

Table 3: Key Aspects of the Physical Examination

- The electrocardiogram (and even echocardiogram) can be considered to be part of the ‘physical examination’ even though the thought may be heretical to many practitioners.
- Orthostatic hypotension (OH), this is a more common finding in older population presenting with syncope. The basic assessment can be undertaken with a standard sphygmomanometer.
- Carotid Sinus massage (CSM) is usually recommended in all patients with syncope over the age of 40 years. See earlier discussion for CSM technique and diagnostic findings.
- Pathologic cardiac murmurs may suggest the presence of structural heart disease and raise the likelihood of a cardiac cause for syncope. Echocardiographic assessment is certainly recommended if not already done.
- Upper extremity differences in blood pressure suggest either a subclavian steal or Aortic dissection.
- Carotid bruits are unlikely to be relevant to the ‘syncope’ diagnosis.