

24-Hour Holter Monitor Appointment

Patient: _____

Date: _____ Time: _____

If your appointment is in the morning, please call the day before from 3:00PM-4:30PM to save the monitor. If your appointment is in the afternoon, please call the day of your appointment after 9:00AM to save the monitor.

Please note that you will be getting a remainder call/ message of this appointment but you still need to call and save a monitor.

Be sure to return the monitor the following day, or you may be billed a late fee of \$25.00 per day or if the monitor is not returned you may be billed the cost of the monitor which is \$2,500.00. If your appointment is on a Friday please return the monitor the following Monday between 9:00AM-10:00AM to prevent late fees.

The monitor will record your heart rhythm for a 24-hour period, while you wear it you will not be able to shower/ bathe until the monitor is removed 24 hours later.

Your appointment for results is on: _____ at _____

Please remember to bring a complete list of medications to every office visit.

If you have any questions, please call the office at (209) 944-5530.