

# POTS Screening: Standing Test Instructions

## Set everything up in advance.

1. Obtain a reliable heart rate (HR) and blood pressure (BP) monitor
2. Create a chart for recording HR and BP at intervals: supine, 2, 5, and 10 minutes.
3. If available, arrange for someone to take the readings and record them.
4. Do not wear tight clothing or compression garments during the test.

## Write down your results

Note the date and time of day that each test is done.

Record HR and BP at the end of each time interval, noting any symptoms (4 sets of readings).

**Supine:** rest quietly, legs uncrossed for 5-10 minutes. Then stand for the next part.

**Standing intervals:** 2, 5, and 10 minutes. **IMPORTANT:** Stand completely still, legs uncrossed. If you feel like fainting, stop right away and lie down.

## Take the results to your clinician along with printouts of these three items

1. This handout.
2. The [POTS UK handout](#). Highlight the “Active Stand Test” section.
3. This [excellent POTS review article \(190\)](#).

***A home standing test does not substitute for a full clinical evaluation. Clinicians who are not deeply familiar with POTS diagnosis may find these three printouts helpful.***

**The current criteria for POTS diagnosis in adults:** A sustained increase in heart rate of 30 beats per minute (bpm) or more within 10 minutes of standing. (Teens  $\geq$ 40 bpm)

**A note about blood pressure:** The blood pressure in POTS is usually stable, although this varies. It is important to record both heart rate and blood pressure because orthostatic hypotension may also cause heart rate increases with standing.

## The standing test is not perfect

- It is difficult to stand completely still, especially if you are recording your own results. A tilt table test removes the problem of spontaneous leg muscle contractions which may alter test results. Tilt tables are not available at most medical centers.
- Results may vary with hydration, salt intake, time of day, and other factors.
- The 30 bpm cutoff for diagnosis is arbitrary, but generally agreed upon. Some people have a clear POTS-like clinical picture but do not meet the 30 bpm cutoff.