

**SYNCOPE RISK STRATIFICATION TOOL**
**UNACCEPTABLE DIAGNOSIS FOR OBSERVATION: SOCIAL ADMIT, FAILURE TO THRIVE, DIZZINESS, UNABLE TO CARE FOR SELF, NEEDS PLACEMENT, UNABLE TO AMBULATE, CHRONIC ... (ANYTHING)**
**IF PATIENT MEETS ANY OF THE BELOW CRITERIA , THEN HE/SHE MUST BE ADMITTED, NOT OBSERVED.**
**ADMISSION CRITERIA (criteria that exclude the patient from observation level of care)**

- Suspected acute stroke / TIA
- Persistently altered mental status
- Witnessed seizure
- Unstable vital signs
- Documented or highly suspected unstable dysrhythmia
- Diagnostic EKG changes or positive biomarkers
- High HCC cardiac risk score > 4 points

**PATIENT MUST MEET ONE OF THE BELOW CRITERIA FOR OBSERVATION - CHECK APPLICABLE BOX(ES)**
**\*\*\*THIS RISK STRATIFICATION MUST BE COMPLETED AND PLACED IN THE CHART.\*\*\***
**OBSERVATION CRITERIA (inclusion criteria that make observation level of care a possibility)**

- Possible pathologic cause of the syncope
- Intermediate HCC cardiac risk score (2-4 points)

**Observation Unit Disposition Decision**

Benign observation course	All criteria present	<b>DISCHARGE</b>
Stable vital signs		
Deterioration of clinical course	Any criteria present	<b>ADMIT</b>
Unstable vital signs or unstable dysrhythmia		
Diagnosis requiring inpatient admission		

**HCC Cardiac Risk Score tool for Possible ACS**
**Non diagnostic EKG changes (1 point)**

- EKG ST segment changes ( < 1 mm ST seg change)
- OR T wave changes OR LBBB

**Age / sex (1 point)**

- (Male > 45 years old; Female > 55 years old)

**Past history CAD (2 points)**

- (Angina or PCI or Coronary surgery or MI)

**Cardiac Risk Factors (up to 5 points)**

- Family history of CAD
- hyperlipidemia
- diabetes mellitus
- history of smoking
- hypertension

**Chest Pain (up to 3 points)**

- substernal
- exercise related
- relieved with NTG

**Chest Pain Equivalent (up to 4 points)**

- syncope
- SOB/dyspnea
- rapid heart beat
- unexplained weakness

**ADD UP TOTAL # POINTS ABOVE:** \_\_\_\_\_

(Each Risk Factor counts as 1 point except Past history CAD = 2 points)

**LEVEL OF CARE DETERMINATION AFTER RISK STRATIFICATION (Check One):**

- Observation**
- Admit** (Use the appropriate admission order forms)

MD Signature: \_\_\_\_\_ Beeper #: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_