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Abstract. Objectives: To determine the sensitivity and specificity of the San Francisco Syncope Rule (SFSR) electrocardiogram (ECG) criteria for determining cardiac outcomes and to define the specific ECG findings that are the most important in patients with syncope. Methods: A consecutive cohort of emergency department (ED) patients with syncope or near syncope was considered.

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The electrocardiogram is used frequently in the emergency department (ED) and other acute care settings; numerous presentations may require a 12-lead electrocardiogram. For instance, the most frequent indication for ECG performance in the ED is the presence of chest pain; other complaints include dyspnea and syncope.

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