The principle of exercise stress test and myocardial perfusions scintigraphy (MPS) is based on the detection of exercise-induced myocardial ischaemia by ECG and non-invasive assessment of myocardial perfusion respectively, MPS being the more sensitive method. The exercise stress test is the method of choice in patients with a normal resting ECG and good exercise tolerance, whereas MPS is a suitable test for patients with abnormal resting ECG and/or exercise intolerance. Stressors for MPS included exercise, pharmacological stress, or a combination. Both exercise stress test and MPS are suitable for the evaluation of patients with chest pain and intermediate pre-test probability of significant coronary artery disease. For patients with high pre-test probability, both tests are helpful for risk stratification. Neither test makes sense for the evaluation of patients with chest pain and low pre-test probability of significant coronary artery disease or unselected asymptomatic patients.