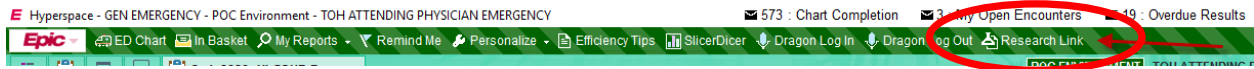


Appendix 1. Electronic Health Records Integration – EPIC and Meditech



The screenshot shows the 'BestPractice Advisories' section in the EPIC EHR system. The section is titled 'BestPractice Advisories' and has a 'Collapse All' button. It is divided into two categories: 'High Priority (1)' and 'Research (1)'. Under 'High Priority (1)', there is a message: 'Allergies have not been verified during this encounter.' with a link to 'Allergies Activity'. Under 'Research (1)', there is a message: 'Patient has been identified as a potential candidate for the Syncope study. Please click the link below.' with a link to 'Syncope Study' circled in red. Below the research message, there is an 'Acknowledge Reason' section with buttons for 'Follow up actions taken' and 'Ineligible', and an 'Accept' button.

The screenshot shows the 'My Note' section in the EPIC EHR system. The 'Scoring Tools' tab is selected, and the 'Canadian Syncope Risk Score' tool is displayed. The tool includes a 'Time taken' field with a date of '27/4/2021' and a value of '1059'. There is a 'Responsible' field and a 'Show All Choices' checkbox. The tool is divided into several sections: 'Criteria', 'When to Use?', 'Clinical Evaluation', 'Vasovagal Predisposition', 'History of heart disease', and 'Any ED systolic BP <90 or >180 mmHg'. Each section contains specific criteria and evaluation options.

← **Clinical Decision Rules** ...

▼ **Canadian Syncope Risk Score** ...

WHEN TO USE

Patients 18 years and older presenting within 24 hours of syncope

WHAT DOES IT PREDICT?

Predicts risk of 30-day serious adverse events associated with syncope, defined as any of the following: death, cardiac (arrhythmic and non-arrhythmic) or non-cardiac serious conditions

EXCLUSION CRITERIA

- not true syncope
- prolonged LOC (greater than 5 minutes)
- change in mental status from baseline (including under effect of alcohol/drugs)
- witnessed obvious seizure
- head trauma then LOC
- significant trauma requiring admission

WHEN NOT TO ORDER TROPONIN:

- Patients who fulfill all the following criteria (ultra-low risk criteria) do not require troponin testing and can be assumed as normal
- Age less than or equal to 50 years
- No heart disease (CAD, CHF, valvular HD, cardiomyopathy, non-sinus rhythm or device implantation)
- Normal ECG (QRS axis greater than or equal to -30° to less than or equal to $+100^\circ$, QRS less than or equal to 130ms, cQT less than or equal to 480ms)
- Clinical impression: non-cardiac syncope

RECOMMENDATION

Risk-Category	Low-Risk Score 0-1	Medium-Risk Score 1 to 2	High-Risk Score 2-3
Recommendation	Discharge from the emergency	Discharge with 15-day outpatient cardiac monitoring	Consider short course of hospitalization

The recommendations are based on the study results shown below:

CSRS Score	Risk Category	All deaths*	Arrhythmic outcomes N (%)			Non-Arrhythmia N (%)	All outcomes N (%)
			Death from unknown cause	Ventricular arrhythmia	Supraventricular/Atrial arrhythmia		
-3 & -2	Very Low	0%	0%	0%	0.1%	0.2%	0.3%