

5-MUSTS For the patient with Syncope

Specific History

5 THINGS IN THE HISTORY

1. What Happened just before? Was there a Prodrome?
2. What Happened DURING the event? Was there a seizure?
3. What happened right after? Back to normal or decreased conscious state
4. Any previous episodes?
5. Family History of syncope or sudden cardiac Death?

Syncope PLUS Rules

5 THINGS THAT GO WITH SYNCOPE

1. Syncope PLUS Headache
2. Syncope PLUS Chest Pain
3. Syncope PLUS Palpitations
4. Syncope PLUS SOB
5. Syncope PLUS Abdominal pain

The ECG

5 THINGS TO LOOK FOR IN THE ECG

1. Ischaemia
2. Blocks including, Mobitz, Fascicular and BRUGADA
3. Cardiomyopathy
4. Abnormal intervals: Short PR(WPW), Long/Short QT
5. Evidence of PE: Right heart strain, T wave inversion ant/inf

Examination Specifics

SPECIFIC EXAMINATIONS

1. Cardiac: Murmurs of MI or AS
2. Abdo: Pulsatile mass
3. PR Exam: Bleeding
4. Neurological: Any deficit
5. Tongue: Tongue biting

Who are the HIGH Risk Patients?

ADMIT

1. Older patients usually > 65yo
2. Syncope and NO Prodrome
3. Cardiac History including arrhythmias, CCF, structural heart disease
4. Abnormal ECG
5. Syncope PLUS Criteria