

Medical Questionnaire

IRREGULAR HEARTBEAT

Description: An abnormal heart rhythm, also called arrhythmia. Symptoms may include palpitations, dizziness, fainting, shortness of breath and chest pain.

Age of client: _____ Date of diagnosis: _____

Current symptoms: _____

Diagnosed or described as:

- PAC's (Premature supraventricular atrial beats)
- PAT (Paroxysmal Atrial Tachycardia)
- PVC's (Premature ventricular beats)
- PVT (Paroxysmal Ventricular Tachycardia)
- Ventricular Fibrillation
- Sick Sinus Syndrome
- Sinus Bradycardia
- Sinus Tachycardia
- Unknown/Not Sure

Testing completed:

- | | | | |
|------------------------------|------------------------------|-----------------------------|-----------------------------------|
| Electrocardiogram (ECG, EKG) | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not sure |
| ECHO | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not sure |
| Stress Test | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not sure |
| Holter Monitor | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not sure |

Cause of the irregular heartbeat:

- Alcohol
- Heart disease
- Thyroid disease
- Unknown
- Other (specify): _____

Any other heart conditions: _____