

You may have any number of the previous test and the main test for diagnosing PH

Right Heart Catheter Test (RHC): A small silicon tube (sheath) is inserted into a vein in your neck as an entry point for the catheter test. This is done under local anaesthetic. A fine catheter is passed through the sheath into your bloodstream. The catheter flows with your blood into the chambers of the heart and measure blood pressure. The sheath is removed from your neck immediately after the procedure. Occasionally additional procedures are carried out during the RHC such as:

- **Pulmonary Angiography** where dye is used to look for clots in the lungs
- **Exercise testing** where you may be asked to carry out some simple leg raises
- **Nitric Oxide inhalation** where you will be asked to breathe through a mask for approximately 5 minutes.

The team will be round between 3pm and 5pm on the Thursday afternoon to discuss the test results with you. Please invite a family member or friend to come along as a lot of information is usually given during this time.

The date of your admission will be arranged via Lianne, the SPVU administration assistant. Lianne will call you to arrange admission before

_____. If you have not heard anything by this date please call Lianne on 0141 951 5478.

On the day of admission you will report to the NSD pod within Level 3 West. A bed will probably not be available until later in the afternoon but we require you to be available for tests and for the doctor to see earlier in the day. You can bring in comfortable outdoor clothes if you prefer. Please bring all your medication with you.

If you are on warfarin your last dose should be the Saturday prior to admission.

If you are taking clopidogril your last dose should be the Thursday prior to admission.



SPVU Diagnostic Admission Information

Name: _____

CHI: _____

SPVU nurse contact numbers

Agnes 0141 951 5621

Rachel 0141 951 5623

Karon 0141 951 5771

If you have any questions about your admission please contact the nurse team on one of the numbers above

Symptoms of Pulmonary Hypertension (PH)

The commonest symptom in PH is shortness of breath and fatigue. Other **symptoms** include:

- feeling faint or fainting
- swelling of the feet or ankles
- chest pain, particularly during exercise

Symptoms can occur at rest and more frequently during periods of mild exercise, such as walking around. Symptoms of PH may have an impact on a person's ability to lead a normal life and perform day-to-day activities. Such effects therefore reduce the person's quality of life. Symptoms of PH resemble those of other conditions and are therefore quite difficult to diagnose. There is often a lengthy delay between first visiting the doctor and receiving specialist care at the SPVU.

Diagnosing PH

There is no single test which will tell the healthcare team if someone has PH. The healthcare team will first rule out any other diseases that may be causing the symptoms. If the healthcare team suspects that someone has PH, they will follow several initial steps to confirm the diagnosis. These tests can reveal a person has a diagnosis other than PH. Depending on the results of the tests, the healthcare team may then take a different approach towards future investigations. The healthcare team will assess the effect of symptoms on your overall quality of life.

Common tests for diagnosing PH

You may require some of all of the tests listed below during your time at the Golden Jubilee National Hospital

Blood tests: A number of blood tests will be carried out during admission.

Chest X-ray: A x-ray of the chest shows a good picture of your lungs and the outline of both your heart and pulmonary arteries.

Echocardiograph (Echo): Ultrasound is used to display a picture of the heart at work. The picture is transmitted to the screen by using a probe which is moved over your chest.

12 Lead Electrocardiogram (ECG): This test records the electrical activity of the heart.

High – Resolution Computerised Tomography scanning (HRCT scan): This scan uses X- rays which provide detailed images of cross sections of your lungs. The HRCT is particularly useful for finding common abnormalities in the lungs and possible blood clots. It also can give helpful information about the heart.

Cardiac Magnetic Resonance Imaging (CMRI): This scan uses a strong magnetic field to create images of tissues, organs and other structures inside the body. The MRI scanner is like a long tunnel and is surrounded by a large circular magnet.

Pulmonary Function Tests (PFTS): A variety of tests called pulmonary function tests (PFT'S) assess your breathing in a number of ways. The test provides information about the amount of air a person's lung can hold and how effectively they work.

6 Minute Walk Distance: The walk test assesses the distance you can walk on the flat in 6 minutes.

Cardiopulmonary Exercise Testing (CPET): In this test you will be asked to ride a static exercise bike while breathing through a mouthpiece and wearing a nose clip.

Computerised Tomography/ Pulmonary Angiogram (CTPA Scanning): A CTPA is like a CT scan but uses a dye to look at the lungs and heart.

Ventilation – perfusion scanning (VQ scan): This is a scan which looks at the blood and oxygen flow in your lungs. You may not require this test if you have had one recently as an outpatient.