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ECG 1
63 year old with shortness of breath



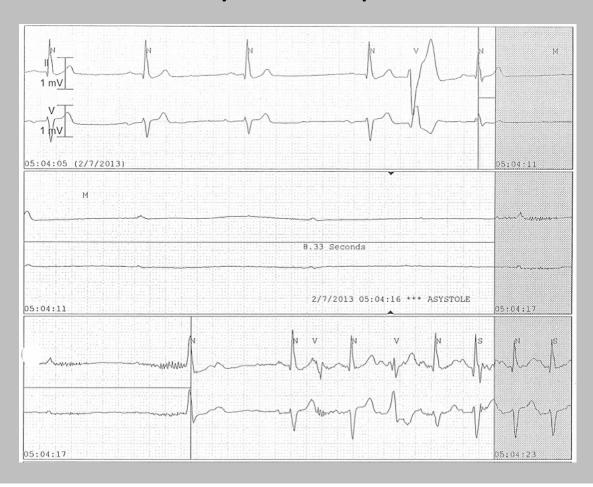
COPD



Multifocal atrial tachycardia

- Often misdiagnosed as atrial fibrillation (MAT does NOT require anticoagulation!)
- Treatment is generally supportive beta blockers/diltiazem may be used

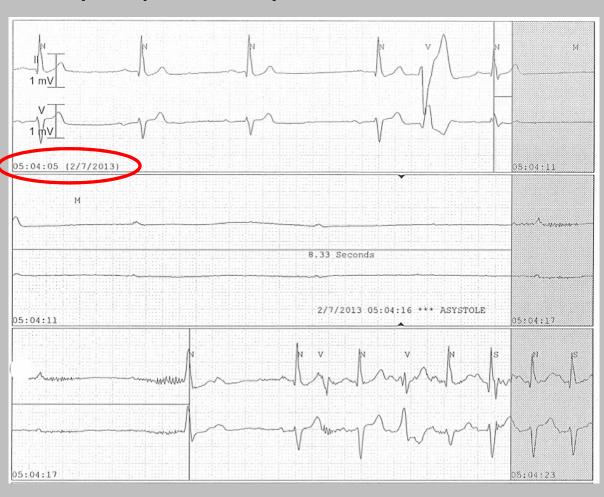
ECG 2 68 year old morbidly obese patient on telemetry



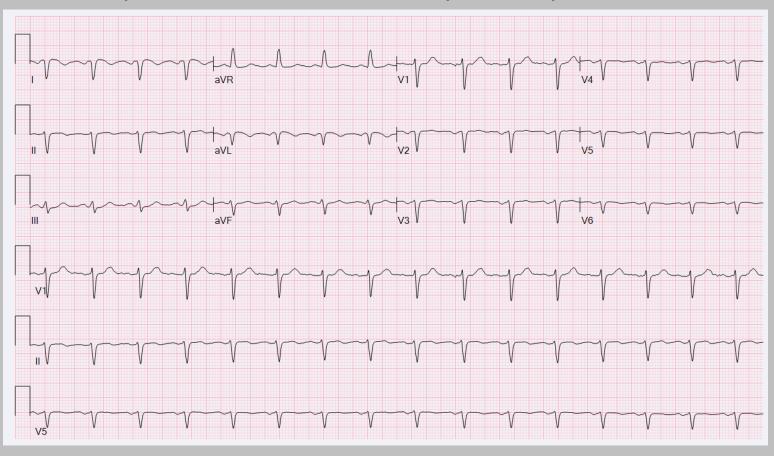
Obstructive Sleep Apnea Syndrome

Vagal AV Block

- Sinus slowing **AND** AV Block
- Treatment should be directed at OSAS



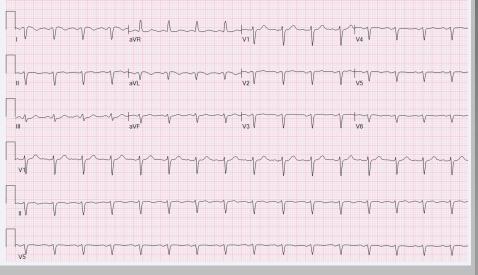
ECG 3 35 year-old routine pre-op ECG

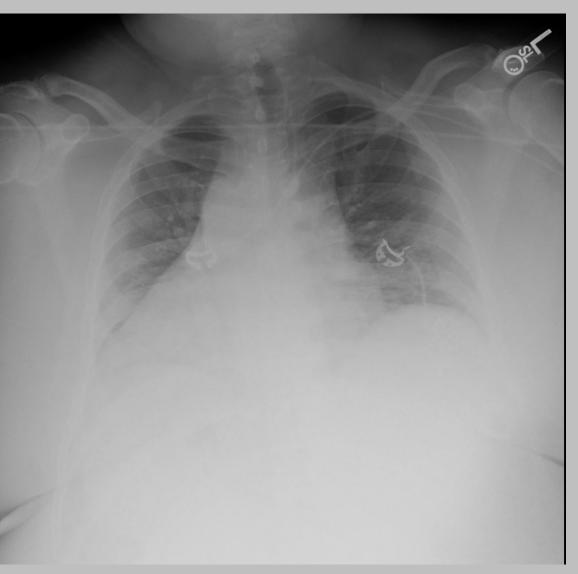


35 year-old routine pre-op ECG

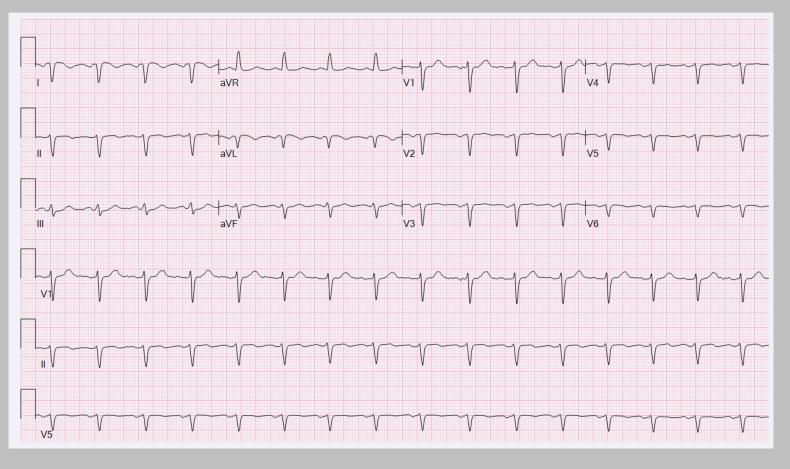
- 1. Normal ECG
- 2. Limb lead reversal
- 3. Lateral MI
- 4. Dextrocardia

CXR





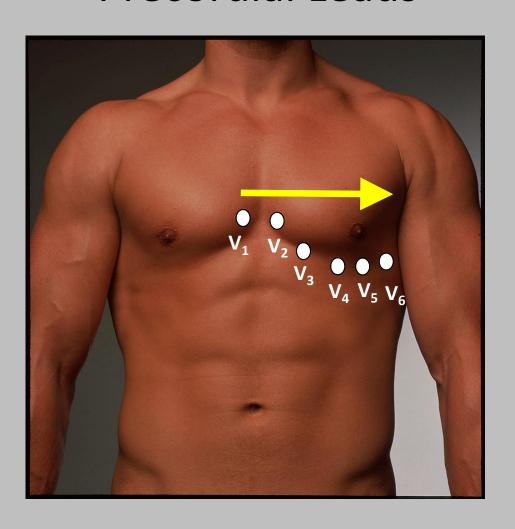
Dextrocardia



Limb Leads

Lead I RA Lead III Lead II

Precordial Leads



Lead I

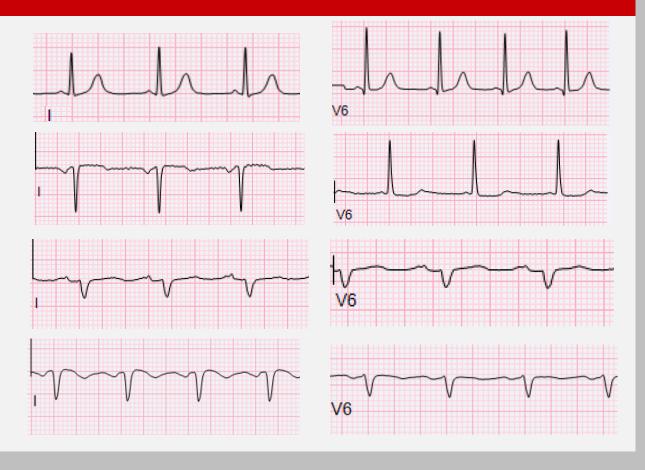
V6

Normal

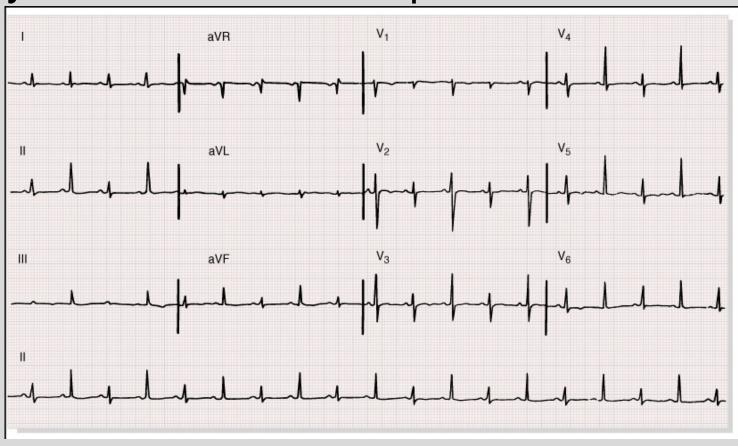
Limb Lead Reversal

Old Lateral MI

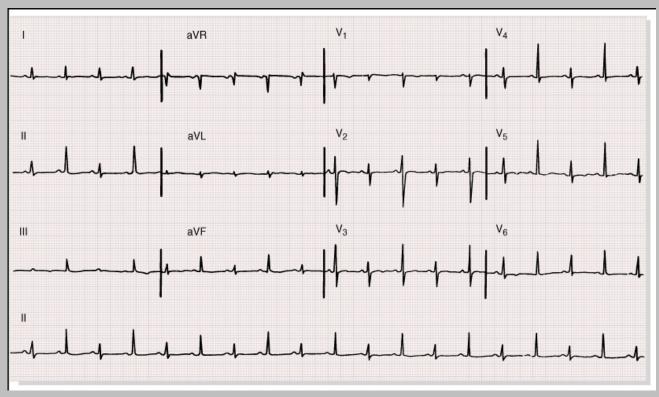
Dextrocardia



ECG 4
55 year old with cancer presents with SOB

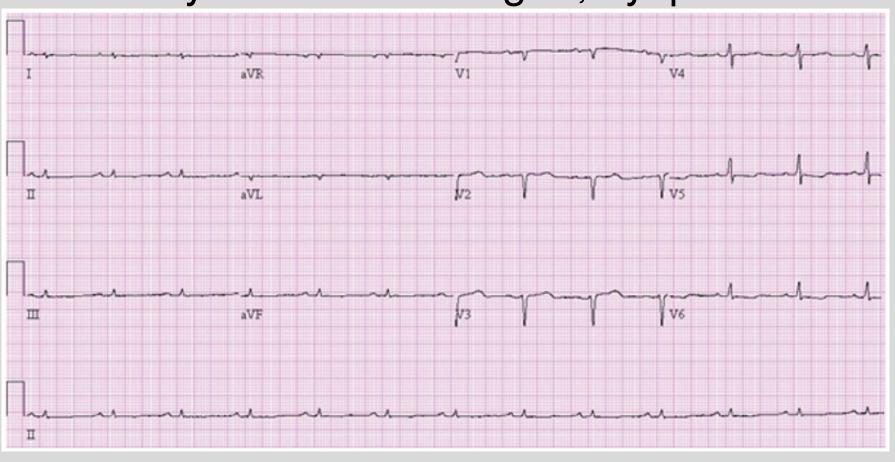


Large Pericardial Effusion with Tamponade



- Electrical alternans
- Low voltage
- Tachycardia

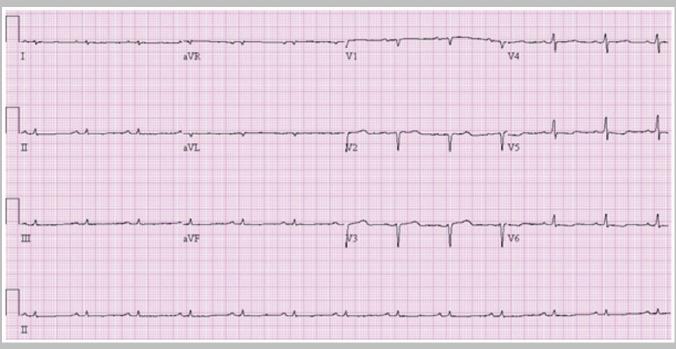
ECG 5 77 year old with fatigue, dyspnea



ECG 5
77 year old with fatigue, dyspnea

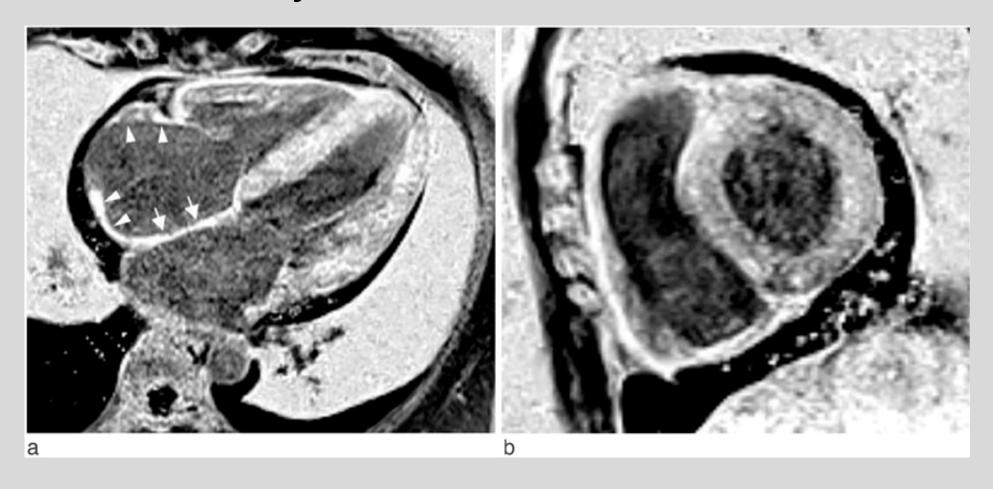


Cardiac Amyloidosis

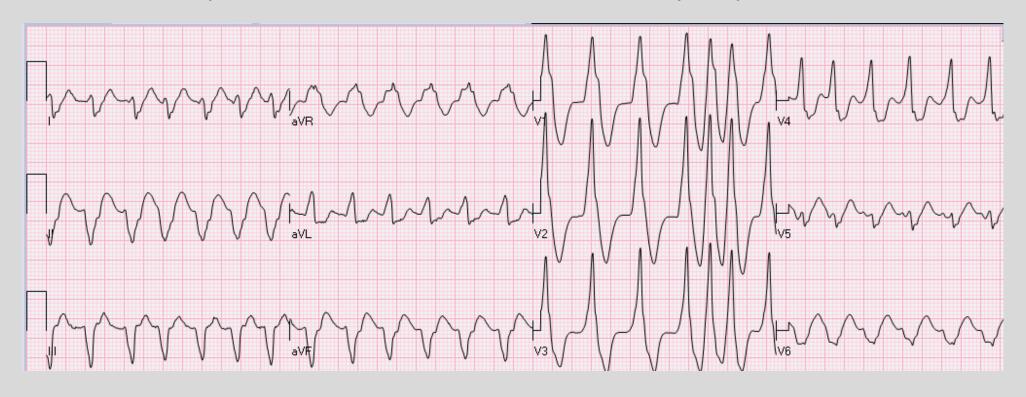


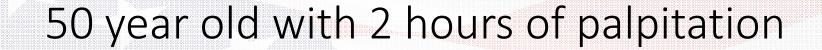
- Many forms can be associated with cardiac involvement
- Significant advances in diagnosis and treatment in last decade
- Low-voltage EKG with cardiac hypertrophy is clue
- AF, VT, varying degrees of AV block, sinus brady are also seen

MRI of Amyloid



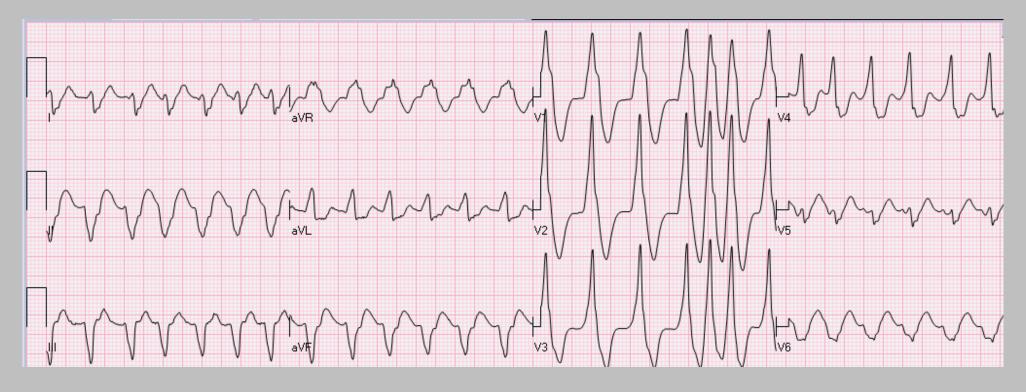
ECG 6 50 year old with 2 hours of palpitation





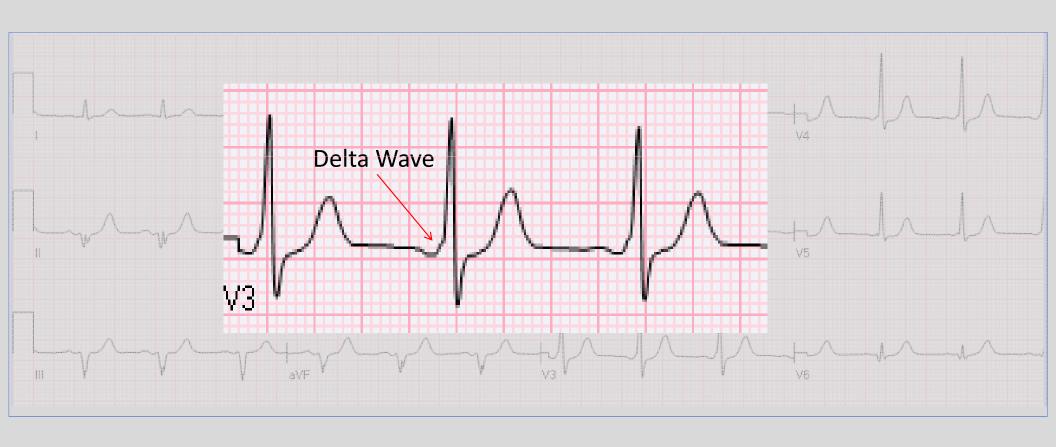
- 1. Torsades de Pointes
- 2. Atrial fibrillation with WPW
- 3. Monomorphic VT
- 4. Artifact

Wolff-Parkinson-White (with atrial fibrillation)

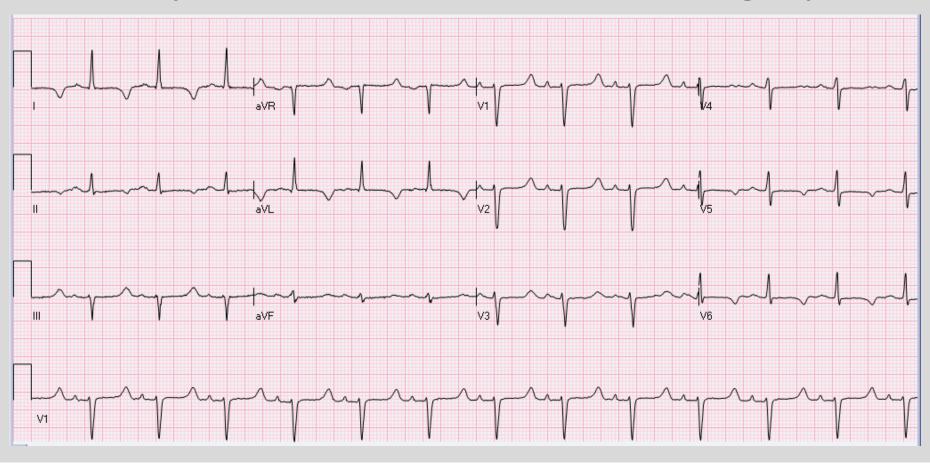


- Variable pre-excitation
- Often confused for ventricular tachycardia

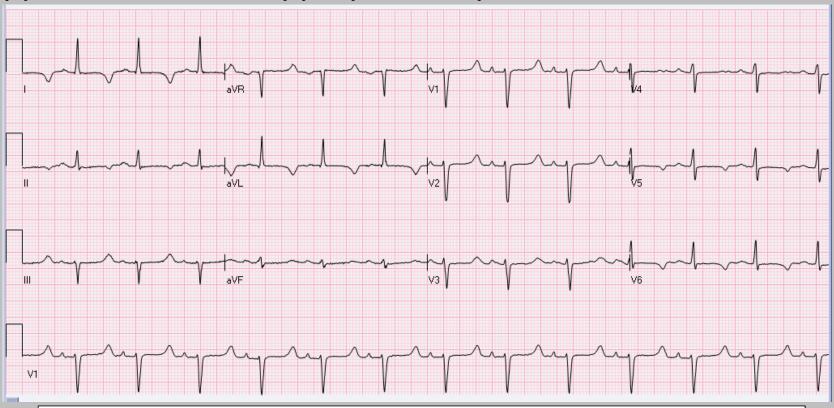
Post-Conversion ECG



ECG 7
55 year old with recent neck surgery



Hypocalcemia/hypoparathyroidism



- Prolonged QT Hypoparathyroidism (absence of PTH secretion)
 - Postoperative
 - Autoimmune (isolated or part of polyglandular autoimmune syndrome)
 - Congenital (mutations of CaSR, PTH, and parathyroid aplasia)

QT Prolongation



T Wave Prolongation – Drugs, Ischemia

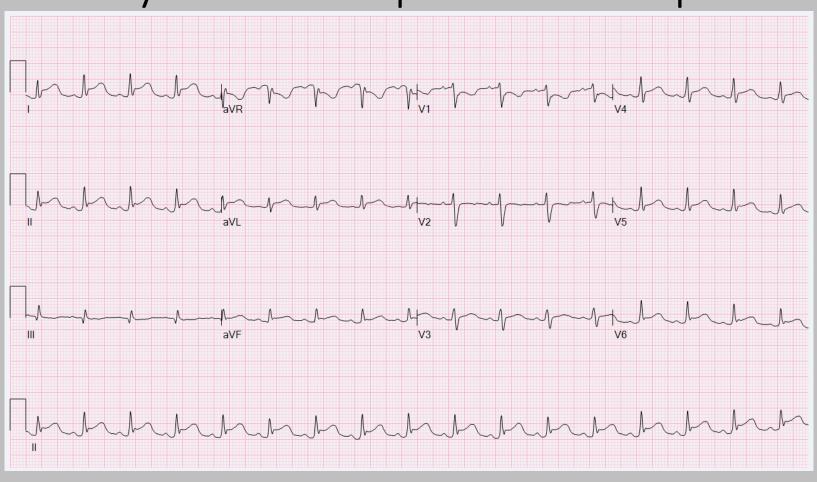


QRS Prolongation – IVCDs

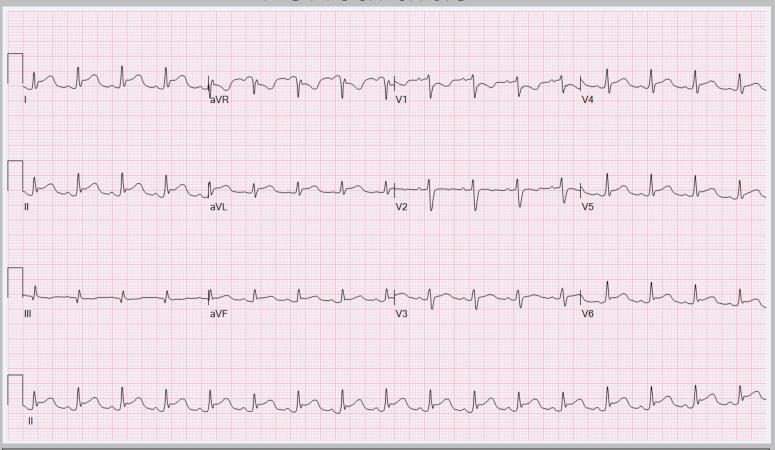


ST Prolongation - Hypocalcemia

ECG 8
21 year old with pleuritic chest pain

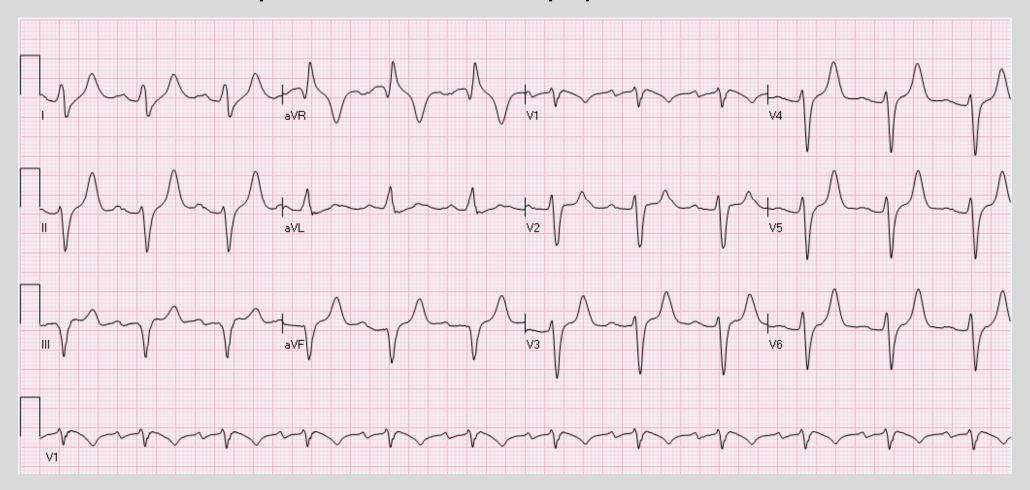


Pericarditis

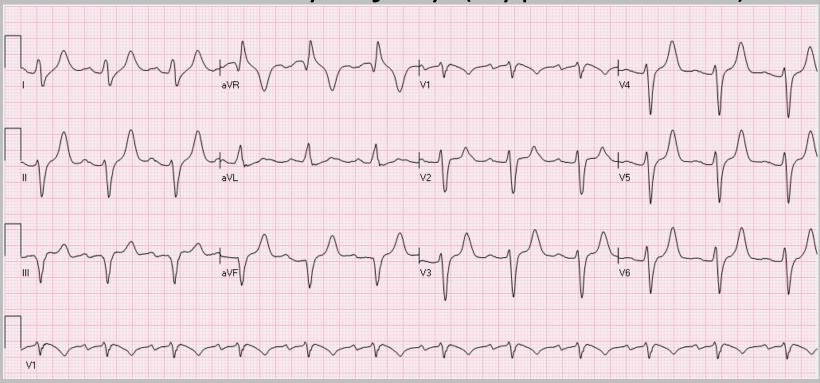


- Diffuse concave ST elevation
- PR depression

ECG 9
35 year old with dyspnea, edema

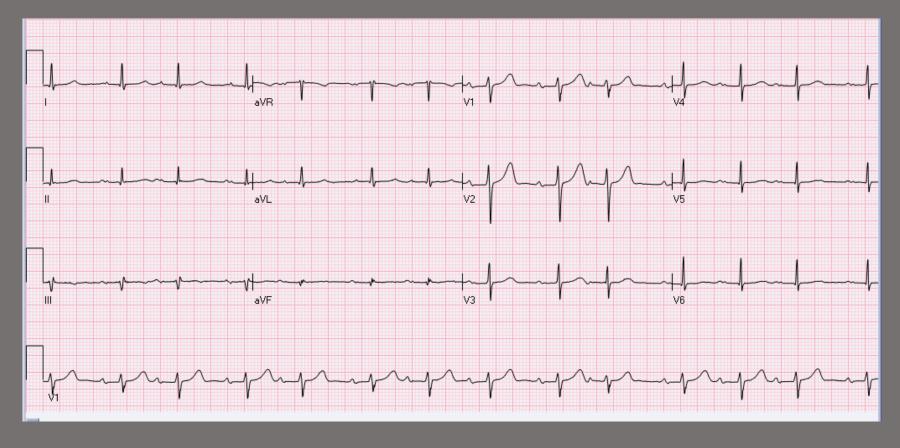


Acute Kidney Injury (hyperkalemia)



- QRS widening
- Peaked T waves
- Flattened P waves

Baseline ECG



9:03:37

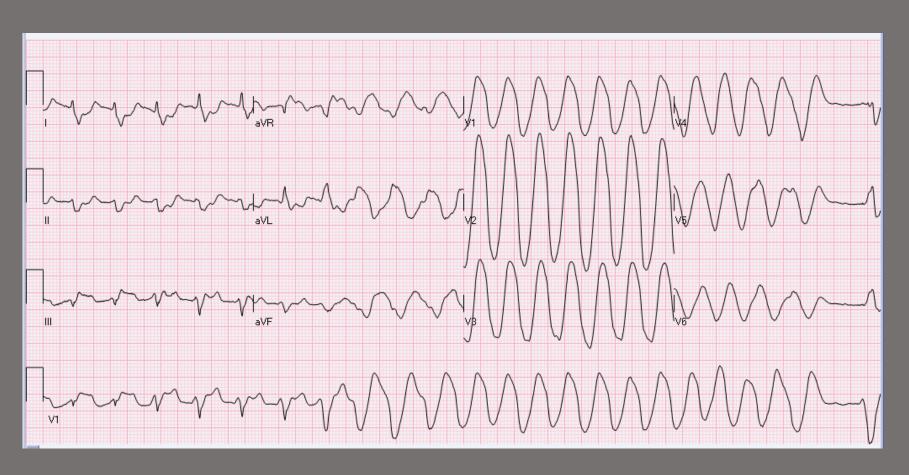
K = 8.9



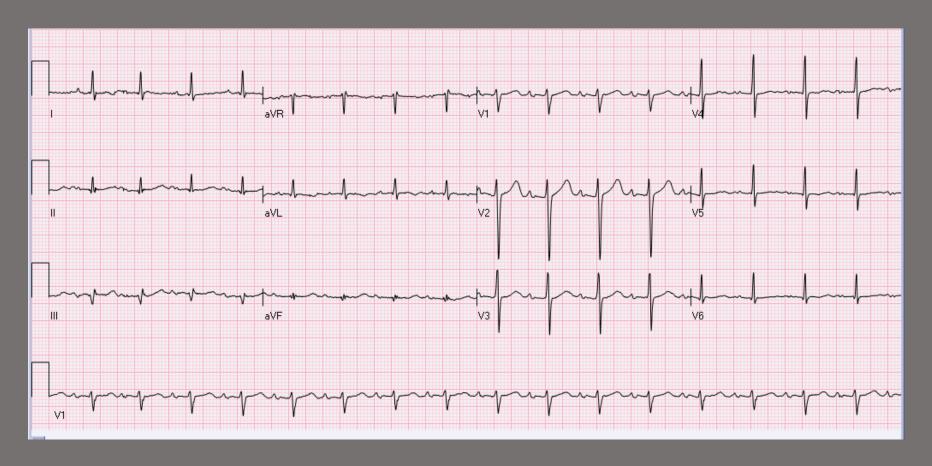
9:04:58



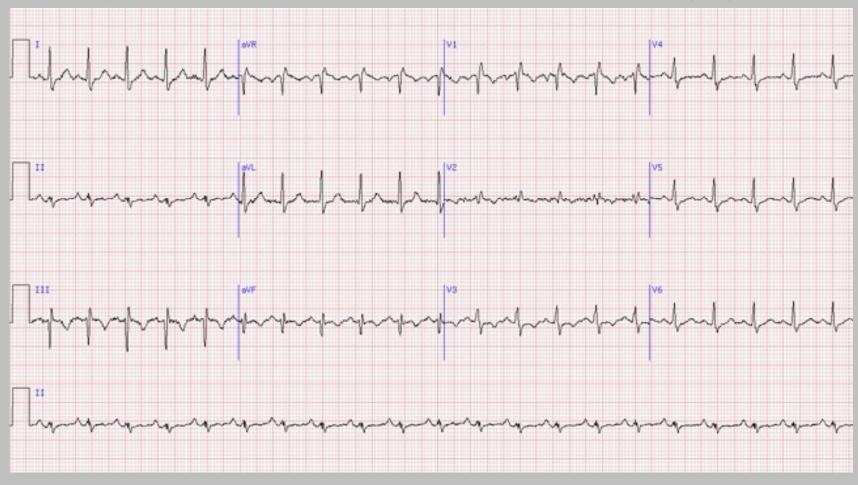
9:09:19



Post Dialysis



45 year old with chest pain and dyspnea



Pulmonary Embolism

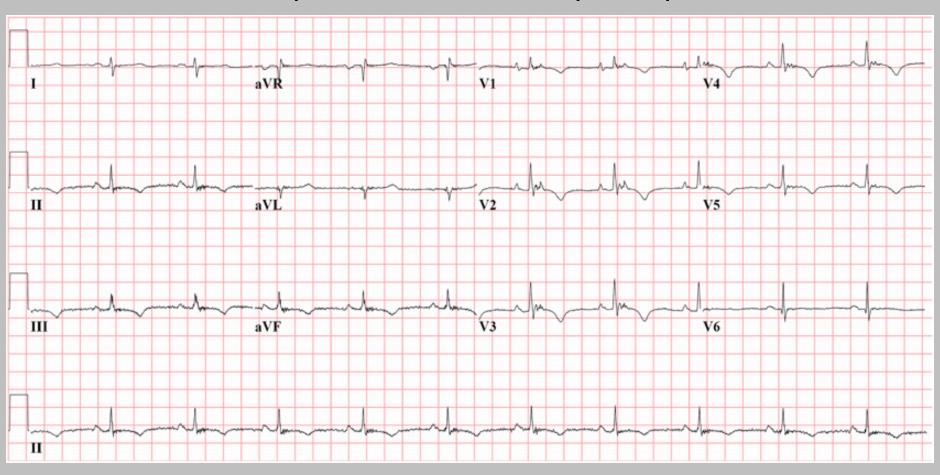


- Most commonly sinus tachycardia
- S wave in lead I, Q wave and T wave inversion in lead III (S1Q3T3)
- If chronic, right axis deviation, RV hypertrophy

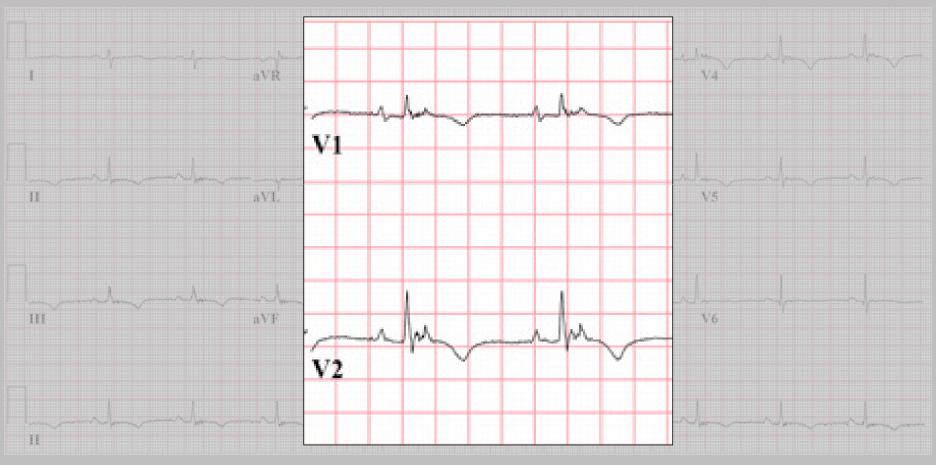
Chronic pulmonary embolism



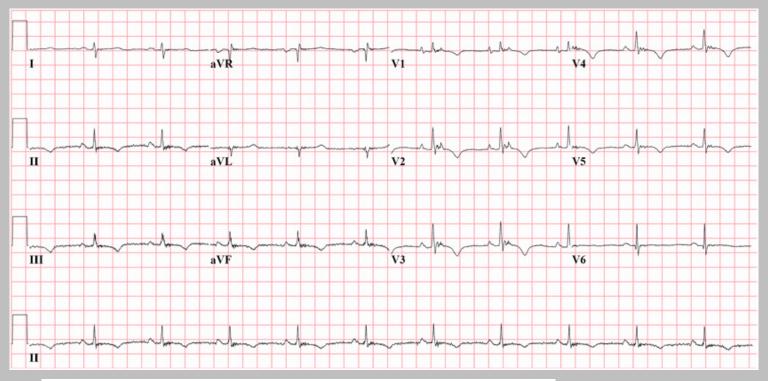
ECG 11 27 year old with syncope



27 year old with syncope

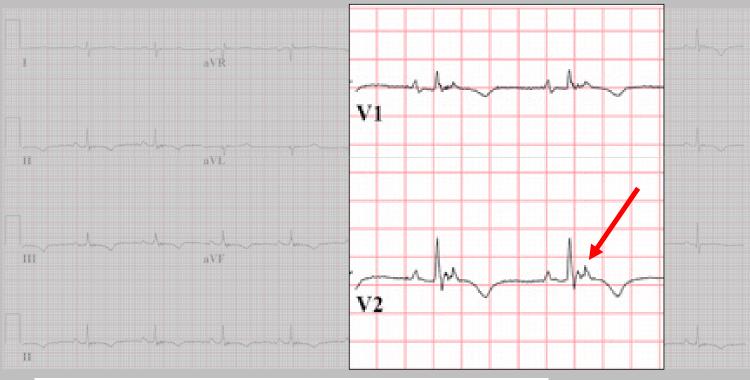


Arrhythmogenic Right Ventricular Dysplasia/Cardiomyopathy – ARVD/C



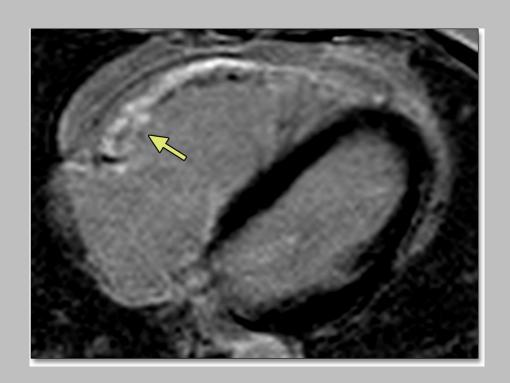
- Epsilon wave
- Anterior T wave inversions

Arrhythmogenic Right Ventricular Dysplasia/Cardiomyopathy – ARVD/C

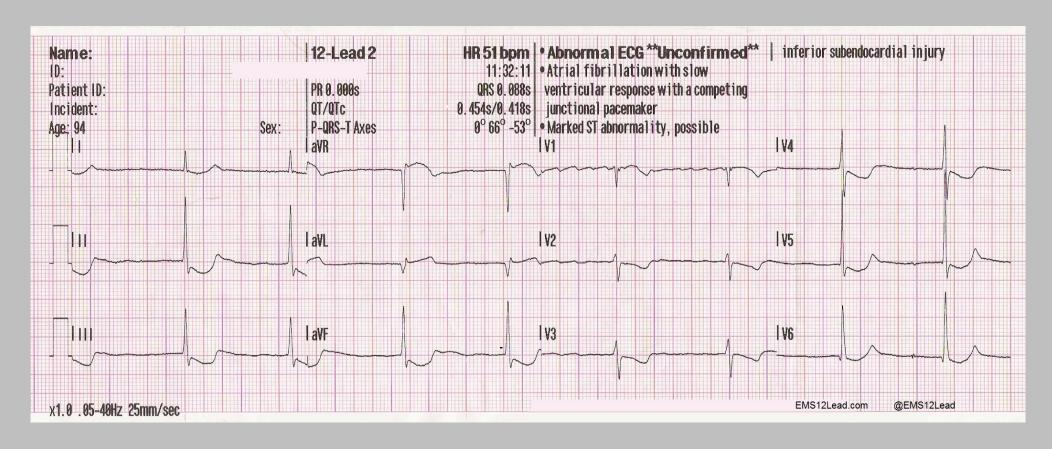


- Epsilon wave
- Anterior T wave inversions

MRI of ARVD



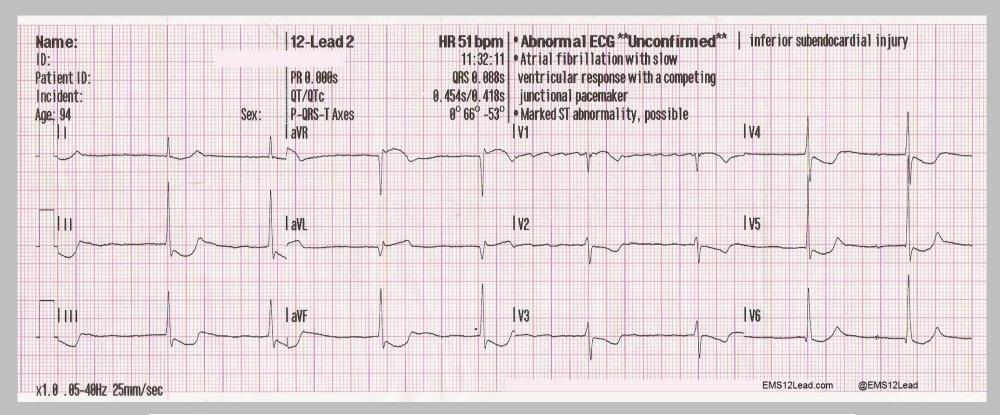
ECG 12 80 year old woman with nausea, visual changes



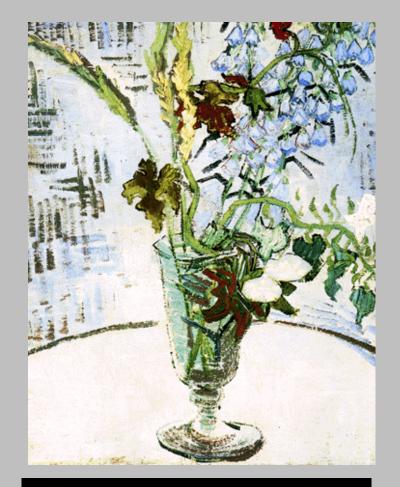


- 1. Digoxin toxicity
- 2. TCA overdose
- 3. Hyperkalemia
- 4. Long QT Syndrome

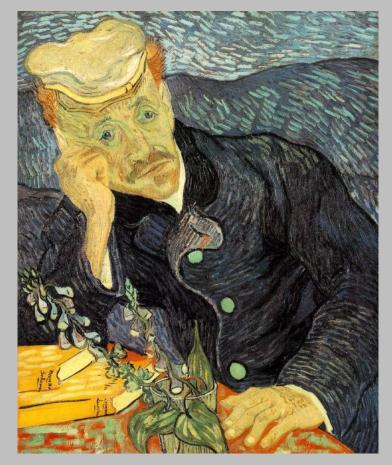
Digoxin Toxicity



- Atrial fibrillation with regular slow response
- Accelerated junctional rhythm
- ST abnormalities ("reverse check")



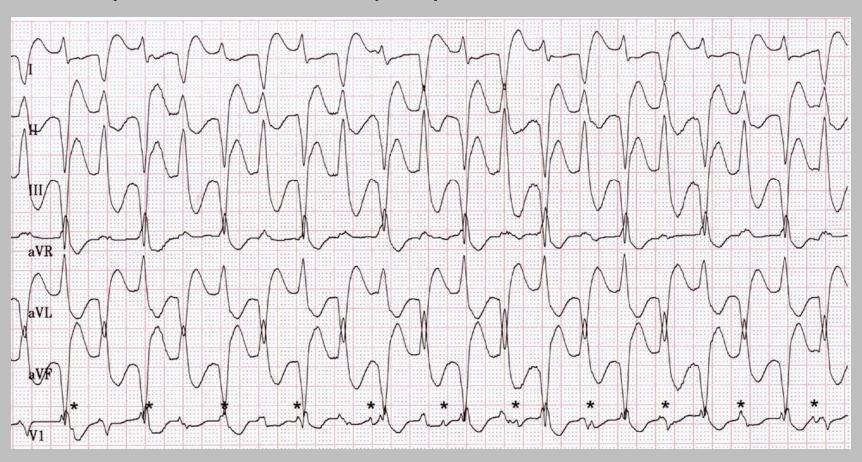
Foxglove, ear of wheat and vine Vincent Van Gogh



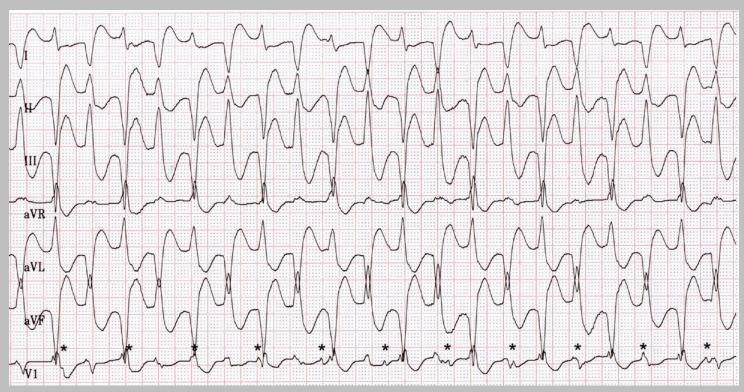
Portrait of Dr. Gachet Vincent Van Gogh, 1890



ECG 13
78 year old with palpitation and nausea



Digoxin Toxicity



Bidirectional Ventricular Tachycardia

- Digoxin toxicity
- Chatecholaminergic Polymorphic VT (CPVT)

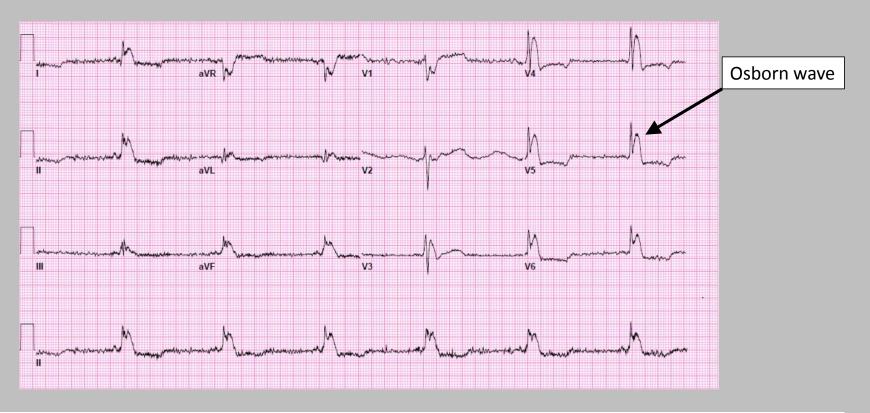
Bidirectional VT Chatecholaminergic Polymorphic VT (CPVT)



ECG 14 60 year old found unresponsive

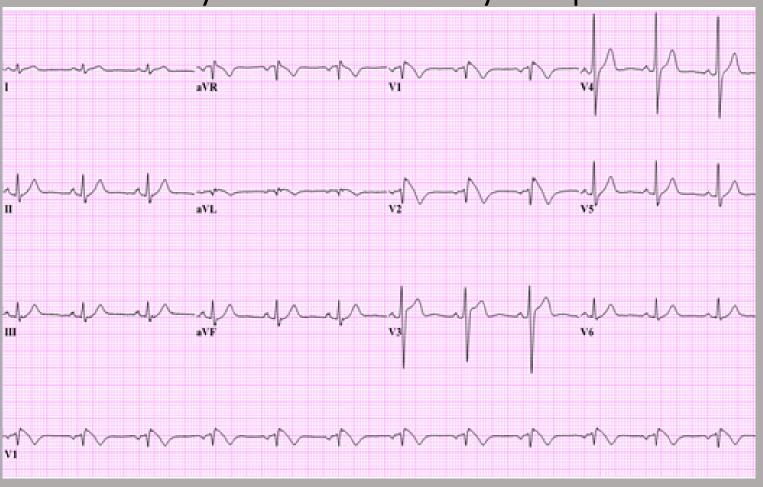


Hypothermia

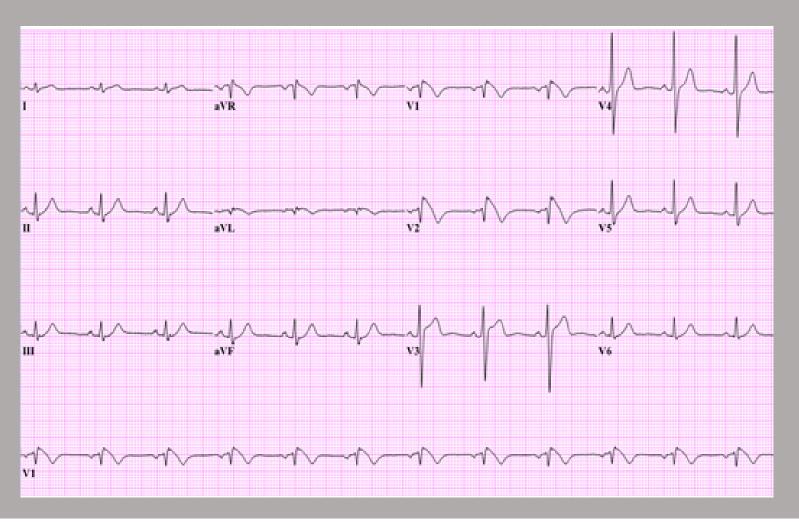


- Prolongation of the PR, QRS, and QT intervals
- Muscle tremor artifact even in the absence of clinical shivering
- Secondary deflection on the terminal portion of the QRS complex (Osborn wave)

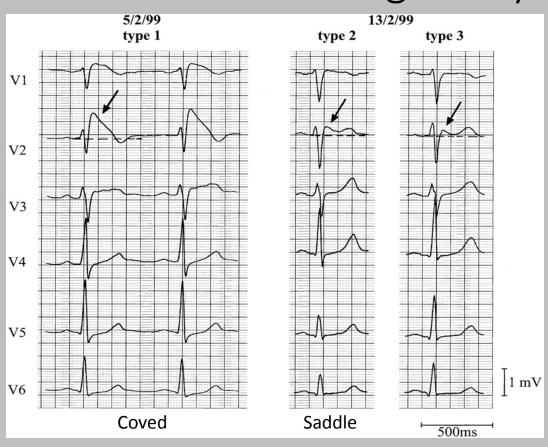
ECG 15 28 year old with syncope



Brugada Syndrome



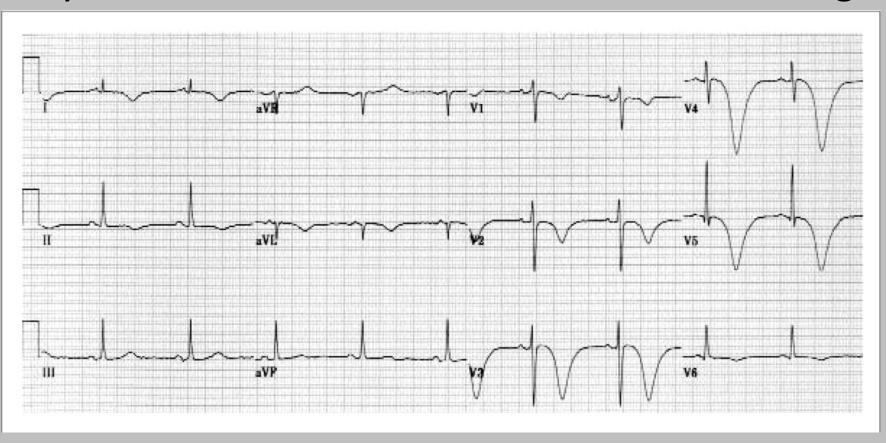
Brugada Syndrome



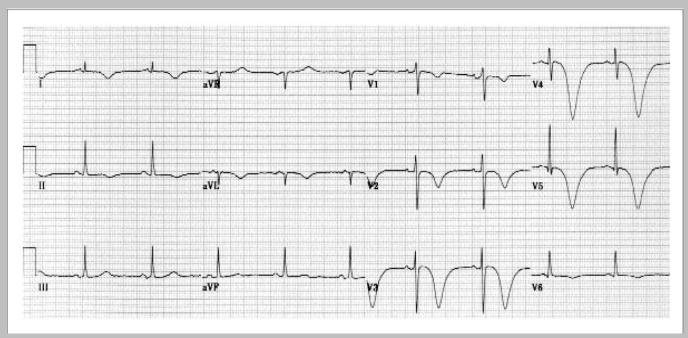
- Genetic disease with increased risk of sudden cardiac death
- More common in males
- More common in Asians
- Typically causes SCD in sleep/fever

Strickberger S A et al. Circulation. 2006;113:316-327

58 year old with headache, mental status change

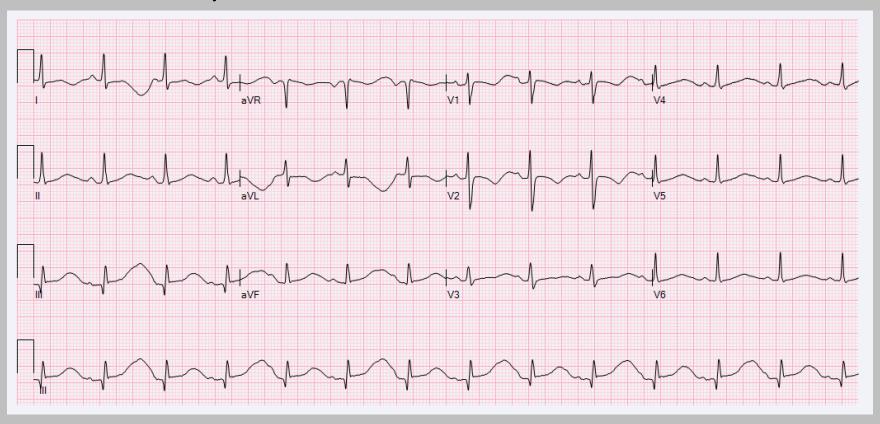


Subarachnoid Bleed/Brain Injury

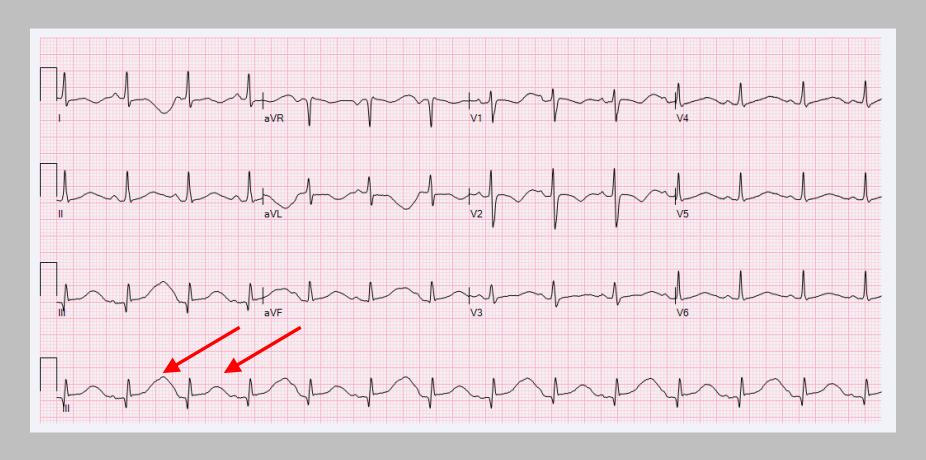


- Q waves, ST elevation/depression, T wave changes, prolonged
 QT-interval/ prominent u-waves
- Frequently seen after SAH, also in subdural hematoma, ischemic CVA, Guillain Barre, severe migraine

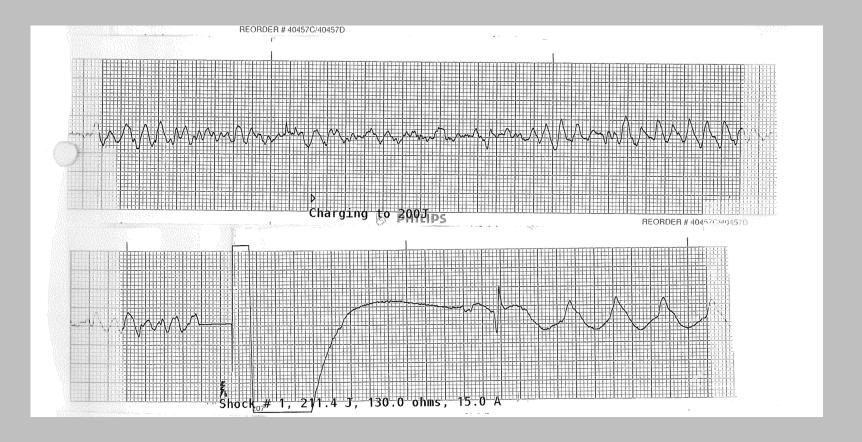
ECG 17 23 year old with cardiac arrest



Long QT Syndrome with T-Wave Alternans







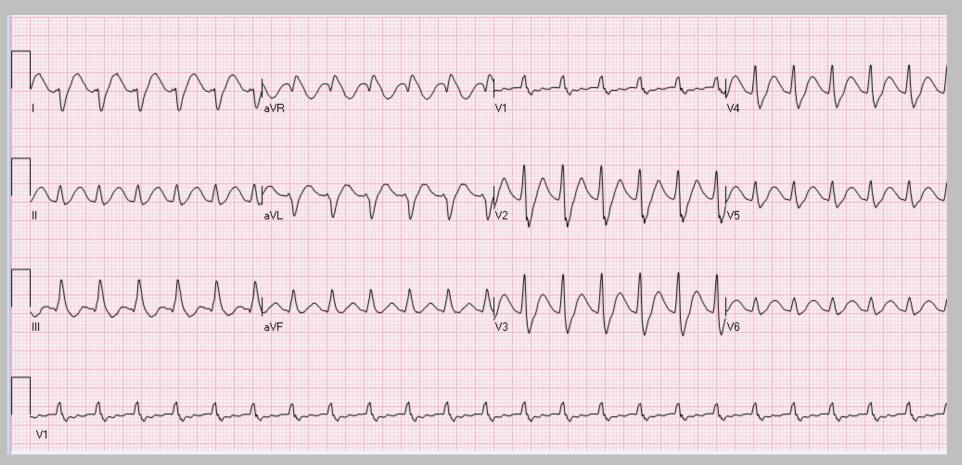
ECG 18 43 year old with altered mental status



43 year old with altered mental status

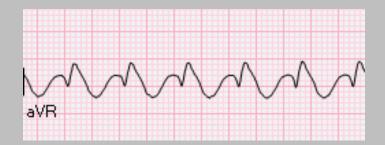
- 1. TCA overdose
- 2. Intracranial bleed
- 3. Renal failure
- 4. Atrial fibrillation
- 5. WPW

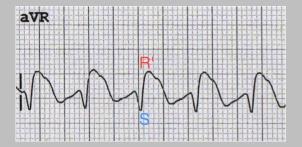
Tricyclic antidepressant (TCA) Overdose



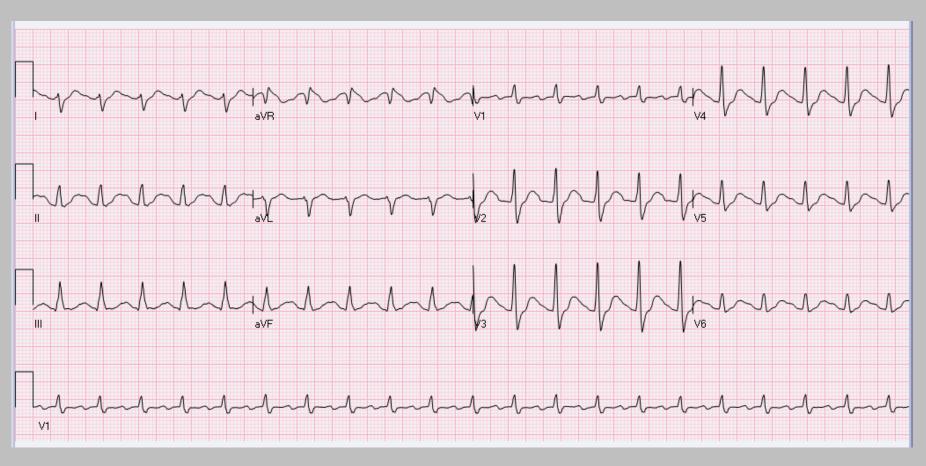
Tricyclic Antidepressant Overdose

- Intraventricular conduction delay
 - QRS > 100
- Right axis deviation of the terminal QRS
 - aVR terminal R wave > 3mm
 - R/S > 0.7 in aVR

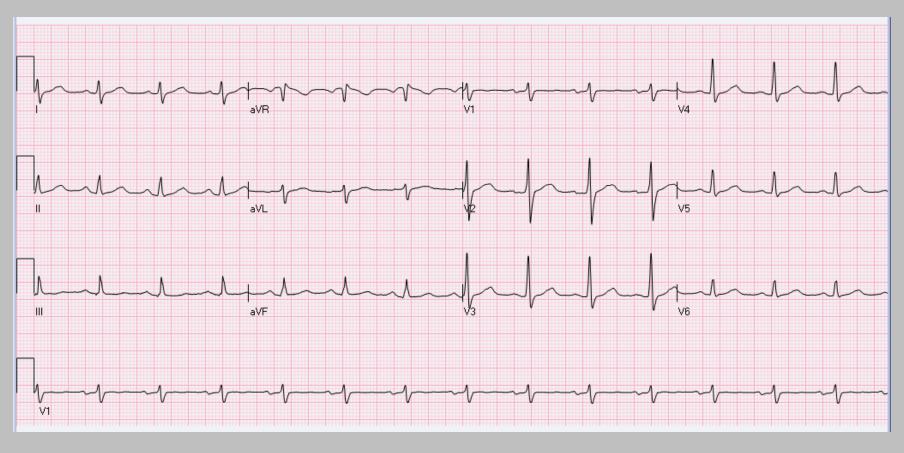




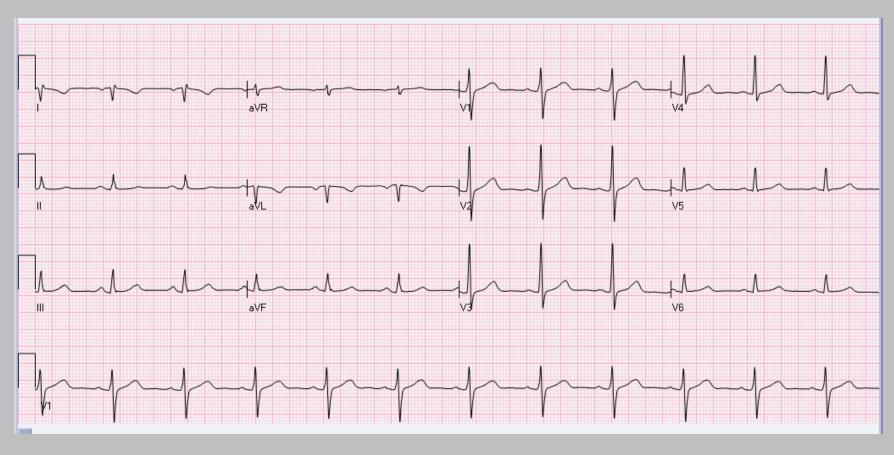
Day 2



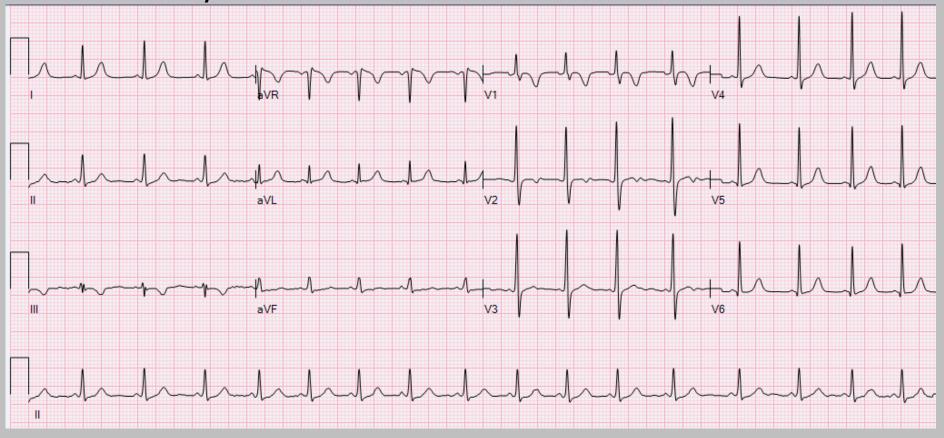
Day 3



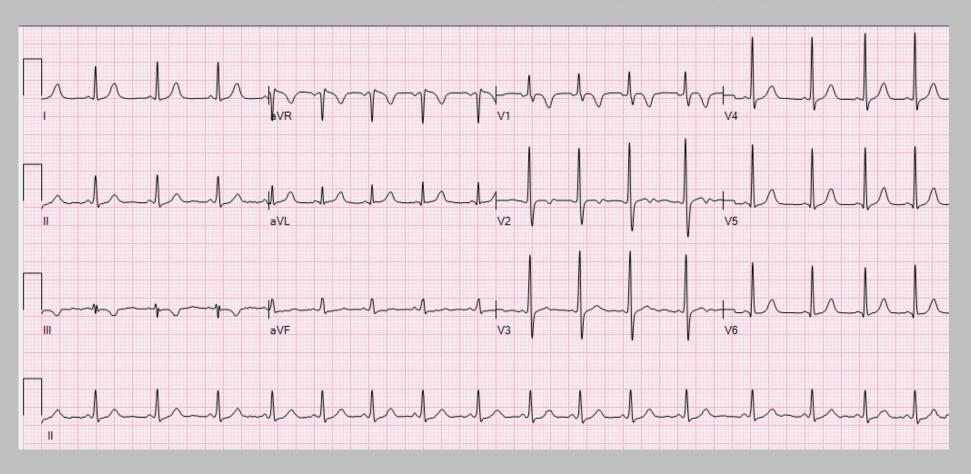
Day 4



ECG 19 15 year old with muscle weakness



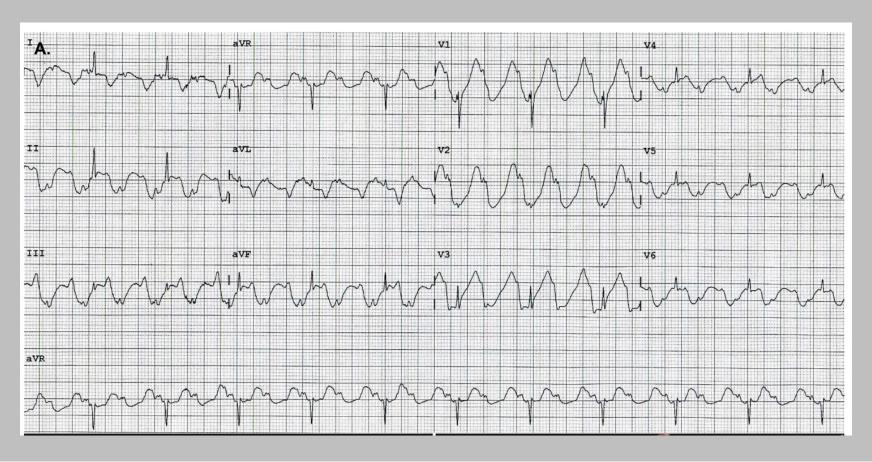
Duchenne Muscular Dystrophy



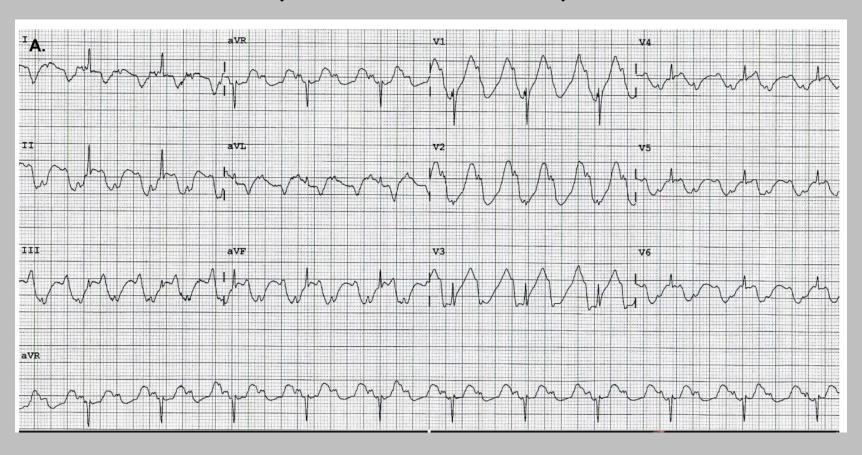
Tall R wave in V1

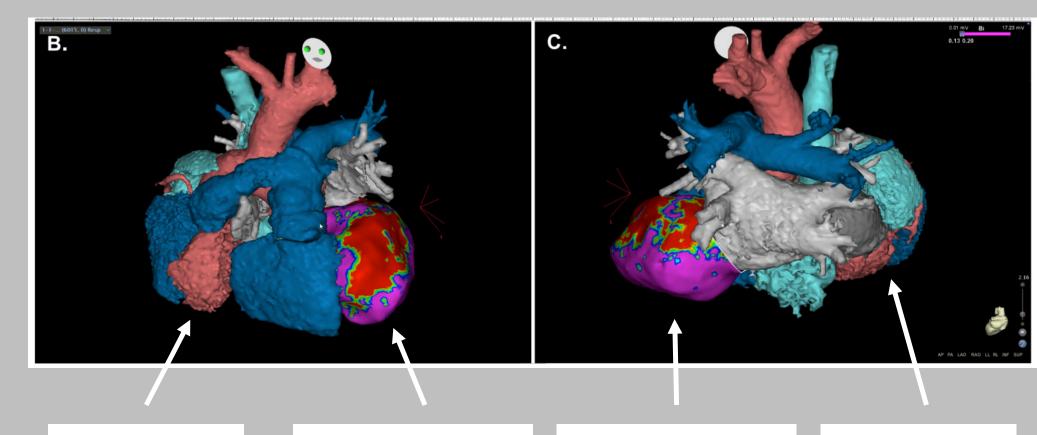
- RBBB
- Right ventricular hypertrophy
- Posterior MI
- WPW
- Duchenne muscular dystrophy
- Normal variant

ECG 20 79 year old with prior cardiac surgery with SOB



Ventricular tachycardia in a patient with heterotopic heart transplantation





Donor Heart

Recipient Heart

Recipient Heart

Donor Heart



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