**Table S1 – Criteria for Exercise Stress Test**

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| 1. **Personal History**
* Cardiac-related syncope and/or pre-syncope during and after exertion for no apparent reason
* Angina during exertion
* Dyspnea during exertion
* Unusual fatigue during exercise
* Palpitations during exercise
* History of Rheumatic Fever
1. **Family History**
* Family history (first or second degree relative) of SCD or any unexpected or unexplained sudden death (i.e. drowning, car accident, or sudden infant death syndrome) < 50 yr
* \*Family history (first or second degree relative) of inheritable heart conditions (hypertrophic cardiomyopathy, arrhythmogenic right ventricular cardiomyopathy, Marfan’s syndrome, long QT syndrome, short QT syndrome, Brugada syndrome, Wolf-Parkinson-White Syndrome, catecholaminergic polymorphic ventricular tachycardia, dilated cardiomyopathy, thoracic aorta aneurysm, bicuspid aortic valve, or other potentially disabling CV disease)
* Family history of premature CAD (first degree relative) < 50 years

\*A family history of autosomal dominant disorders requires follow-up in first and second degree relatives.1. **Physical Examination**
* >180/110 mmHg on more than one reading
* Mid or end-systolic clicks
* Abnormal second heart sound (single or widely split and fixed with respiration)
* Any diastolic murmur
* Systolic murmur grade ≥ 2
* Abnormal femoral pulses indicative of aortic coarctation
* Morphological features of Marfan’s syndrome
* Irregular heart rate
1. **Cardiovascular Risk**
* Intermediate (10-19%) to high (≥ 20%) Framingham Risk Score
* Diabetes (≥ 7.0 mmol/L or post-prandial ≥ 11.1 mmol/L)
* > 8 mmol/L blood cholesterol
1. **Age ≥ 65 years**
2. **Abnormal resting 12-lead ECG (‘Seattle Criteria’)**
3. **Previously known atrial fibrillation**
4. **Other previous potentially concerning conditions** (i.e. pulmonary embolism, query myocarditis, epicardial cyst)
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