

Atrial Fibrillation

Focused History

1. **Brief History:** Basic brief history of the illness and its course: well controlled or not, cardioverted or not, complications in past.
2. **Interval History:** Medical or social changes since last visit.
3. **Patient understanding** of why they are being treated.
4. **Compliance** with anticoagulation and safety recommendations for anticoagulation: Do they know what to do if they get cut or injured?
5. **Symptoms of atrial fibrillation:** Fatigue, palpitations, weakness, dizziness, chest pain, etc.
6. **Anticipated possible complications:** TIA or CVA symptoms (e.g., numbness or weakness), side effects of medications.
7. **Medications:** Use a drug reference to check for side effects, adverse drug effects, and possible drug–drug interactions
8. Can you and the patient think of how to **avoid complications in future?**

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Focused Physical Exam

Look for signs of the disease or condition and signs of anticipated complications. The extent of the physical exam is also guided by the patient's history, and so the following list is not exhaustive.

1. **Overall appearance**
2. **Vital signs for all chronic conditions:** Blood pressure (BP), pulse, weight and height or BMI if relevant. *Hints:* Pulse rate can be a check for compliance with beta-blockers. Consider if orthostatic BP indicated.
3. **Cardiovascular and pulmonary exam:** Heart rhythm; may also include neck veins, checking for edema; depends on history.
4. **Other exam** as indicated.