

# PRIMARY CARE MANAGEMENT GUIDELINES

## Palpitations

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NATIONAL GUIDELINE

DISTRICT HEALTH BOARD: National

**Palpitations:** the sensation of unusual heart rate or rhythm or extra heart beats. This guideline is for people with normal cardiac examination and no cardiac symptoms (syncope, pre-syncope, possible angina, heart failure).

CLINICAL PROBLEM (Clinical Determinants)	ACTIONS	LOCAL IMPLEMENTATION REQUIREMENTS
<b>ONE OR TWO ISOLATED EXTRA OR MISSED BEATS NOT ASSOCIATED WITH OTHER SYMPTOMS</b>		
Frequency less than weekly	Reassure	
Frequency weekly or more often	Electrocardiogram (ECG), electrolytes, creatinine, thyroid function tests <sup>1</sup> [Full blood count (FBC), glucose and lipids if indicated]	Local ECG availability details Discuss appropriate indications for FBC, glucose and lipids
Normal ECG <sup>2</sup>	Reassure	
<b>SINGLE PROLONGED (&gt;30 SEC) EPISODE OF PALPITATIONS</b>		
All patients	ECG, electrolytes, creatinine, thyroid function tests <sup>1</sup> [FBC, glucose and lipids if indicated]	Local ECG availability details Discuss appropriate indications for FBC, glucose and lipids
Normal ECG <sup>2</sup>	Reassure	
<b>RECURRENT RUNS OF IRREGULAR OR RAPID HEART BEAT</b>		
All patients	Consult Specialist AND ECG, electrolytes, creatinine, thyroid function tests <sup>1</sup> [FBC, glucose and lipids if indicated]	Discuss local GP access to Holter monitoring Local ECG availability details Discuss appropriate indications for FBC, glucose and lipids
<b>ABNORMAL ECG</b>		
New Atrial Fibrillation (Onset less than 36 hours)	Refer to Acute Medical Team for consideration of cardioversion	phone details - Emergency Dept in some areas - Cardiologist in some areas
Atrial Fibrillation (Onset more than 36 hours)	Consult Specialist, anticoagulate and rate control if appropriate	
All other abnormalities	Consult Specialist	Local cardiology clinic details
<b>CONCURRENT MEDICATION THAT COULD CAUSE ARRHYTHMIAS<sup>3</sup></b>		
Concurrent medication that could cause arrhythmias <sup>3</sup>	Change as appropriate	

SEE NOTES ON REVERSE >>>

### NOTES:

1. Abnormalities in thyroid function, electrolytes and renal function expected to be managed as appropriate.
2. Normal ECG includes single, monomorphic ectopic beats.
3. Medication that could cause palpitations includes nicotine replacement therapy, bupropion (Zyban), caffeine, terfenadine, macrolide antibiotics (e.g. erythromycin), tricyclic antidepressants, anti-psychotics, theophylline, bronchodilators, pseudoephedrine.

### REFERRAL LETTER INFORMATION

- Demographics
- Specific critical determinants leading to referral
- History and findings, relevant investigations (e.g. ECG, blood tests), past medical history, medications (current and past)

### ADDITIONAL INFORMATION

The Elective Services National Referral Guidelines & Clinical Priority Assessment Criteria and the Palpitations Primary Care Management Guidelines can be found at: [www.electiveservices.govt.nz](http://www.electiveservices.govt.nz)

*This management guideline has been prepared to provide general guidance with respect to a specific clinical condition. It should be used only as an aid for clinical decision making and in conjunction with other information available. The material has been assembled by a group of primary care practitioners and specialists in the field. Where evidence based information is available, it has been utilised by the group. In the absence of evidence based information, the guideline consists of a consensus view of current, generally accepted clinical practice.*