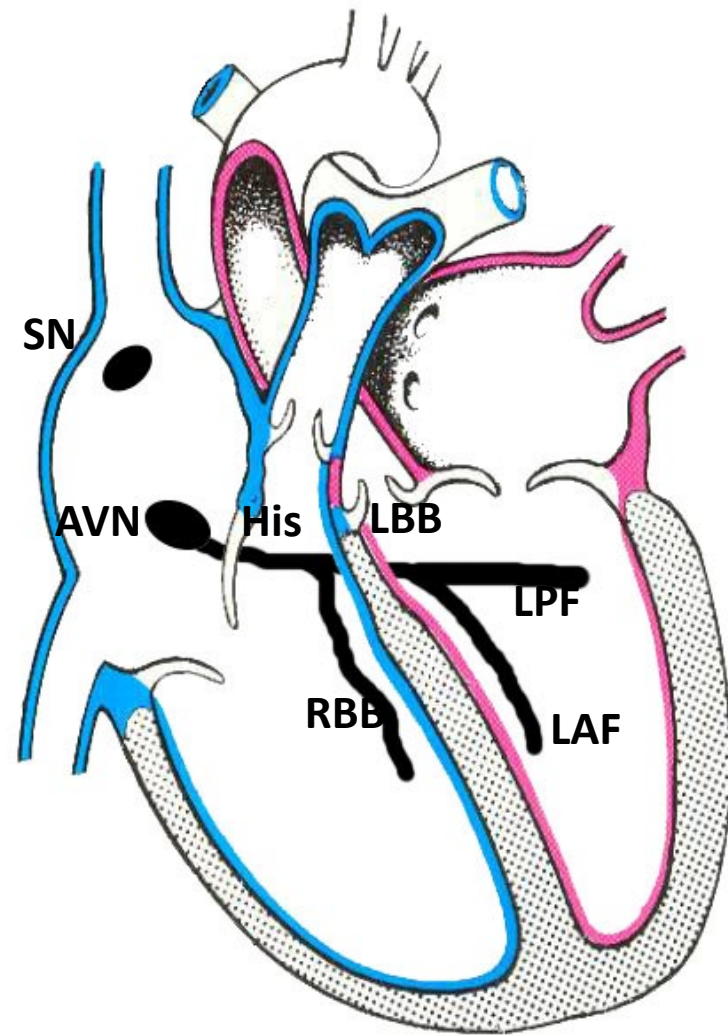


# EKG

Ali Al-Mudamgha, MD, FACC, FHRS  
Director, Cardiac Electrophysiology  
St. Joseph's Hospital  
Syracuse, NY



# QUESTION

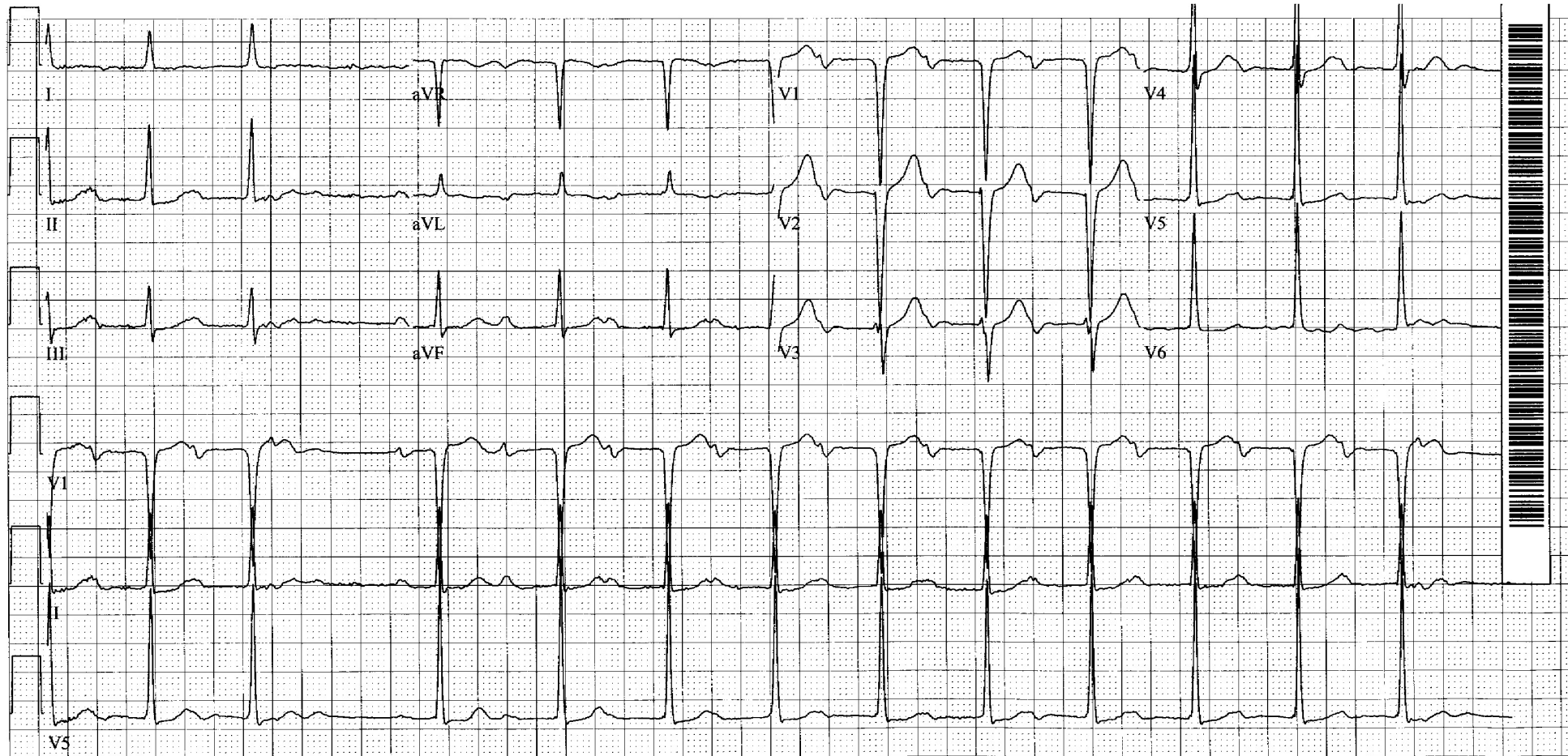
- To P or not to P, that is the question!!!!!!!!!!!!
- Find the P wave
- Then determine the relationship to the QRS
- More P's than QRS= Some form of Block
- More QRS's than P's= AV Dissociation

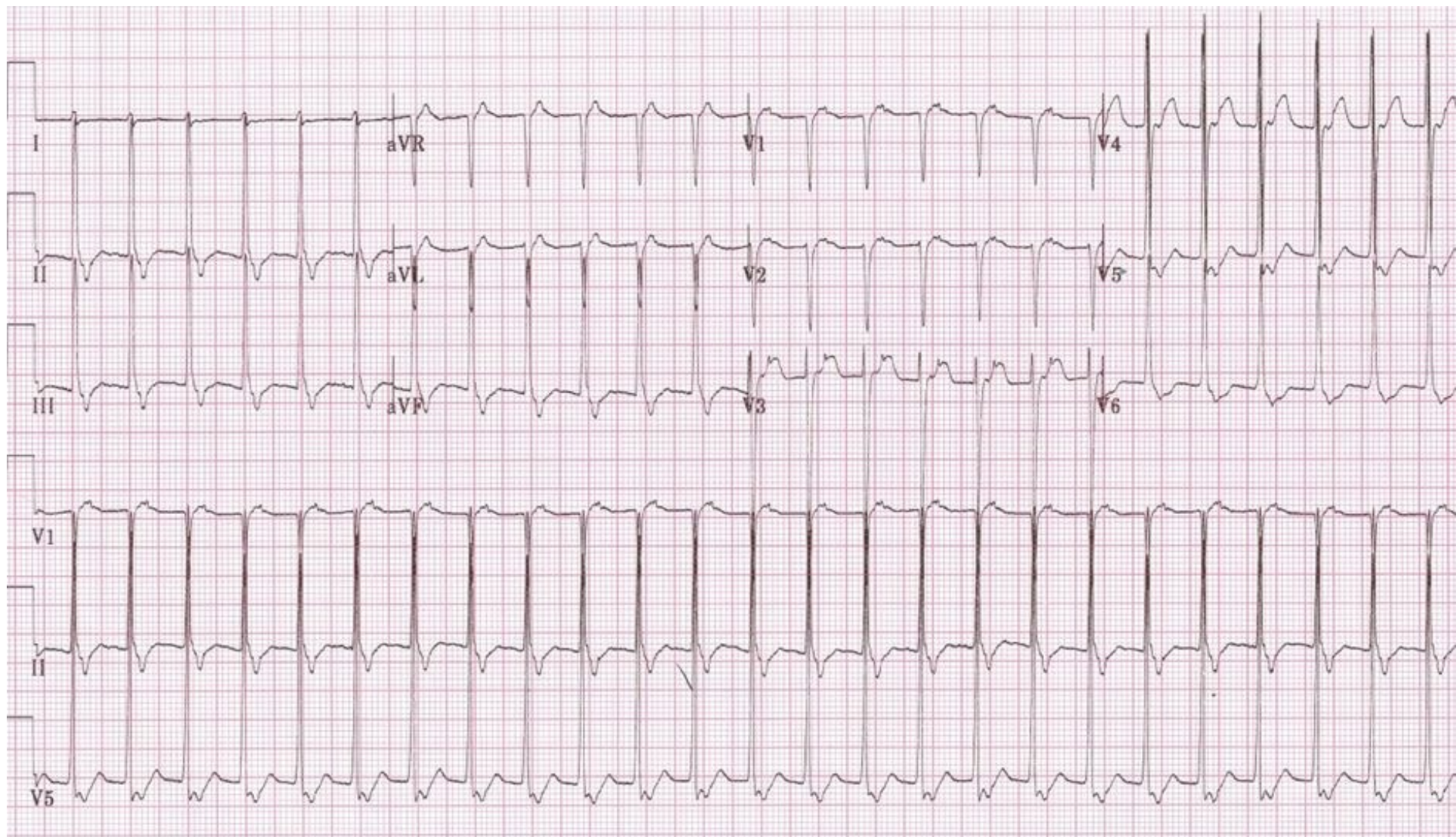
# 1

Sinus rate = 84

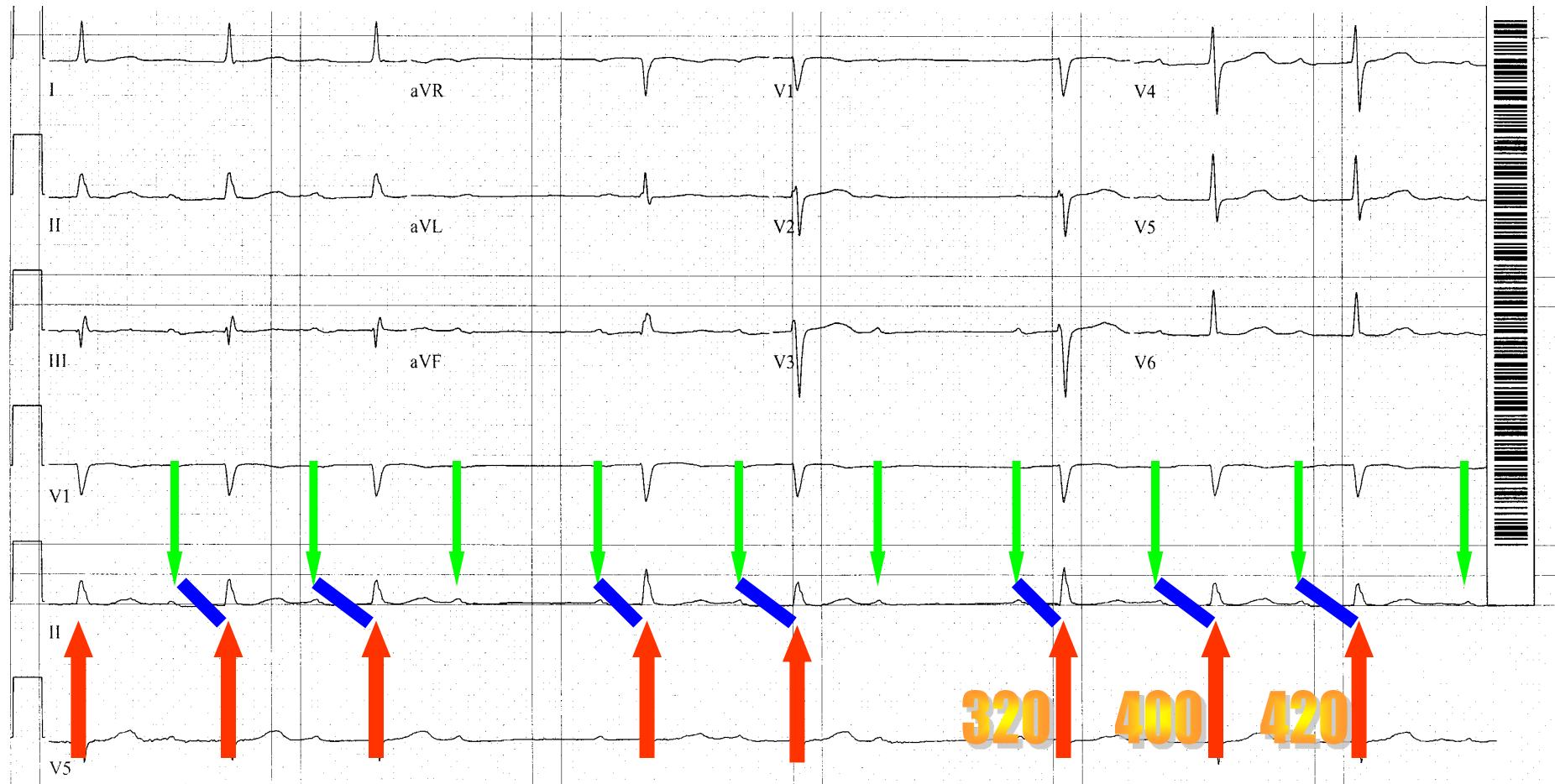








**Next RR = PP+PR increment**



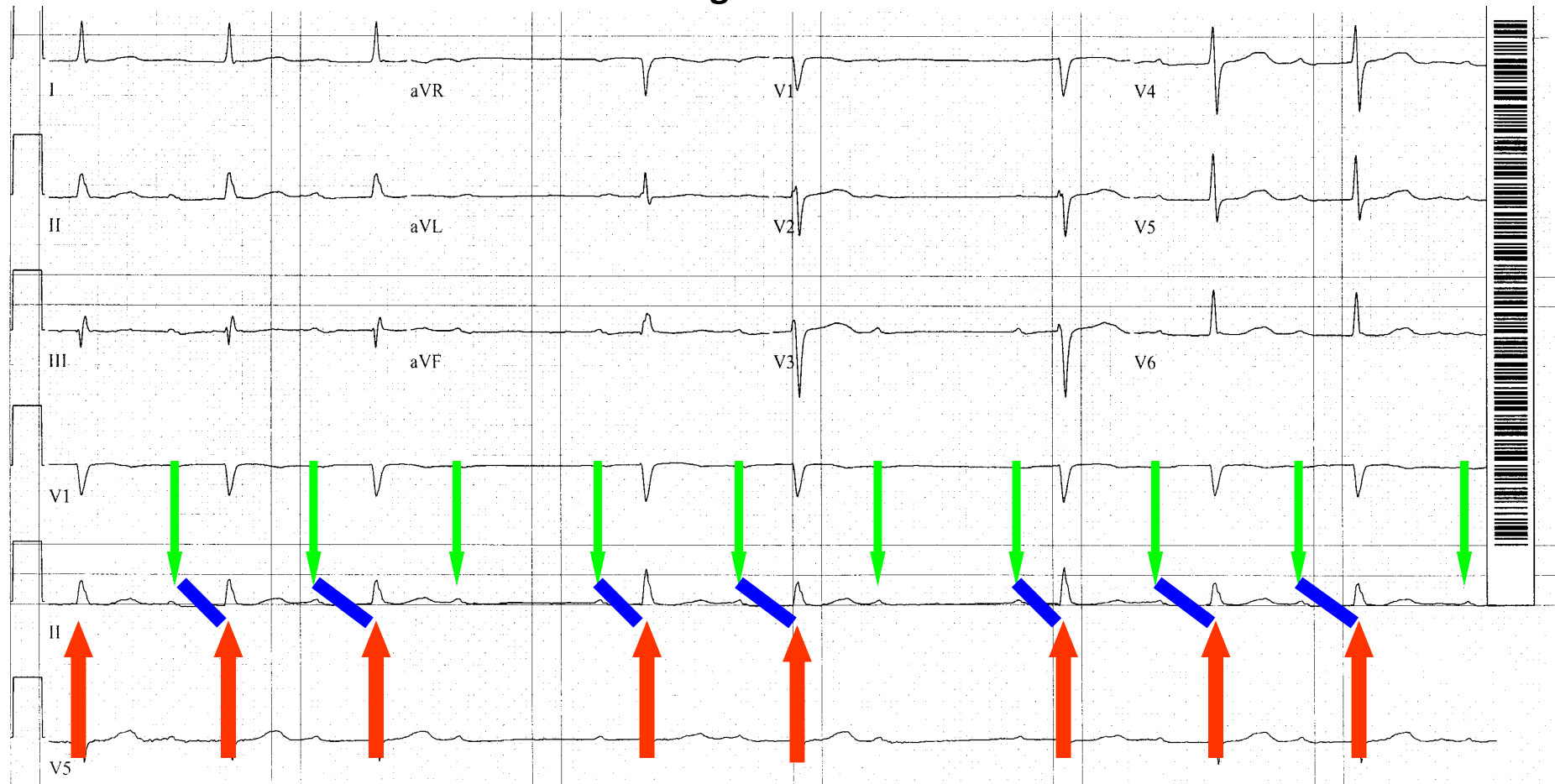


# TYPICAL WENCKEBACH

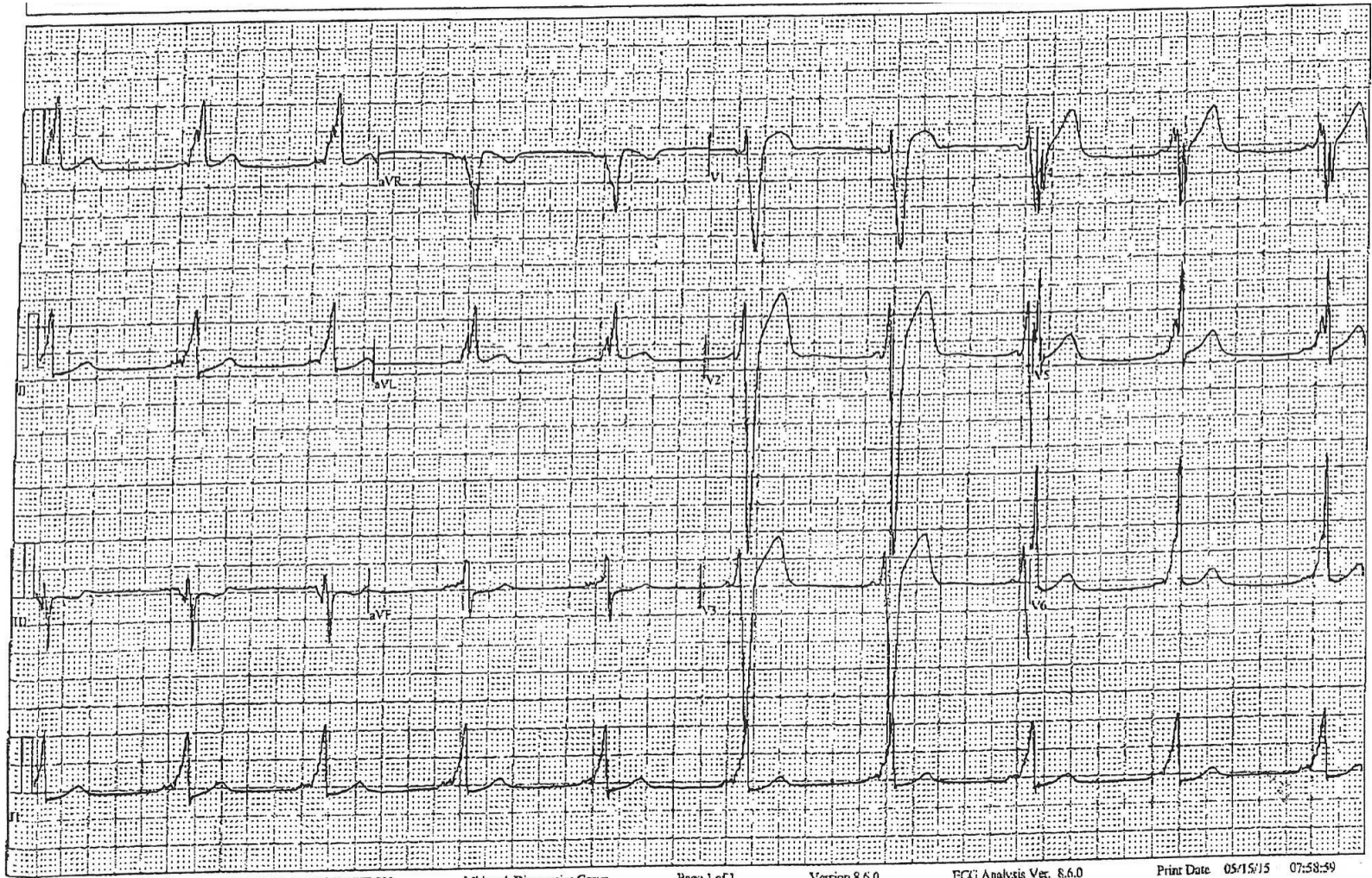
-Constant P-P intervals

-Increasing P-R intervals

-Decreasing R-R intervals







Speed: 25 mm/Sec Gain: 10 mm/mV MYO: OFF AC: ON DRIFT: ON

Midmark Diagnostics Group

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Version 8.6.0

ECG Analysis Ver. 8.6.0

Print Date 05/15/15 07:58:59





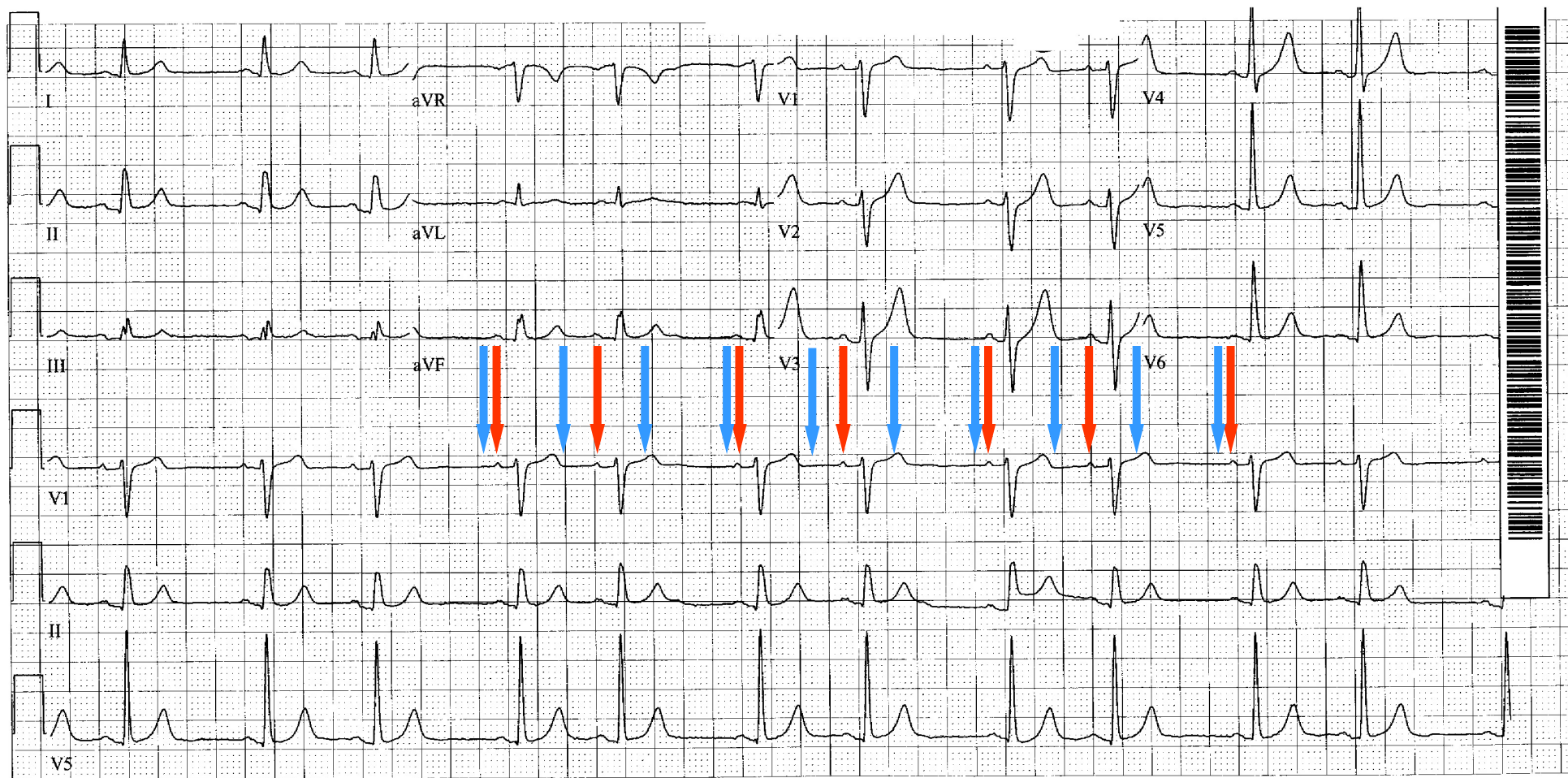
Age: 22 Years  
Gender: Male  
Height: 168 Cm

Weight: 75.3 Kg  
Vent Rate (BPM): 64  
RR (msec): 929

PR (msec): 200  
QRS dur (msec): 90  
QT / QTC (msec): 341 / 354

Display speed: 25 mm/sec  
Display Scale: 25 mm/mV







# Second degree Mobitz II SA nodal block





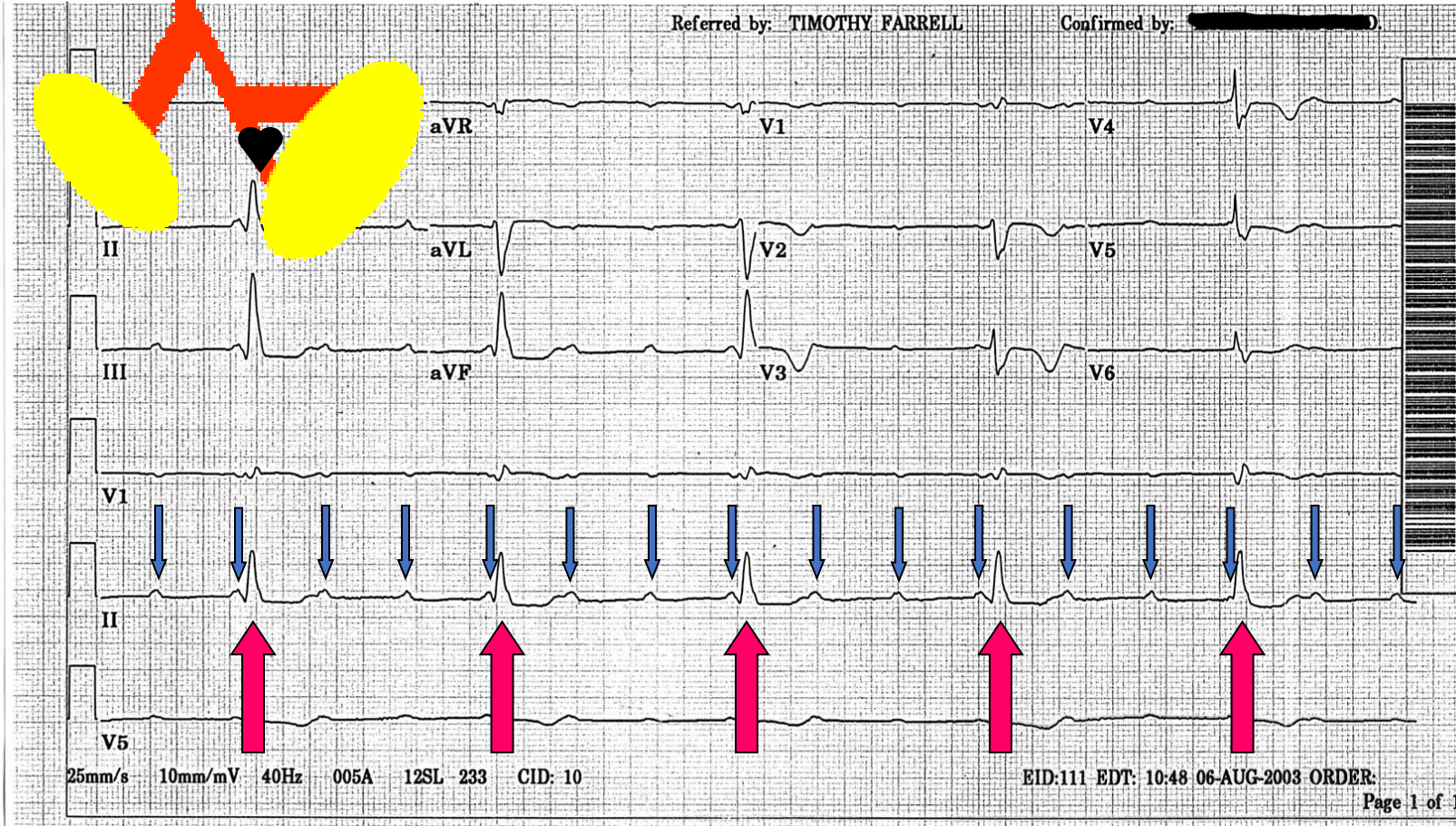
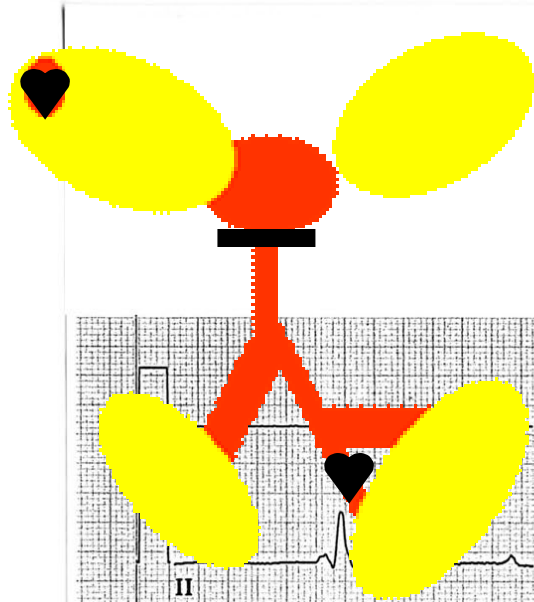
Vent. rate	45	BPM
PR interval	192	ms
QRS duration	146	ms
QT/QTc	476/411	ms
P-R-T axes	64 -63	29

## SR with 2<sup>nd</sup> degree AVB type II resulting from tri-fascicular block

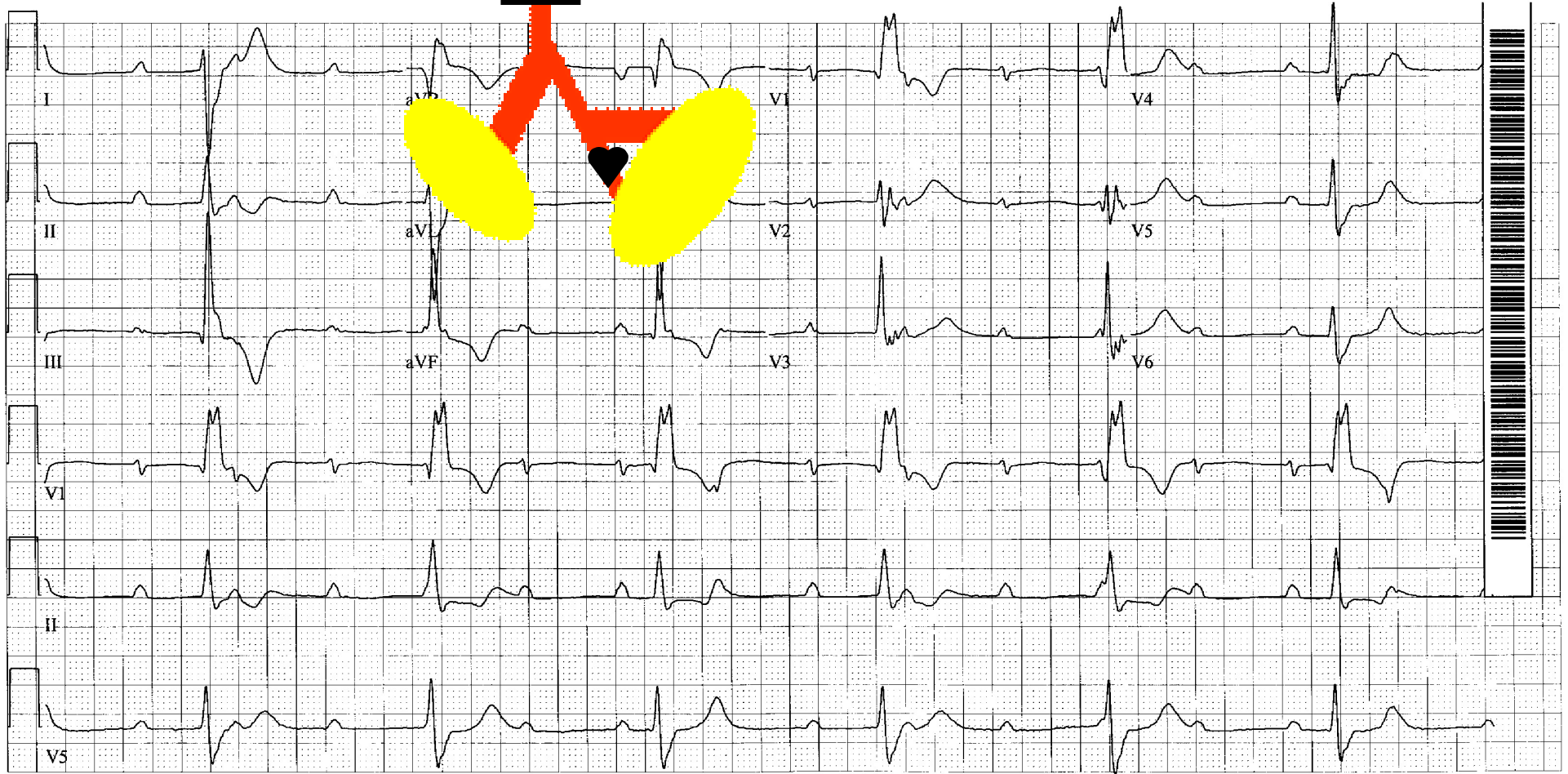
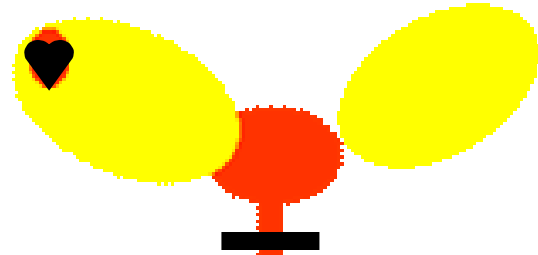
Technician: HTK



# ST with 3<sup>rd</sup> degree AVB (escape from the LAF)

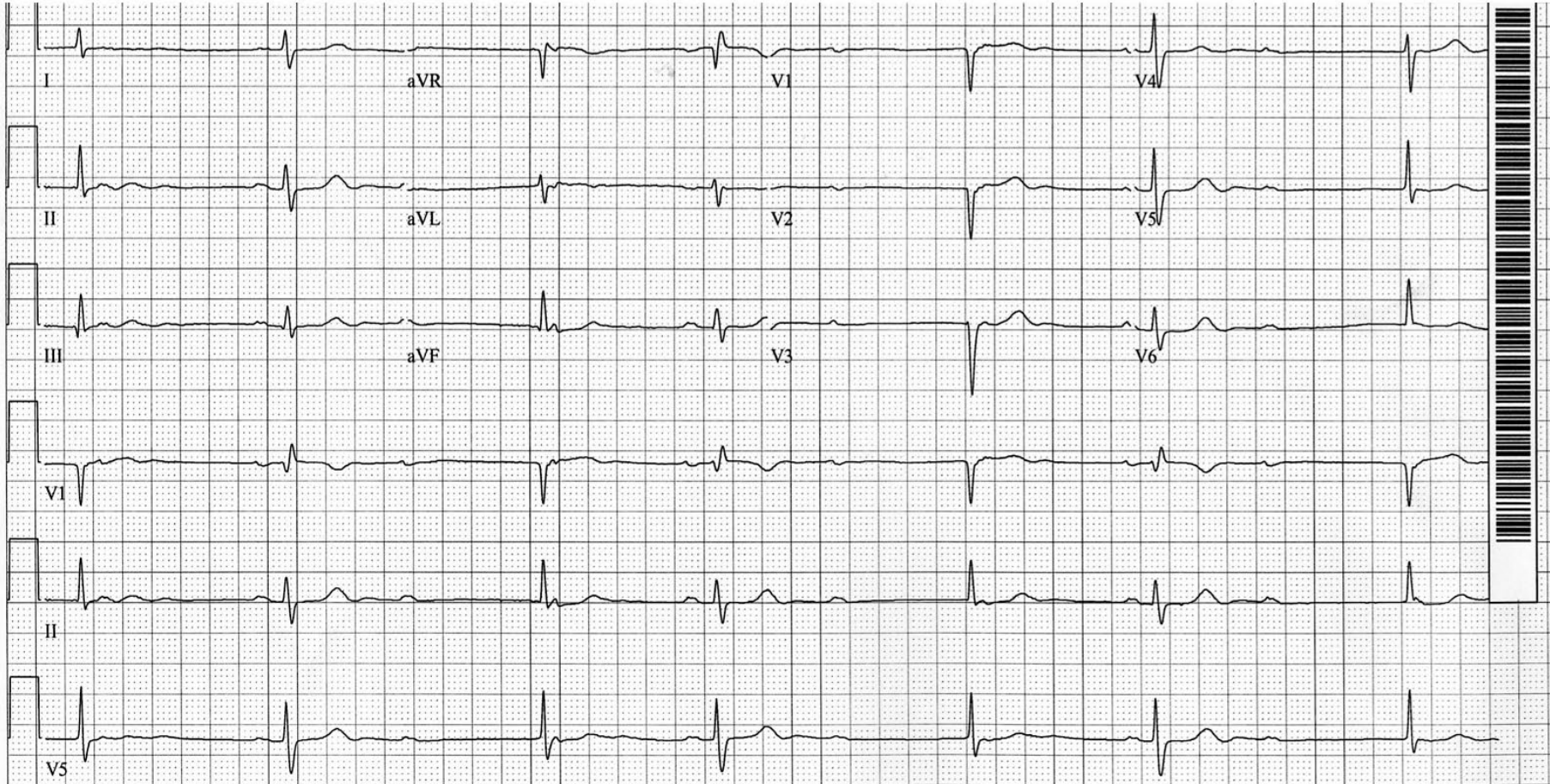






25mm/s 10mm/mV 40Hz 005E 12SL 233 CID: 10

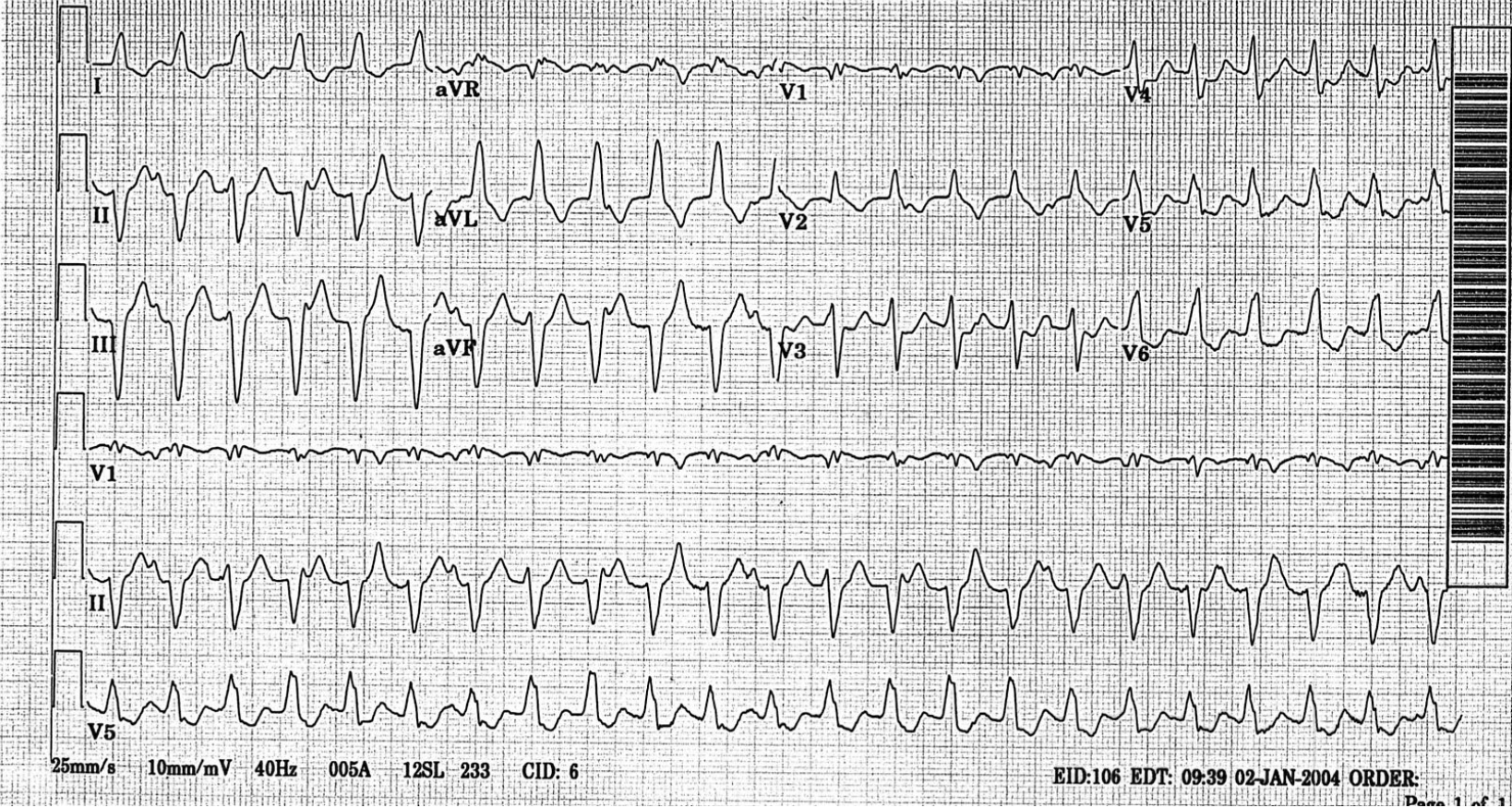
EID:Unconfirmed EDT: ORDER:



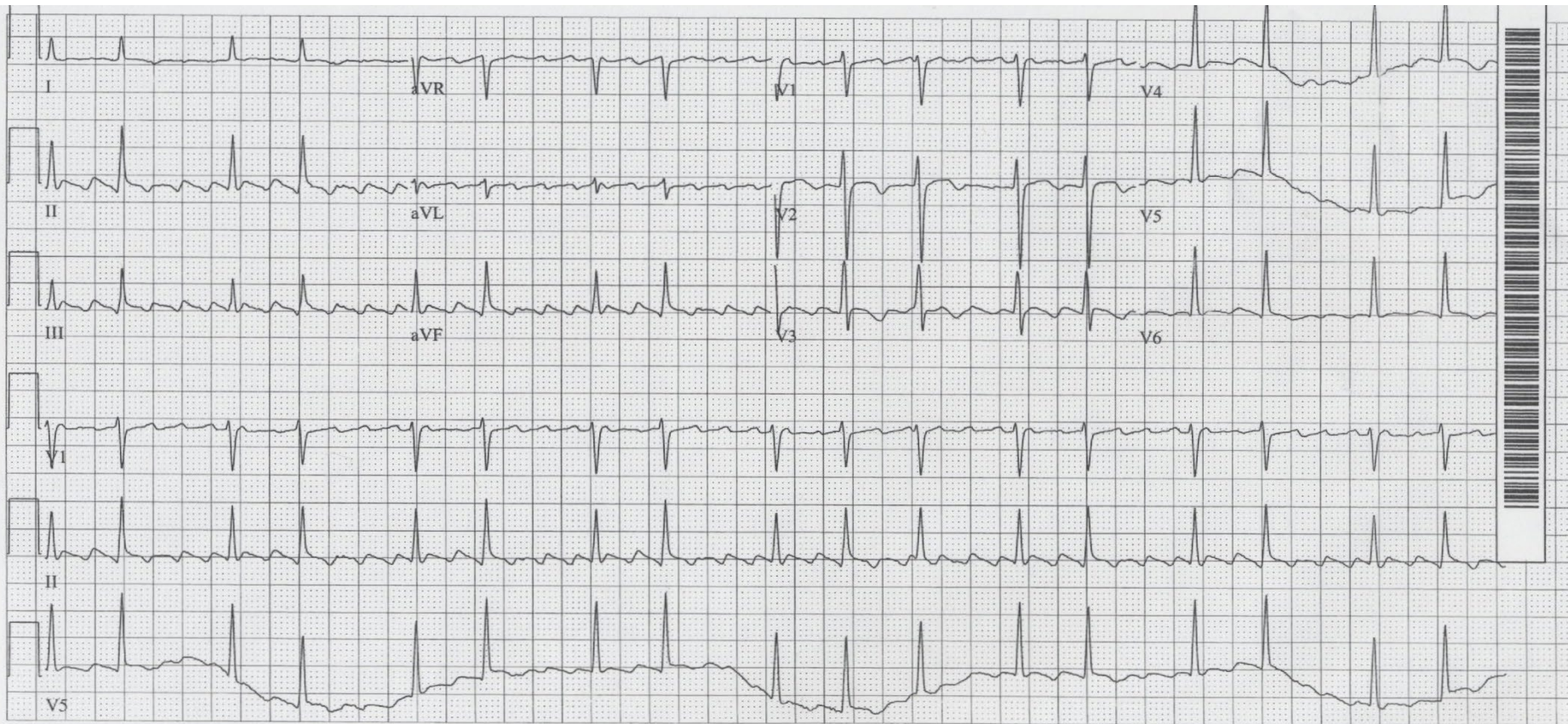
25mm/s 10mm/mV 40Hz 005E 12SL 233 CID: 2

EID:105 EDT: 17:19 19-OCT-2006 ORDER: 36296642 ACCOUNT: 3001948190





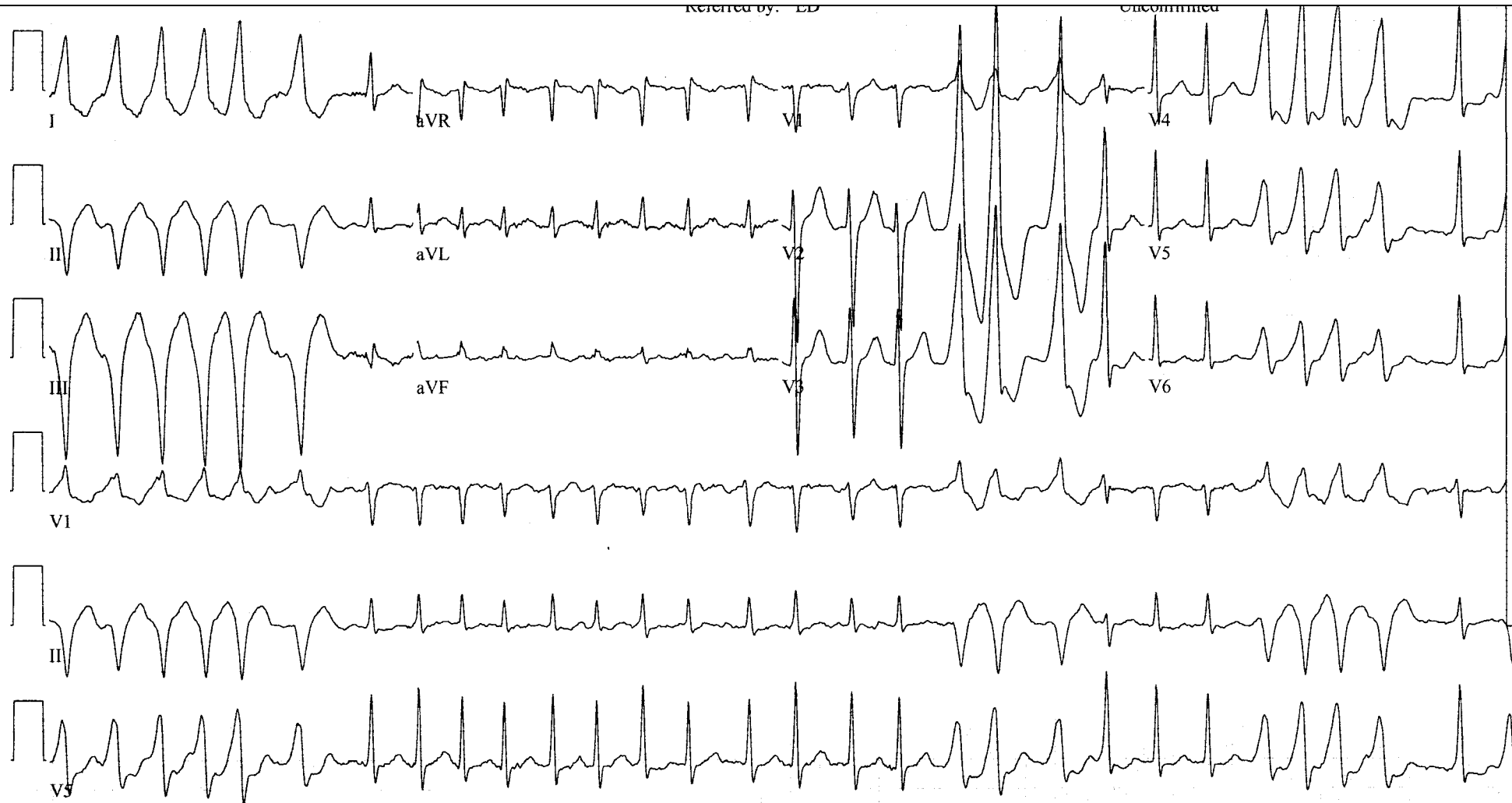


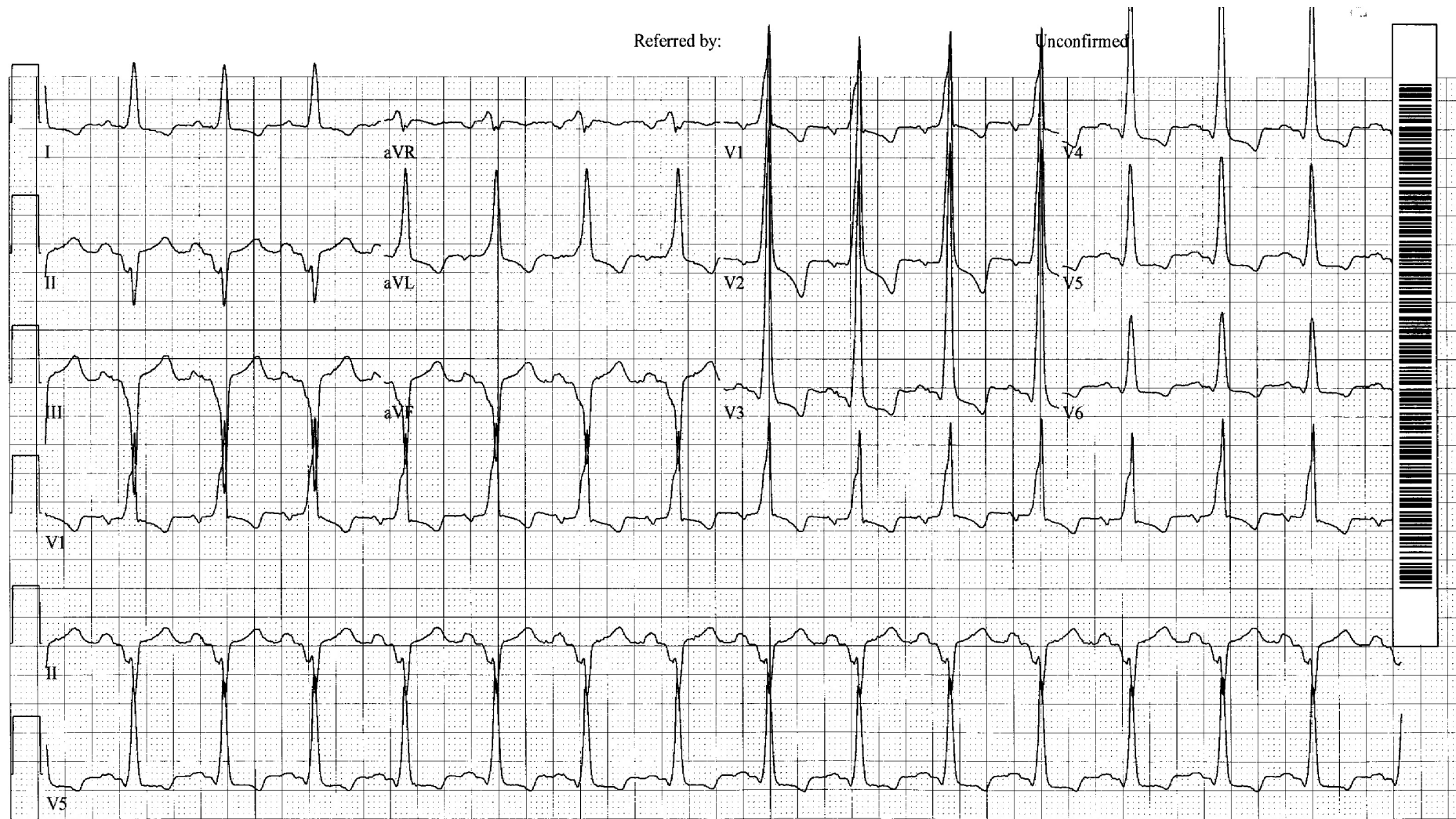


25mm/s 10mm/mV 40Hz 005E 12SL 233 CID: 5

EID:106 EDT: 09:39 01-AUG-2005 ORDER:

# ATRIAL FIB WITH VT?



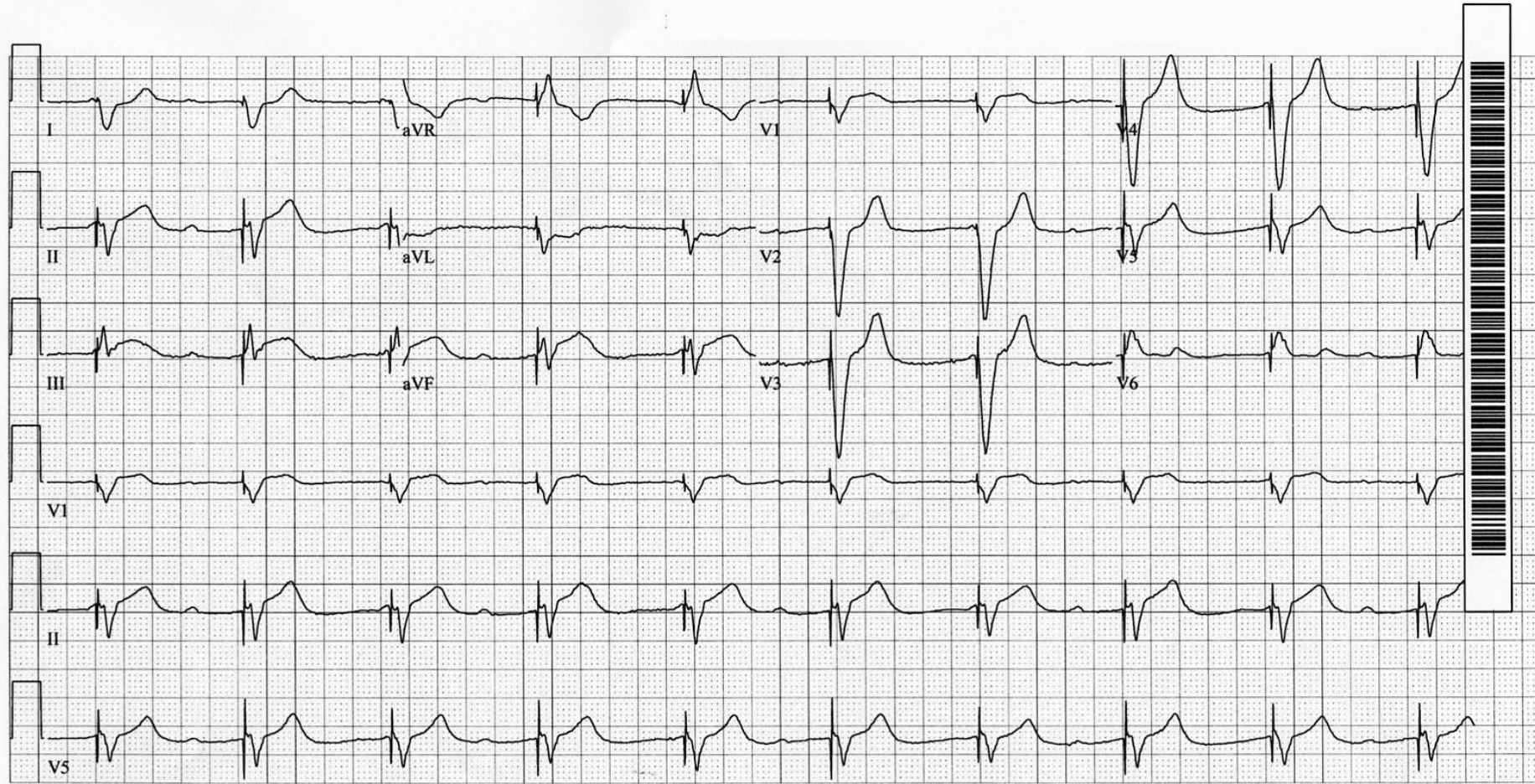


Referred by:

Unconfirmed



31-MAY-2006 05:44:00



25mm/s 10mm/mV 100Hz 005E 12SL 86 CID: 1

EID:105 EDT: 17:19 31-MAY-2006 ORDER: 34863111 ACCOUNT: 3001845701

