

Symptom Diary

The objective of the Symptom Diary is for your doctor to understand the relationship between what you feel and the activity of your heart as recorded by the recorder.

Please record your symptoms in the diary in the following page and double-tap the recorder to generate a blue light.

Getting started

Please read the Patient Instructions in your myPatch Patient Kit before applying the recorder.

We recommend that you

- Wear loose fitting clothes.
- Take any medications as normal unless contra-indicated.
- Continue with typical daily activities, including showers and exercise, but please do not submerge the device in bath.
- Remember to mark the time & date of your fitting on the top of your symptom diary.

Using your Patient Symptom Diary

myPatch allows you to indicate if you experience any mild symptoms, such as dizziness.

Firmly and quickly double-tap the device. A blue light will come on to show the event has been marked on your test. **(Do NOT press the button as it will stop your test)**

Then, record your symptoms on the Symptom Diary overleaf to capture the specific symptoms you experienced.

Help and support

**For help during your test, please contact
Cardioscan on:**

E: info@cardioscan.co.uk

T: 01992 351 033

Or watch instructional videos by visiting:

cardioscan.co/mypatch-help

Improving results with secure data analysis

Your hospital uses CardioScan to manage its Holter service and to analyse your data. Your data will be uploaded onto a secure online platform called BeatBox, located in England. A cardiac physiologist located in Australia will log in remotely and analyse your data within 24-hours from the upload. Your data never leaves the UK.

Patient details

Patient Name: _____ Hospital Ref: _____

Patient ID: _____ Date of Birth: _____ Length of Test: _____

Time & Date Fitted: _____ **Time & Date Removed:** _____

Symptom Diary

Remember to record any specific symptoms you have during your test.
Please return this diary with your recorder as instructed, even if no symptom has been recorded.

Date	Time	Activity	Symptoms					
			Palpitations	Loss of consciousness	Dizziness	Falls	Shortness of breath	Other
<i>Example</i> 01/01/2021	10:00am	Walking the dog	✓					Light headedness