Advanced Cardiac Admission Protocol (ACAP)
Syncope Pathway (SELF)
To be completed on patients with a diagnosis of Syncope

**Syncope History:**
- Witness ☐ Patient ☐
- Length of Episode: ____________________________
- Activities prior Syncope: ____________________________
- Prodrome: ____________________________
- After Syncope: ____________________________

**Working Plan:**
- Short Period, Self Limited
- Early & Rapid Onset
- Transient LOC*
- Fall, Full Recovery

**Suspected diagnosis**
- CARDIAC SYNCOPE

**Orthostatic hypotension:**
- Cough, Sneeze, Swallowing
- Defication, Visceral Pain
- Post micturation, post exercise
- Carotid Sinus Syncope → Carotid sinus
  * Perform with patient supine or upright

**Neural Mediated reflex syncopal syndrome:**
- Vasovagal → head up tilt table in/out Pt.
- Situational faint:
  - Cough, Sneeze, Swallowing
  - Defication, Visceral Pain
  - Post micturation, post exercise
  - *Perform with patient supine or upright

**Admission Reasons:** (Please mark all that apply)
- History of CHF ☐ Chest Pain or ACS ☐ BP <90 mmHg
- EKG Changes ☐ Arrhythmia ☐ ST Changes ☐ Long QT
- SOB ☐ History of CAD ☐ Family history of SCD
- Age> 60 ☐ Syncope in young patient with no explanation
- BP: Supine: -----/----- HR: ----- Standing: -----/----- HR: -----

**Is there evidence of trauma?**
- No ☐ Yes ☐

**Consult:**
- Consult trauma
  - Intoxication
  - Metabolic disorder: ________________
  - Intracranial hemorrhage
  - Seizure
  - Transient Ischemic attack

**Is there evidence of ?**
- Bradyarrhythmia ☐ Tachyarrhythmia ☐
- A. Flutter ☐ A. Fib ☐
- SVT ☐ VT ☐
- 2nd & 3rd AV Block ☐ A. Flutter
- Bundle Branch Block ☐ A. Flutter
- Sinus Bradycardia ☐ Ablation
- Aortic Stenosis ☐ Cardiac Surgery
- Critical Valvular Heart Disease ☐ Pacemaker
- LV Systolic Dysfunction ☐ Full EP Study
- Wall Motion Abnormality ☐ Sinus node-His bundle Study
- Structural heart Disease ☐ WPW
- Cardiac Cath ☐ Long QT Syndrome
- CVA ☐ Burgada's Syndrome
- Head CT ☐ Other:
- Seizure Head CT ☐ Other Etiology
- Defication, Visceral Pain ☐ Congenital, Infiltrative
- Cough, Sneeze, Swallowing
- Carotid Sinus Syncope → Carotid sinus
  * Perform with patient supine or upright

**Comments:**
- ___________________________________________________________________
- ___________________________________________________________________
- ___________________________________________________________________
- ___________________________________________________________________

* LOC: Loss of Consciousness

**Resident ____________________________    Date _____________**

**EP Consult**
- Medical Therapy ☐ Full EP Study
- Imaging Stress Test ☐ Pacemaker
- Cardiac Cath ☐ Ablation
- Cardiac Surgery ☐ ICD
- Head up tilt table test ☐ D/C Home
- Prolonged EKG monitoring ☐ Transtelephonic monitoring
- Holter monitoring ☐ Implantable loop recording
- If no evidence of Cardiac disease consider one of these tests