

TABLE. The 12-Element AHA Recommendations for Preparticipation Cardiovascular Screening of Competitive Athletes

†Judged not to be neurocardiogenic (vasovagal); of particular concern when related to exertion.

‡Auscultation should be performed in both supine and standing positions (or with Valsalva maneuver), specifically to identify murmurs of dynamic left ventricular outflow tract obstruction.

§Preferably taken in both arms.

Medical history*

Personal history

1. Exertional chest pain/discomfort
2. Unexplained syncope/near-syncope[†]
3. Excessive exertional and unexplained dyspnea/fatigue, associated with exercise
4. Prior recognition of a heart murmur
5. Elevated systemic blood pressure

Family history

6. Premature death (sudden and unexpected, or otherwise) before age 50 years due to heart disease, in ≥ 1 relative
7. Disability from heart disease in a close relative < 50 years of age
8. Specific knowledge of certain cardiac conditions in family members: hypertrophic or dilated cardiomyopathy, long-QT syndrome or other ion channelopathies, Marfan syndrome, or clinically important arrhythmias

Physical examination

9. Heart murmur[‡]
10. Femoral pulses to exclude aortic coarctation
11. Physical stigmata of Marfan syndrome
12. Brachial artery blood pressure (sitting position)[§]