Dizziness

**Focused History**

**History of Present Illness**

*Caveat: First question, “what do you mean by dizzy?”* People use “dizzy” to describe different sensations. What does this patient mean?

- Vertigo: Sensation of rotation, tipping, or motion.
- Lightheadedness or presyncope: Feeling of passing out, losing consciousness.
- Dysequilibrium or imbalance: Not presyncopal, but loss of balance.
- Nonspecific, ill defined: Not vertiginous, not presyncopal, not easily classified as dysequilibrium.

1. **Character/circumstances:** Type of dizziness as above. How did it start? (antecedent URI; associated with any injuries?)
2. **Exacerbating/alleviating factors:** Orthostatic? Turning head or body a certain way? During or after activity? Under stress?
4. **Severity:** Interferes with going out, activities, job, or hobbies?
5. **Timing:**
   - Pattern: acute or chronic, constant or intermittent?
   - Onset: sudden or gradual?
   - Duration of each episode and total time the symptom is present?
6. **Relevant past medical history:** Medications currently in use or recently stopped (prescription and over the counter); allergies; cervical arthritis; cardiovascular problems, rhythm disturbances, or TIAs.
7. **Relevant social history:** Occupation affected? Alcohol use? What are patient’s concerns?
8. **Relevant family history:** Ear or hearing problems, others as indicated.

---

**Focused Physical Exam**

1. **Vital signs:** Including orthostatic blood pressure and pulse rate.
2. **General appearance:** Evidence of trauma if the patient has or may have fallen.
3. **HEENT:** If vertigo, test hearing. Consider auscultation for carotid bruits if indicated—gently, especially in the older patient!
4. **Neck movement**
5. **Neurological exam:** Cranial nerves, strength, sensation, reflexes, cerebellar. Special: Romberg (when in doubt about how much of a neurological exam to do, do it all).
6. **Cardiovascular exam:** Inspection, auscultation, PMI.
7. **Other parts of physical exam** as indicated.
8. **Special:** Can try hyperventilating patient. Barany’s or Dix Hallpike:
   - BPV: 10 seconds or less.
   - Vertigo and nystagmus: Appears within seconds of change in position.
   - Central vertigo: Not fatigable, lasts longer, appears immediately.