



Syncope and Palpitation Evaluation and Guidelines



**NATIONWIDE
CHILDREN'S**

When your child needs a hospital, everything matters.SM

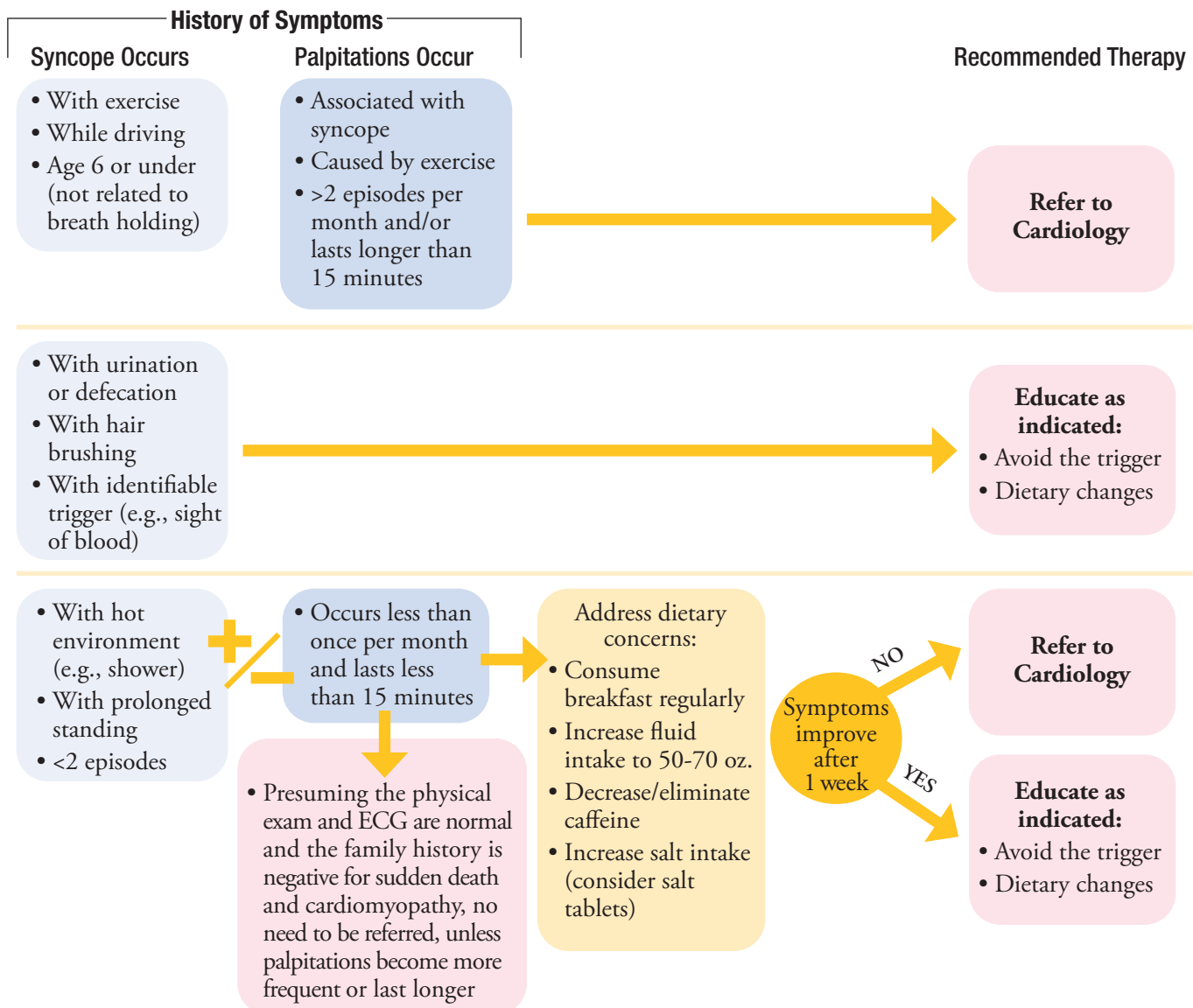
Syncope and Palpitations

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.

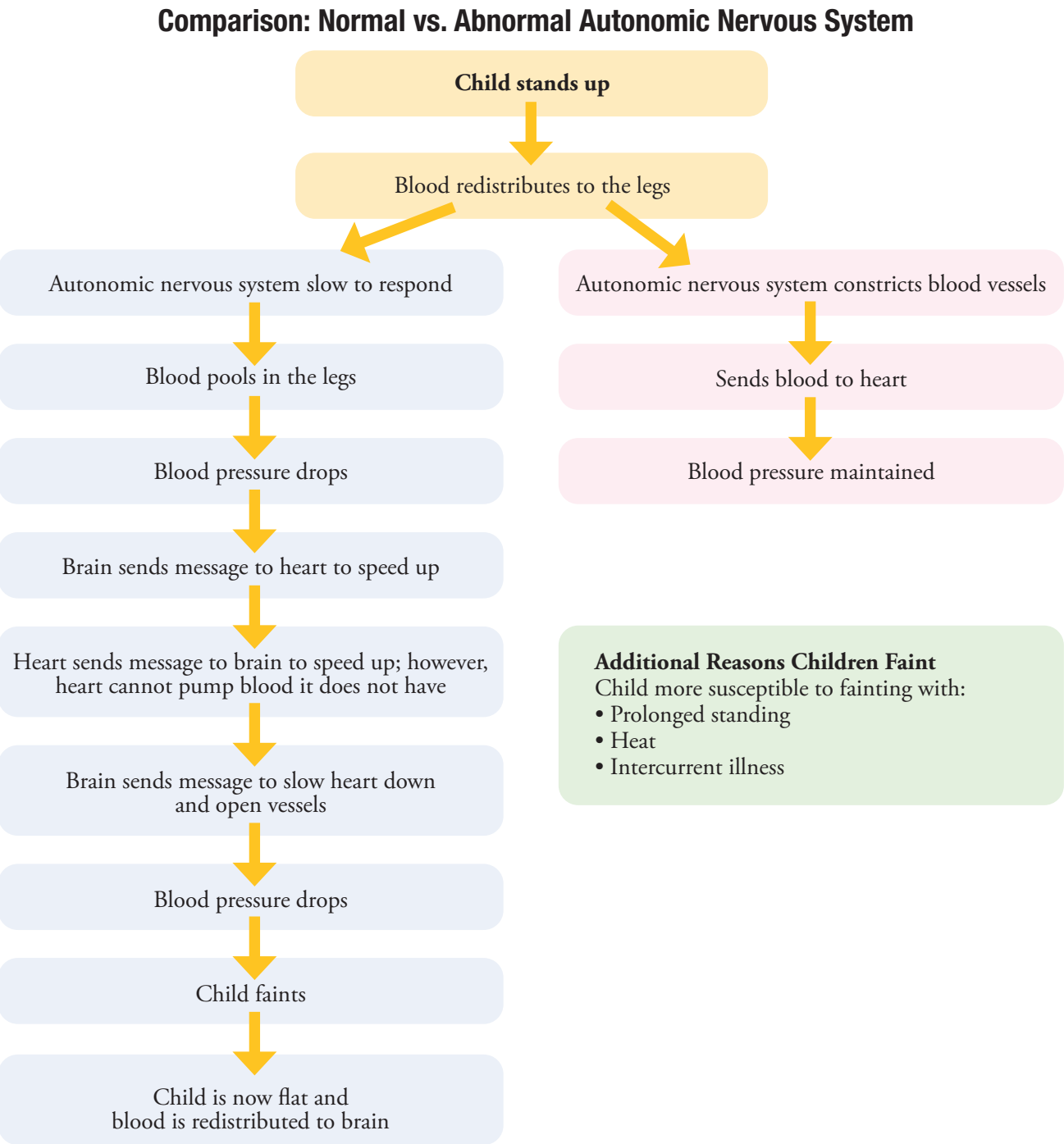
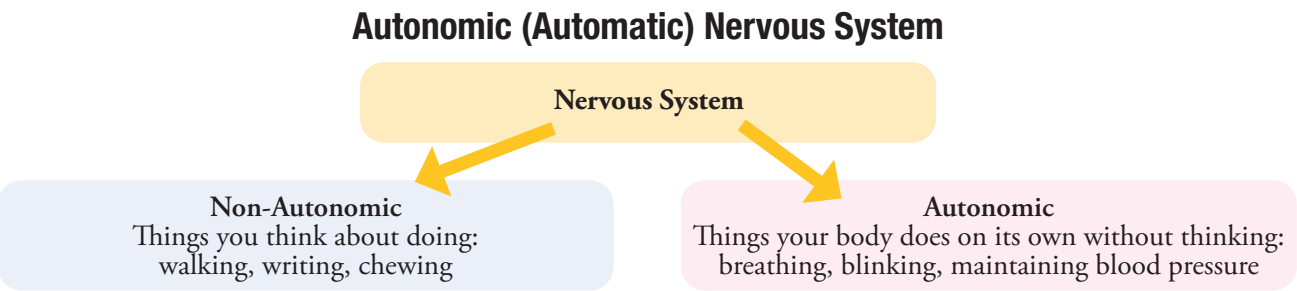
Guidelines and Management

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



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

- | | |
|---|---|
| <input type="checkbox"/> Sudden cardiac death | <input type="checkbox"/> Deafness |
| <input type="checkbox"/> Cardiomyopathy | <input type="checkbox"/> Long QT Syndrome |
| <input type="checkbox"/> Implantable defibrillator or pacemaker | <input type="checkbox"/> Brugada Syndrome |
| <input type="checkbox"/> Syncope | |

Physical Examination ☐ Normal ☐ Abnormal

Notes _____

Electrocardiogram ☐ Read by pediatric cardiologist or pediatric electrophysiologist

Referrals and Consultations

Online: [NationwideChildrens.org/HeartCenter](https://www.nationwidechildrens.org/HeartCenter)

Phone: (614) 722-6200 or (877) 722-6220 | Fax: (614) 722-4000

Physician Direct Connect Line for 24-hour urgent physician consultations:
(614) 355-0221 or (877) 355-0221.

