Table 1

Clinical history in a patient with suspected syncope

Patient's posture immediately before the event
- Upright
- Supine
- Seated

Precipitating factors
- Fatigue, sleep, food deprivation
- Ambient temperature
- Alcohol consumption
- Pain, strong emotions such as fear or apprehension
- Physical exercise

Prodromal symptoms
- Dizziness, lightheadedness
- Vertigo, sweating, epigastric discomfort, nausea, blurred vision, paraesthesia, chest pain, palpitations, headache, focal neurological deficits, déjà vu, confusion

Appearance during event
- Pallor, tongue biting, any body movements

Recovery
- Rapid
- Persisting somnolence, fatigue for minutes/hours
- Headache, neurological deficits
- Chest pain, palpitations

Medications
- Cardiac and antihypertensive medications, Parkinson's drug therapy, alpha-blockers for prostatism

Personal history
- Cardiac disease
- Parkinson's disease, dementia, diabetes

Family history
- Sudden cardiac death in young relatives
- Syncope, arrhythmias, cardiomyopathy, inherited cardiac conditions and channelopathies