

## The 14 Element AHA Cardiovascular Screening Checklist for Congenital and Genetic Heart Disease (Recommended for Pre-Participation Screening of Competitive Athletes)

### Personal History

**Yes No**

- 1. Chest pain/discomfort/tightness/pressure related to exertion
- 2. Unexplained syncope/near-syncope\*
- 3. Excessive exertional and unexplained dyspnea/fatigue or palpitations, associated with exercise
- 4. Prior recognition of a heart murmur
- 5. Elevated systemic blood pressure
- 6. Prior restriction from participation in sports
- 7. Prior testing for the heart, ordered by a physician

### Family History

**Yes No**

- 8. Premature death (sudden and unexpected, or otherwise) before age 50 attributable to heart disease in  $\geq 1$  relative
- 9. Disability from heart disease in close relative  $< 50$  y of age
- 10. Hypertrophic or dilated cardiomyopathy, long-QT syndrome, or other ion channelopathies, Marfan syndrome, or clinically significant arrhythmias; specific knowledge of certain cardiac conditions in family members

### Physical Examination

**Yes No**

- 11. Heart murmur\*\*
- 12. Femoral pulses to exclude aortic coarctation
- 13. Physical stigmata of Marfan syndrome
- 14. Brachial artery blood pressure (sitting position)\*\*\*

\* When determined to be not of neurcardiogenic (vasovagal) in origin. Of particular concern is syncope post-strenuous activity.

\*\* Auscultation should be performed in both sitting and standing positions (or with Valsalva maneuver). Objective is to identify murmurs of dynamic LV outflow tract obstruction.

\*\*\* Should be taken in both arms.