

Frequently Asked Questions

“Save a Heart. Save a Life” Heart Screens Program



**Louisiana
Pediatric
Cardiology
Foundation**

1. When and where will the screening take place?

Screens either take place on school campuses or at the Louisiana Pediatric Cardiology Foundation Office. Please call our office at 225-768-2590 to check for available time slots and reserve your appointment.

2. What do I need to do to have my child screened?

A parent/ guardian of the student will sign an “Informed Consent and Release” form, along with some demographic information and a short medical history questionnaire. You can fill out this form online at <https://www.lpcf.com/consent-form>. If you submit the form online, it will go directly to our heart screens coordinator so there is no need to bring a physical copy with you to your appointment.

3. What tests will be run?

- a. 12 lead electrocardiogram (EKG)
- b. Limited echocardiogram (ECHO) to assess heart size and structure

****There will be no needles, blood work, radiation exposure, or sedation**

4. How long will the screen take?

The screening takes approximately 10-15 minutes. Unforeseen problems may occur, so please be patient if the screening process runs longer than the estimated time.

5. What is the cost?

There is no cost and we will not obtain or bill your insurance. The value of this screen is approximately \$650 if scheduled through your doctor’s office and not going through insurance. LPCF is able to provide these screens through donations, fundraising, and outside grants.

6. What if I want to pay or make a donation to LPCF to help defer costs?

You can make a tax deductible donation to Louisiana Pediatric Cardiology Foundation (LPCF). The foundation is a registered 501(c)(3) public charity whose mission is to improve the lives of Louisiana children with heart conditions by removing the financial barriers to care, advancing early detection through heart screenings, and providing hope to families when they need it most.

7. What is Hypertrophic Cardiomyopathy (HCM)?

Hypertrophic Cardiomyopathy (HCM) is a genetic heart condition that causes a thickening of the heart wall, leading to the obstruction of blood flow and erratic heart beat. It is the leading cause of sudden death in young people. One in 500 people have HCM.

8. What are common symptoms of Hypertrophic Cardiomyopathy (HCM)?

Not all patients will necessarily experience symptoms of HCM. However, some of the symptoms associated with HCM may include chest pain, fatigue, dizziness, heart palpitations, lightheadedness, fainting (especially after exercise), or shortness of breath.

9. How can Hypertrophic Cardiomyopathy be detected?

Initial signs of HCM can be detected through an electrocardiogram (EKG). The diagnosis can also be made by utilizing an echocardiogram (ECHO), which is an ultrasound of the heart.

10. What is an electrocardiogram (EKG)?

An EKG is a test that measures the electrical activity of the heartbeat. With each beat, an electrical impulse (or “wave”) travels through the heart, causing the muscle to squeeze and pump blood from the heart. The EKG displays the amount of time it takes the wave to travel from one part of the heart to the next, showing if the electrical activity is normal or slow, fast or irregular. The EKG can also determine if parts of the heart are too large or are being overworked.

11. What is an echocardiogram (ECHO)?

An ECHO is a technique that sends sound waves (like sonar) into the chest to rebound from the heart’s walls and valves. The recorded waves show the shape, texture, and movement of the valves. The ECHO also shows the size of the heart chambers and how well they are working.

12. When will I receive my results?

A pediatric cardiologist will read every test. All **NORMAL** test results will be **emailed** to the patient’s parent/guardian’s email provided on the consent packet. If the test results happen to be **ABNORMAL**, the pediatric cardiology office will call the parent/guardian to discuss a necessary follow-up. Please allow 2-3 weeks to receive results.

13. What is the likelihood that my child has the most common cause of sudden cardiac death?

The frequency of Hypertrophic Cardiomyopathy (HCM) ranges from 1:500 to as rare as 1:5000. We expect to identify one child per 1000 screened having HCM. However, many other cardiac abnormalities are identified through our screenings.

14. Will my child’s school or coach get a copy of the results?

No. Your child’s privacy is protected the same way as if you were seeing a physician for a typical appointment. Read our “Privacy Practices” on our website for more information.

15. What does it mean to have an ABNORMAL screen?

If your child has an ABNORMAL screen, you will be contacted by a pediatric cardiologist’s office for further guidance. Many students ultimately are cleared.

17. What does a NORMAL screen mean? Does it mean my child has no risk of cardiac issues?

A NORMAL screen rules out over 65% of the cardiac causes of sudden cardiac death. The screen does not completely rule out all causes, but does focus on the most common.

18. Who do I contact if I have additional questions?

If you have any further questions, please feel free to contact Kate Savoy, LPCF Heart Screens Coordinator, at 225-768-2590 or kate.savoy@lpcf.com.

LPCF Office Address:

2137-A Quail Run Drive, Suite A
Baton Rouge, LA 70808