

How to use the ANS Anamnesis

Clinician-completed during the visit, with the patient present (typical: 8–12 min).

Use this form as a structured interview. Record Yes/No, frequency and severity (0–10) when relevant, and capture concrete examples.

1) Before you start (60 seconds)

- Confirm patient identity and ensure privacy (and an interpreter if needed).
- Explain the purpose: to map symptoms that may relate to autonomic regulation (sleep, orthostatic symptoms, GI, sweating/temperature, bladder, pain, fatigue/mood).
- Invite the patient to answer using the last 2–4 weeks unless a different time frame is clinically relevant.

2) Completing sections A–I

- Start with the patient's narrative (main complaint, onset, triggers, pattern) and then proceed domain by domain.
- For episodic symptoms, document: trigger/context, duration, peak severity, recovery time, and what helps (hydration, salt, compression, cooling, pacing).
- If you suspect a red flag, stop the form and follow your clinic's urgent evaluation pathway.

3) Objective tracking pages

- HRV: record at least 3 measurements; ideally same time of day and similar conditions. Enter PRE and POST around NESA sessions and note the device/position.
- Sleep/actigraphy log (Days 1–42): if the patient has never used sleep actigraphy, use Days 1–7 as baseline before or at the start of the first cycle.
- Cortisol: up to 3 measurements. Record date/time, result (with units) and any confounders (illness, steroids, shift work).

4) Red flags & safety

- Chest pain, syncope with injury, severe shortness of breath, or new neurological deficits: consider urgent medical assessment.
- Any thoughts of self-harm or feeling unsafe: activate the clinic safety protocol immediately.
- Marked orthostatic symptoms: consider bedside lying/standing HR and BP, hydration/salt review, and medication review.

Clinician summary & checklist

Clinician summary & checklist

Key positive domains (tick): Sleep / Orthostatic / GI / Thermoregulation / GU / Pain / Fatigue-Mood

Main triggers & modifiers:

Objective metrics summary (HRV, sleep, cortisol):

Plan / next steps (tests, referrals, follow-up):

Quick checklist

- ☐ Patient details completed
- ☐ Red flags screened
- ☐ HRV measurement instructions provided
- ☐ Sleep/actigraphy baseline planned (if needed)
- ☐ Device(s) documented (Whoop/Oura/other)
- ☐ Follow-up plan agreed and documented

Note: For any licensed questionnaires, administer the official original version in the patient's language and comply with each instrument's permissions/licence.