We hope this helps answer some of your questions, but if you still have some questions unanswered please ask a member of staff.

A Patient’s Guide to the Rapid Access Chest Pain Clinic

Cardio Respiratory Department
Raigmore Hospital
Old Perth Road
Inverness
Tel: 01463 704249
Fax: 01463 705658

www.nhshighland.scot.nhs.uk/Health%20Services/
CHD/index.htm

Issue No. 1
Date of Issue July 2006
Review date: July 2008

Reviewed by Patient Information group

Devised by CHD Managed Clinical Network
Your appointment with the Rapid Access Chest Pain Clinic (RACPC) is to assess and diagnose your symptoms. This will then allow us to recommend a treatment or further investigations. A family member or partner may accompany you to the clinic and sit in with you while you see the specialist.

**On arrival**
At this clinic you may have a number of tests as well as seeing a specialist. This means that your appointment could take a minimum of 30 minutes or a maximum of 2 hours.

On arrival you will first have an Electrocardiogram (ECG). Then you will see the specialist who will look at your results. They will ask a variety of questions and will examine you including listening to your heart, checking your circulation in your hands and feet and taking your blood pressure.

After they have assessed your symptoms they may decide to arrange further investigation on the same day. Following any investigations you will be seen again by the specialist to discuss the outcome.
**Referral to a Cardiologist**

Some patients will be followed up in a cardiology clinic for further assessment of their symptoms and more invasive investigations and this mostly happens when your history and the ETT suggests angina. In this instance an appointment will be sent to you in the post notifying you of the day and time of the clinic.

A minority of patients are referred for coronary angiography. This is a procedure for examining the Coronary Arteries. It is an X-ray picture of the blood vessels that show whether the arteries are narrowed and if so, how narrow they have become.

**Admitted to hospital**

Occasionally patients with severe angina are admitted to one of the wards in the hospital directly from the clinic. This allows us to commence medication straight away and arrange urgent investigations.

**Types of investigations**

Below is a list of investigations that could be carried out:

**Electrocardiogram (ECG)**
An ECG involves placing 10 sticky electrodes on and around your chest, arms and legs to measure the electrical activity of the heart and produce a trace of your heart function. This is completely painless and takes just a few minutes.

**Exercise Tolerance Test (ETT)**
An Exercise Tolerance Test allows us to measure the electrical activity of the heart while you are exercising and reveals whether the heart is under any strain during exercise. This will allow your Doctor to establish the cause. The whole test takes approximately 30 minutes. Please wear loose fitting clothing and wear soft, flat-soled shoes. You may have a light snack at least one hour before attending but try to avoid a heavy meal.

**Echocardiogram (ECHO)**
An Echocardiogram is a scan of the heart using ultrasound similar to that used to observe babies developing in a mother’s womb. The scan takes about 15 minutes and tells us how well the heart is pumping and if there are any problems with your cardiac valves and function.
Chest X-ray
A chest x-ray is a radiology test that involves exposing the chest briefly to radiation to produce an image of the chest and the internal organs of the chest. The Chest X-ray is used to help detect heart or lung abnormalities, which sometimes can cause chest pain.

What happens next?
Following any investigations you will be seen again by the specialist to discuss the outcome. The specialist will discuss your diagnosis, any medication and what is involved in the next stages. The next stage could include:

♦ Referred back to GP with the diagnosis of exclusion of coronary heart disease.

♦ Referred for further tests if the tests are inconclusive

♦ Referral for more specialist tests e.g. Angiography

♦ Admission to the hospital: If your heart is considered to be in an unstable condition, you may be directly admitted to the hospital for further observation, treatment and investigations.

Referred back to GP
A large proportion of patients are discharged from the clinic and do not require any further follow up.

Following the clinic visit, a letter will be sent to your family GP, which will include a brief history together with the results of any tests, performed during your visit. It may also include recommendation for future treatment.

The letter will take approximately 7-10 days to reach your GP surgery. If there is any change to your medication you will be advised of this during your clinic visit and advised to make an appointment to see your GP in around 10 days time.

Occasionally we may provide you with a hand written letter to hand into the GP surgery if treatment is to start immediately.

Purpose of the RACPC
Please remember the purpose of the RACPC is to either establish or exclude Coronary Artery Disease as the cause of your symptoms.

The specialist will refer you back to your GP where appropriate. This may not solve your problem altogether but you and your GP will have the assurance that you don’t have any significant heart problems. Should your symptoms continue, your GP might want to carry out other investigations.