

Evaluation Process and Checklist

History of Circumstances Surrounding Symptoms

Syncope

- What was patient doing at time of episode? _____
- When did it occur?
 - With exercise While driving In hot environment (e.g., shower)
 - After prolonged standing With identifiable trigger (e.g., sight of blood)
- Patient's position at time of episode
 - Lying down Sitting Standing
- How long was patient unconscious? _____
- How often is patient experiencing the symptoms? _____
- Associated symptoms
 - Dizziness Pallor Cold sweat Nausea Loss of bladder or bowel control Seizure
- Dietary
 - Amount of food and beverage consumed prior to episode _____
 - Breakfast consumed on day of episode? Yes No
 - Amount of fluid consumed per day (teens target 50-70 oz. per day) _____
 - Caffeine consumed regularly and/or on day of episode? Yes No
 - Amount of salt present in diet _____
 - Number of times patient urinates per day _____
 - Color of urine _____

Palpitations

- With syncope? Yes No With exercise? Yes No
- Rate Mild (<100 bpm) Moderate (100-150 bpm) Racing (>150 bpm)
- Can patient tap out rate? Yes No
- How long did palpitations last? _____
- How often is patient experiencing palpitations? _____

Family History

- Sudden cardiac death Deafness
- Cardiomyopathy Long QT Syndrome
- Implantable defibrillator or pacemaker Brugada Syndrome
- Syncope

Physical Examination Normal Abnormal

Notes _____

Electrocardiogram Read by pediatric cardiologist or pediatric electrophysiologist



Syncope and Palpitation Evaluation and Guidelines



For an urgent consultation, call the Physician Direct Connect Line at (614) 355-0221 or (877) 355-0221. To make a referral, call (614) 722-6200 or (877) 722-6220, or visit NationwideChildrens.org/HeartCenter.



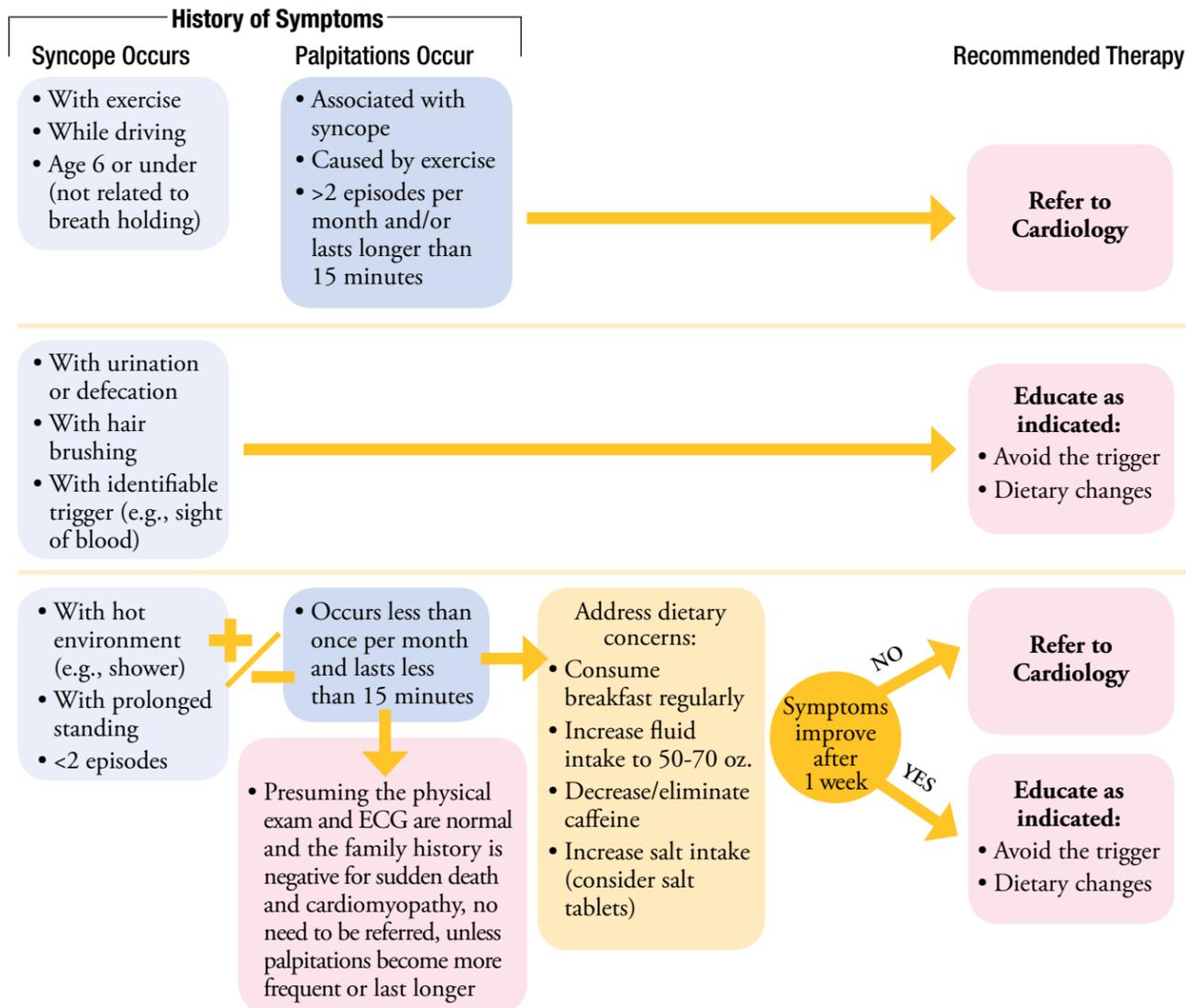
Syncope and Palpitations

Syncope and palpitations are common complaints in the pediatric and adolescent age groups. Initial work-up for patients presenting with palpitations is often aimed at ruling out an arrhythmia. Palpitations may be due to autonomic nervous system dysfunction that is the cause of dizziness and syncope; therefore, the work-up for these symptoms (palpitations, dizziness and syncope) is along a continuum. The diagnostic and therapeutic modalities that are most appropriate for the individual patient can be determined after completing a patient history, physical examination, family history and ECG.

Guidelines and Management

If physical examination, ECG and family history are negative, the following algorithm can be used:

Syncope, Palpitations and Dizziness (Pediatric/Adolescent)



Visual Aid: Why Children Faint

