Priority Topic: **DIZZINESS**

### Key Features:

**For a single source on this topic:** Dizziness AAFP 2017

1. In patients complaining of dizziness, **rule out serious cardiovascular, cerebrovascular, and other neurologic disease** (e.g., arrhythmia, myocardial infarction [MI], stroke, multiple sclerosis).

   **What you should study:**

   ✓ **Dizziness AAFP 2017**
   - make a complete differential diagnosis that includes serious conditions
   - consider ECG
   - perform HiNTS exam (see Key Feature 4.)
   - complete Neuro Exam

2. In patients complaining of dizziness, take a careful history to **distinguish vertigo, presyncope, and syncope**.

   **What you should study:**

   ✓ **Vertigo vs Presyncope 2012**

3. In patients complaining of dizziness, **measure postural vital signs**.

   **What you should study:**

   ✓ **Measuring Orthostatic BP CDC 2017**
4. Examine patients with dizziness closely for neurologic signs.

**What you should study:**
In addition to a regular neuro exam, a HiNTS exam should be performed

- Vertigo: a hint on the HiNTS exam
- EmCrit HiNTS exam Video

| 5. | In hypotensive dizzy patients, exclude serious conditions (e.g., MI, abdominal aortic aneurysm, sepsis, gastrointestinal bleeding) as the cause. |

**What you should study:**

- Approach to dizziness in the ED 2015
- Diagnose the cause of hypotension with a broad differential including emergency causes, even in the clinic setting

| 6. | In patients with chronic dizziness, who present with a change in baseline symptoms, reassess to rule out serious causes. |

- Just do it!

| 7. | In a dizzy patient, review medications (including prescription and over-the-counter medications) for possible reversible causes of the dizziness. |

**What you should study:**

- Dizziness AAFP 2017
8. **Investigate further** those patients complaining of dizziness who have:

- signs or symptoms of central vertigo.
- a history of trauma.
- signs, symptoms, or other reasons (e.g., anticoagulation) to suspect a possible serious underlying cause.

**What you should study:**

✓ *Approach to Dizziness in the ED 2015*

**Of interest for clinical practice, but less likely to show up on the exam:**

✓ *PPPD Pract Neuro 2017*