

Creating a Syncope Documentation Template for Your Facility

Want to reduce coding queries and improve first-pass coding accuracy? Implement a syncope documentation template.

Essential Elements for a Syncope Template

SYNCOPE DOCUMENTATION TEMPLATE

History of Present Illness: Description of event:

- Witnessed vs patient-reported
- Sudden onset vs gradual
- Duration of loss of consciousness: _____ seconds/minutes
- Activity at time of event: _____

Prodromal symptoms (check all that apply): Lightheadedness/dizziness Nausea

Diaphoresis Palpitations Visual changes (graying out, tunnel vision) None

Triggering factors: Prolonged standing Position change (lying to standing)

Emotional stress/pain Hot environment Exertion After eating None identified

Recovery: Spontaneous, rapid Required assistance Confusion/disorientation after event Injury sustained: _____

Similar episodes in the past? Yes, date of last episode: _____ No If yes, workup performed: _____

Physical Examination:

Vital Signs:

- Supine BP: /HR: ____
- Standing BP (after 3 min): /HR: ____
- Orthostatic changes present: Yes No

Cardiovascular: Regular rate and rhythm Irregular rhythm Murmur present

No murmur Other findings: _____

Neurological: Alert and oriented Focal deficits present: _____ Normal strength and sensation

Diagnostic Testing:

- EKG: Normal sinus rhythm Arrhythmia: _____
- Conduction abnormality: _____ Other: _____
- Laboratory results: CBC: _____ BMP: _____
- Glucose: _____ Troponin: _____
- Other testing: _____

Assessment and Plan:

- Diagnosis:** (check one) Syncope, vasovagal Syncope due to orthostatic hypotension
 Syncope due to [specify cardiac cause]: _____
- Syncope due to medication effect Syncope, cause undetermined Near syncope (presyncope) – NO loss of consciousness Other: _____

If syncope is secondary to another condition, specify primary diagnosis: Primary condition: _____

Relationship to syncope: _____

Plan: Discharge home Observation for monitoring Hospital admission,
reason: _____

- Cardiology consult Neurology consult
- Medication adjustment: _____
- Fall precautions DMV notification required (per state law)
- Follow up: _____

This template ensures:

- Loss of consciousness is explicitly documented
- Orthostatic vital signs are obtained and recorded
- Underlying causes are explored and documented
- Relationship between conditions is clarified
- Historical vs current episodes are distinguished

Implement this template and watch your coding query rate drop by 40-60%.