



**Children's Heart Specialists
Of Georgia**

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**Heart Screen For Athletes
Medical History Form**

Name of athlete _____ DOB _____ Today's Date _____

- Has the athlete ever had chest pain, discomfort, or pressure during or after exercise? No Yes
- Has the athlete ever fainted or passed out during or after exercise? No Yes
- Has the athlete ever fainted or passed out with emotions (Laughing, crying, startling)? No Yes
- Has the athlete ever had unusual or extreme fatigue with exercise? No Yes
- Has the athlete ever had unusual or extreme shortness of breath with exercise? No Yes
- Has the athlete ever mentioned/complained that his/her heart is beating fast or racing? No Yes
- Has the athlete ever mentioned/complained that his/her heart is skipping a beat? No Yes
- Has a doctor/medical professional ever restricted the athlete from participating in sports? No Yes
- Has a doctor/medical professional ever diagnosed the athlete with heart problem? No Yes
- Has a doctor/medical professional ever diagnosed the athlete with heart murmur? No Yes
- Has a doctor/medical professional ever diagnosed the athlete with high blood pressure? No Yes
- Has a doctor/medical professional ever diagnosed the athlete with Kawasaki Disease? No Yes
- Has a doctor/medical professional ever ordered a test on the athlete's heart? No Yes
- Is there anyone in the athlete's family who died of a "heart condition" before age 50? No Yes
- Is there anyone in the athlete's family who had a sudden/unexpected death before age 50? No Yes
- Is there anyone in the athlete's family who died in their sleep before age 50? No Yes
- Is there anyone in the athlete's family who died by drowning or while swimming? No Yes
- Is there anyone in the athlete's family who died of sudden infant death syndrome (SIDS)? No Yes
- Is there anyone in the athlete's family with unexplained fainting/passed out spells? No Yes
- Has anyone in the athlete's family been diagnosed with a heart condition before age 50? No Yes
- Has anyone in the athlete's family been diagnosed with Hypertrophic Cardiomyopathy? No Yes
- Has anyone in the athlete's family been diagnosed with Dilated Cardiomyopathy? No Yes
- Has anyone in the athlete's family been diagnosed with Long QT syndrome? No Yes
- Has anyone in the athlete's family been diagnosed with Short QT syndrome? No Yes
- Has anyone in the athlete's family been diagnosed with Brugada syndrome? No Yes
- Has anyone in the athlete's family been diagnosed with Marfan syndrome? No Yes
- Has anyone in the athlete's family been diagnosed with aortic rupture? No Yes
- Has anyone in the athlete's family been diagnosed with Ehlers-Danlos syndrome? No Yes
- Has anyone in the athlete's family been diagnosed with Congenital deafness/Deaf at birth? No Yes
- Does anyone in the athlete's family have Arrhythmogenic Right Ventricular Cardiomyopathy? No Yes
- Does anyone in the athlete's family have Catecholamine Polymorphic Ventricular Tachycardia? No Yes
- Has anyone in the athlete's family been diagnosed with coronary artery disease at age < 50? No Yes
- Has anyone in the athlete's family had positive genetic testing for a heart condition? No Yes

If there is a "Yes" answer to **ANY** of the questions above, strongly consider a cardiac evaluation.

SMYRNA

DOUGLASVILLE

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"Comprehensive Cardiac Care For All Children."