



## DO's

- Carry on with your normal daily activities.
- Record all activities and symptoms with a time in patient diary when they occur.
- If a lead wire becomes unsnapped or falls off, reattach and note time in diary.

## DO NOT's

- **Do not** tamper with the recorder, or remove it from its case.
  - **Do not** pull on electrodes, leads or tapes.
  - **Do not** bathe, shower or swim.
  - **Do not** use electric blankets.
  - **Do not** remove battery for any reason.
  - **Equipment should be removed by hand only.**
- Do not use scissors or sharp tools to remove gauze or tape.**

**The accuracy and usefulness of this test will depend on how well you keep this record.**

Contact for Questions or Problems:

---

Phone: --

## Patient Diary Instructions

*Please write or print clearly*

- Maintain your usual routine.

## Time of Day

*For every entry in the diary.*

- Using one clock, mark the exact time.  
Circle a.m. or p.m.

## Activity

- **Track your activities:**
  - sustained physical activities
  - exercise
  - eat
  - urinate
  - bowel movements
  - sexual relations
  - sleep (approximate start and awake times) or long periods of relaxation
  - take medication
  - extreme emotional state

## Symptoms:

- **Track symptoms of heart problems:**
  - dizziness/lightheaded
  - fainting presyncope/syncope
  - chest discomfort/angina
  - neck, jaw, arm, shoulder, back pain
  - palpitations/heart pounding/skipping
  - significant or unusual shortness of breath
  - nausea/vomiting
  - other symptoms you feel may be heart related or significant

If these symptoms are unusual or are not relieved with your appropriate intervention as prescribed by your physician or you are concerned, SEEK APPROPRIATE MEDICAL ATTENTION.