Centre intégré universitaire de sa et de services soci de l'Ouest-de- l'Île-de-Montréal	clinique	N° dossier / Chart N° Sexe/Sex	DDN/DOB
Quél	Hôpital général du Lakeshore	Nom / Name	Prénom / First Name
☐ HLAS ☐ CHSLD	☐ HSA ☐ CHSM ☐ HSA ☐ CHSLD DOR ☐ CHSLD LACH ☐ IUSMD	Nom de la mère / Name o	f mother
CHSLD		Adresse / Address	
	NTED INDIVIDUAL ORDER TITLE : to the Clinical Access service for		
	ernal Chest Pain	Tél. / Tel.	
110110 011		N° assurance maladie / Mc Expiration	edicare Card N°
Init. MD/ NP	Referral to the Clinical Access se	ervice for Retro-stern	al Chest Pain
	Allergies :	Height :	Weight :
	☐ Breastfeeding ☐ Liver impairment ☐ Kidney impair	ment  Others:	
	Clinical information and relevant personal and family mederate Presented symptoms (cochez)	dical history :	
	Canadian Cardiovascular Society grading of angina		
	<ul> <li>□ Grade I</li> <li>□ Grade II</li> <li>□ Grade III</li> <li>□ Grade IV</li> <li>□ Grade IV</li> <li>Ordinary physical activity does not cause of ordinary activity. Ex: Which is a contractivity of ordinary physical activity of ordinary physical activity of ordinary physical activity or ordinary physical activity or ordinary physical activity or ordinary physical activity of ordinary activity.</li> </ul>	Valking or climbing stairs ra tivity. Ex: Walking one or tw	apidly, walking uphill, etc. vo blocks on the level, etc.
	I have given to the patient the prescription for retro-stern	al chest pain (optional)	
	I confirm that the person referred meets all general admi specific inclusion criteria of the condition. I also confirm t the Clinical Access service or specific exclusion criteria of	hat the person does not ha	
	I confirm that the person referred has received the instru from the Clinical Access service to call them.	uction sheet and has been	instructed to wait for the nurse
	I have read the description of the roles of the referring M Cadre de référence and I agree to the interventions mer		he clinical access service in the
	⇒ Fax this form and the prescription for Retro-sternal C Name of clinic :		)
	Phone # for the next 24 hours :		

Physician or Nurse Practitioner							
Name (in block letters)	Signature	License Nº	Date (YY – MM – DD)	Hour			

If unavailable, MD/NP who will do the follow-up : \_\_\_\_\_\_ Phone # : \_\_\_\_\_

		N° dossier / Chart N° Sexe/Sex	DDN/DOB
Centre intégré universitaire de sa et de services socié de l'Ouest-de- l'Île-de-Montréal	clinique	Nom / Name	Prénom / First Name
	Hôpital général du Lakeshore	Nom de la mère / Name of mo	other
☐ HLAS		Adresse / Address Tél. / Tel.	
Ordonna	GD ☐ CHSLD NP ☐ CLSC LAS  nce pour douleur rétro-sternale	N° assurance maladie / Medic	are Card N° Expiration
Prescrip	tion for Retro-sternal Chest Pain		
Init. MD/IPS/ <i>NP</i>	Ordonnance pour douleur rétro-sternal	e / Prescription for Re	tro-sternal Chest Pain
	ASA 81 mg PO DIE X 2 mois/months NR		
	Nitroglycérine/Nitroglycerin 0.4 mg SL q s ⇒ Si patient prend un inhibiteur de la phospho	odiestérase de type 5 tels	que: sildénafil (VIAGRA®)
	tadalafil (CIALIS®) et vardénafil (LEV phosphodiestérase de type 5 / If patient tadalafil (CIALIS®) and vardenafil (LEVITRA®	uses PDE5 inhibitors suc	ch as sildenafil (VIAGRA®),
		,, <u></u>	

Médecin ou infirmière praticienne spécialisée / Physician or Nurse practitioner								
Nom (en lettres moulées) / Name (in block letters)	Signature	N° de permis / License N°	Date $(AA/YY - M/M - J/D)$	Heure / Hour				





### **Document to Give to Patients**

What is the Clinical Access Service? Your doctor or specialized nurse practitioner (SNP) has referred you to the Clinical Access Service because your condition is considered semi-urgent. This service will give you tailored access to diagnostic tests and specialists as quickly as possible.

<u>Here is the procedure:</u> The Clinical Access Service nurse will be available throughout the diagnostic period to answer your questions. You can call them at **514-630-2225**, **ext. 1719** during opening hours (Monday to Friday from 8:00 a.m. to 4:00 p.m., except on holidays).

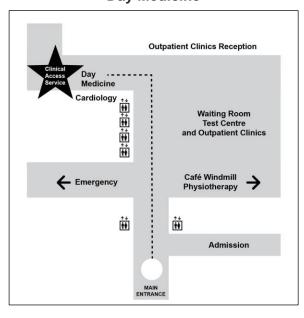
- The physician or SNP will give you documents when you leave their office:
  - A referral to the Clinical Access service
  - A prescription for the pharmacy (in certain cases)
- **3.** You must bring to your appointment:
  - Your hospital card (if you do not have one, go to the Admissions office BEFORE coming to Clinical Access Service)
  - Your health insurance card
  - A list of all your medications
  - The documents your physician/SNP gave you
- 5. Parking:
  - Parking on the streets surrounding the hospital is restricted to residents only at certain times of the day.
  - Hospital Parking Rates:
    - Under 2 hours......free
    - 2 hours to under 4 hours..\$6
    - More than 4 hours......\$10

**2.** As soon as they receive the referral, the Clinical Access Service nurse will call you by phone to schedule an appointment with you.

### \*Make sure you are easily reachable

Appointment at Clinical Access Service
 <u>Lakeshore General Hospital</u>

 160 Stillview Avenue, Pointe-Claire,
 Ambulatory Centre, 1<sup>st</sup> Floor,
 Day Medicine



### What is the treatment for angina?

Angina is usually treated with a combination of medications and lifestyle changes. Making certain lifestyle changes can help lower your risk of complications. Here are a few examples:

- Quit smoking
- Lower your sugar, salt and fat intake
- Eat a healthy, well balanced diet
- Limit your alcohol intake
- Lower your caffeine intake (coffee, tea, soft drinks)
- Maintain a healthy weight
- Limit stress wherever possible

Your doctor may prescribe a medication to thin your blood (Aspirin) and one to relieve angina pain (Nitroglycerin or Nitro), which comes as a patch, spray or tablet. The pharmacist or the nurse at the Clinical Access Service will give you more detailed information about the prescribed treatment.

**Important**: Before taking over-the-counter medications or natural products, please consult your pharmacist.

### **Questions?**

- The nurse at the Clinical Access Service Monday through Friday, from 8 am to 4 pm, except statutory holidays, at 514-630-2225 ext. 1719;
- Info-Santé nurse by dialing 811. This service is available 24/7;
- Heart and Stroke Foundation at <a href="https://www.heartandstroke.ca/heart-disease/conditions/angina">https://www.heartandstroke.ca/heart-disease/conditions/angina</a>
- Your pharmacist can also advise you when it comes to your medication.

### Other available resources:

Both resources are available at your CLSC or online at www.osezlasanté.ca:

- Health Education Centre to review your lifestyle habits;
- Smoking Cessation Centre to help you stop smoking.



# **Retrosternal Pain**

# \*\*YOUR APPOINTMENTS: \*\*Blood tests (fasting): \*\*Date and time: \_\_\_\_\_ \*\*Location: Ambulatory Centre - Day Medicine, Room 1900 \*\*Electrocardiogram (ECG): \*\*Date and time: \_\_\_\_ \*\*Location: Cardiology Department – Ground floor \*\*Stress test: \*\*Date and time: \_\_\_\_ \*\*Location: Cardiology Department – Ground floor \*\*Cardiology consultation: Date and time: \_\_\_\_ \*\*Location: West Island Cardiology Clinic\*\*

Centre intégré universitaire de santé et de services sociaux de l'Ouest-del'Île-de-Montréal



# What is retrosternal pain?

Retrosternal pain is a type of chest pain known as angina, which can be a symptom of heart disease. It happens when one of the blood vessels (coronary artery) that supplies oxygen-rich blood to the heart muscle becomes blocked or narrowed. When the heart does not get enough blood and oxygen it must work harder, which can cause pain.

# Why use the Clinical Access Service?

The nurse at the Clinical Access Service will perform a health assessment with the help of a questionnaire. This will be followed by blood tests and an electrocardiogram (ECG) to measure the electrical activity of your heart. Depending on the results, the nurse may schedule a stress test with a specialist.

The nurse at the Clinical Access Service will keep your doctor or primary care nurse practitioner informed. Your healthcare provider will receive a copy of all your laboratory and diagnostic test results.

## What are the causes of angina?

Angina can be triggered by physical exertion, stress, intense emotions, extremely cold or hot temperatures, large meals, drinking alcohol or smoking.

The most common causes of angina are:

- High cholesterol
- Coronary artery disease
- Uncontrolled high blood pressure
- Heart problems (e.g., narrowing of a heart valve or an enlarged heart known as hypertrophic cardiomyopathy)

Living a healthy, active lifestyle can help reduce your risk.



# What are the signs and symptoms of an angina attack?

The following symptoms usually occur as a result of physical exertion or emotional stress and are quite similar to those of a heart attack.

- Pain or discomfort in the middle of the chest that can spread to the arms, neck, back, throat and jaw, often described as a burning or cramping sensation;
- A feeling of tightness, squeezing, pressure or heaviness;
- Numbness or loss of feeling in the arms, shoulders or wrists.

Angina symptoms can be accompanied by:

- Shortness of breath
- Nausea (retching) or vomiting
- Sweating/paleness, fatigue/weakness
- Dizziness or fainting

Angina usually lasts <u>no more than a few minutes</u> (3-5 minutes) and disappears with rest and/or nitroglycerin.

If you experience one or more of these symptoms or if the pain lasts longer than 15 minutes even after resting and taking nitroglycerin, do not wait until your appointment at the Clinical Access Service and call 9-1-1. When you report to the Emergency Department, tell the triage nurse that you are currently being assessed and are followed at the Clinical Access Service and that you may be experiencing a possible complication.

# What are the risks and complications associated with angina?

Angina is not a heart attack. It is a warning sign that you are at increased risk of a heart attack, cardiac arrest or sudden cardiac death. Your heart is telling you to stop what you are doing, to reduce your stress or to step away from the stressful situation and rest.



# Can I continue to be physically active?

This usually depends on the severity of your symptoms. Continuing to be physically active and doing light-to-moderate activities is possible.