your organs to be seen more clearly. Your doctor needs to use MRI Contrast to be able to get all the information needed to assist with your diagnosis.

This information sheet must be read together with the information sheet of the procedure you are booked for (if you do not have this information sheet please ask for one).

2. **During the procedure**

When the MRI Contrast is injected you should not feel any different.

3. **After the procedure**

MRI Contrast does not affect your ability to carry out normal activities; you should be able to continue with your day as normal.

4. **Precautions**

MRI Contrast is not suitable for some people; you will be asked a series of questions before it is given to you. Your answers allow staff to identify any risk factors that you may have.

- Please tell the staff if you are or suspect you might be pregnant or are breastfeeding.

**Kidney function:**

- MRI Contrast is removed from your blood by your kidneys through your urine. It is easily removed from the body of people who have normal kidney function.
- People whose kidneys are poorly functioning (known as ‘Renal Failure’) cannot remove MRI Contrast from their body. This may lead to a very rare disorder called Nephrogenic Systemic Fibrosis (NSF).
- NSF is a condition that results in scarring or thickening of the skin and tissues throughout the body. This scarring can lead to a tightening of muscle, tendons, ligaments, or skin that prevents normal movement and function. This condition is severely disabling and may result in death.
- You may be asked to have a simple blood test to find out the level of their kidney function.

5. **What are the risks of MRI Contrast?**

The risks and complications with MRI Contrast can include but are not limited to the following.

**Common risks and complications include:**

- No known common risks.

**Less common risks and complications include:**

- Injected Contrast may leak outside of the blood vessel, under the skin and into the tissue. This may require treatment. In very rare cases, further surgery could be required if the skin breaks down.
- The injection may not be possible due to medical and/or technical reasons.

**Rare risks and complications include:**

- Allergic reactions occur within the first hour with most happening in the first 5 minutes.
- The reactions vary from:
  - **Mild** – headache, brief nausea, dizziness, hives, rash and itching.
  - **Moderate** – wide spread hives, headaches, facial swelling, vomiting, shortness of breath.
  - **Severe** – Severe reactions are rare but include: life-threatening heart palpitations, very low blood pressure, throat swelling, fits and/or cardiac arrest.
- Nephrogenic Systemic Fibrosis (NSF) for severe renal impaired patients only.
- Death as a result of MRI contrast is very rare.

6. **What are the safety issues when you leave the hospital?**

Go to your nearest Emergency Department or GP if you become unwell.

**Notes to talk to my doctor about:**

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