Fainting safety plan

Discuss fainting or near-fainting with a healthcare professional. This plan does not establish its cause.

Editable PDF: replace or delete the fictional examples. Blank PDF: print and write. Guidance follows.

TELL THE HEALTHCARE TEAM

History, situations and advice received

e.g. I felt faint during a previous blood test.

Questions I need answered

e.g. What assessment and precautions do I need?

AGREE BEFORE PRACTICE OR A PROCEDURE

Position, support and practical precautions

e.g. Record the position and support agreed with healthcare staff.

Early signs and the response agreed with staff

e.g. Ask staff what to do at the first signs of faintness.

Whether applied tension is appropriate; any adaptations

e.g. Ask whether applied tension is suitable for me before practising it.

What still needs discussing before practice

e.g. Confirm the plan with the clinic before the appointment.

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Using this resource

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What this helps with

Blood-related fear does not produce the same physical response in everyone. Some people experience a drop in blood pressure and may faint; others feel anxious without fainting. Dizziness alone does not tell you the cause. This planning sheet helps you explain your history and agree appropriate safeguards before exposure or healthcare. It is not a test of whether you can remain standing, and it should not be used to diagnose fainting yourself.

How to use it

1. Describe previous fainting or near-fainting episodes briefly, including any medical advice received.
2. Identify the triggers you want help with without seeking them out.
3. Ask a healthcare professional what needs assessing and what warning signs to act on.
4. Record an agreed position, support and response if you feel faint.
5. Bring the plan to your therapist before arranging blood-related exposure.

A fictional worked example

Amy avoided films and first-aid discussions because the mention of blood made her feel unwell. She had also fainted once during a procedure but had never discussed the episode. Before planning exposure, she spoke to her GP and told her therapist what had happened. Her plan recorded how to alert staff, the position advised for appointments and what to do if warning signs appeared. Practice then began with a non-graphic conversation, using the agreed support. Amy did not try to prove she could stay standing or assume that every dizzy feeling was simply anxiety.

Keep in mind

Seek medical advice about unexplained fainting or new symptoms. If you feel faint, stop, tell the person supporting you and sit or lie down safely according to medical advice. Do not create bleeding, use injury simulations unexpectedly or attempt exposure alone when fainting is possible.

Sources and attribution

Guy's and St Thomas' NHS Foundation Trust. (2024). Needle phobia and overcoming your fear.

Original material informed by the sources above. No outside organisation endorses this worksheet.

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