Syncope Assessment Service

Advice for patients being referred to the Syncope Assessment Service (SAS)

This sheet leaflet is to provide you with some information about what to do next and what to expect when you are seen at the Syncope Assessment Service (SAS). We hope that this will reduce any anxiety you may have about attending the hospital for this appointment. It will help the doctors and nurses who will be seeing you if you know a little about what to expect, and what to bring with you.

Why have I been referred for this appointment?
You have been referred by the Accident and Emergency Department following an unexplained fall, collapse or a blackout (the medical term for a brief loss of consciousness is ‘syncope’).

What should I bring to the clinic appointment?
Please bring a list of all your medications or the medications themselves. It is extremely useful to bring a friend or relative who has witnessed the episode(s) you have had which led to this referral. They may be able to provide us with very important additional information, such as how you look when you have had an episode or exactly how you came to collapse or have the fall. We will only ask your friend or relative questions about this with your permission. You will need someone to drive you home after the appointment as some of the blood pressure tests (explained below) may make you feel dizzy. We do not recommend that you travel home alone.

Please do not drink tea or coffee on the morning of your appointment. This can alter your heart rate and blood pressure measurements. Other non-caffeinated drinks and a full breakfast are fine.

What will happen at the clinic appointment?
You will be booked in by the ward clerk. Then you will be seen by a specialist nurse who will take your pulse, blood pressure, record a heart tracing (ECG) and take any bloods that are required. You may also have your vision and walking assessed. The nurse will perform a test called an Active Stand. This involves resting on a bed for five minutes, followed by standing up for three minutes, whilst connected to a special machine which records your heart rate and blood pressure every time your heart beats.
You will have some ECG stickers on your chest and will wear a blood pressure cuff on both your arm and finger. Please wear loose fitting clothes or alternatively we can provide you with a hospital gown.

Following this initial assessment, you will be seen by the doctor. They will ask a lot of questions, examine you and discuss your medications. Once the doctor has finished their assessment you may need further heart rate and blood pressure tests which may be able to be performed on the same day if there is time. You may be at the clinic for most of the morning. Alternatively, further tests may be booked in for another day.

If you have any questions, please do not hesitate to ask during your appointment. The nurse or doctor will be more than happy to discuss this information in more detail.

Check list for clinic appointment at the Syncope Assessment Service:

- Arrange for a friend or relative who has witnessed your episode(s) to attend the appointment with you.
- Bring an up-to-date list of your medication with you.
- Arrange transport home from the clinic so you do not have to drive yourself.

If you have any questions, please phone the Syncope Assessment Service on 01223 358314 Monday to Friday 09:00 to 17:00. We look forward to meeting you on the day of your appointment.

We are now a smoke-free site: smoking will not be allowed anywhere on the hospital site. For advice and support in quitting, contact your GP or the free NHS stop smoking helpline on 0800 169 0169.

Other formats:

If you would like this information in another language, large print or audio, please ask the department where you are being treated, to contact the patient information team: patient.information@addenbrookes.nhs.uk.

Please note: We do not currently hold many leaflets in other languages; written translation requests are funded and agreed by the department who has authored the leaflet.

Document history

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Contact number 01223 245151
Publish/Review date August 2015/August 2018
File name Syncope_assessment_service
Version number/Ref 2/PIN3264