


<b>Name of Policy:</b> Tilt Table Test—Patient Education <b>Policy Number:</b> 3364-106-T01 <b>Approving Officer:</b> Chief Executive Officer-UTMC <b>Responsible Agent:</b> Director of Cardiovascular Services <b>Scope:</b> University of Toledo Medical Center		 <b>Effective date:</b> 01/9/2025 <b>Original effective date:</b> 08/2010	
Key words: Tilt Table, Patient Education, Consent, Risks, Pediatric			
<input type="checkbox"/>	New policy proposal	<input type="checkbox"/>	Minor/technical revision of existing policy
<input type="checkbox"/>	Major revision of existing policy	<input checked="" type="checkbox"/>	Reaffirmation of existing policy

**(A) Policy Statement**

A patient education information sheet or informed consent form (for pediatric patients) will be signed by all patients prior to testing.

**(B) Purpose of Policy**

To ensure that the patient has received a clear explanation and understands the purpose of the test, the test itself, risks involved, and the potential for any necessary resuscitative measures.

**(C) Procedure**

1. A patient education information sheet will be given to patients prior to testing for them to read.
2. The nurse or the physician will explain the Tilt Table Test, possible side effects, and answer any questions prior to testing.
3. The patient's signature and a signature of a witness will be obtained.
4. Pediatric testing informed consent will be obtained from parent or guardian by a M.D.

<p>Approved by:</p> <p>/s/</p> <hr/> <p>Todd Korzec, RN, BSN Director, Cardiovascular Services</p> <p>1/6/2025</p> <hr/> <p>Date</p> <p>/s/</p> <hr/> <p>Blair P. Grubb, MD Director, Syncope &amp; Autonomic Disorders</p> <p>1/9/2025</p> <hr/> <p>Date</p> <p>/s/</p> <hr/> <p>Christine Stesney-Ridenour, FACHE Chief Operating Officer</p> <p>1/8/2025</p> <hr/> <p>Date</p> <p><i>Review/Revision Completed by: Director, Cardiovascular Services</i></p>	<p><b>Policies Superseded by This Policy:</b></p> <ul style="list-style-type: none"><li>• <i>None</i></li></ul> <p>Initial effective date: 8/2010</p> <p>Review/Revision Date: 6/10/2013 7/24/2015 3/1/2019 3/2022 1/9/2025</p> <p>Next review date: 1/9/2028</p>
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