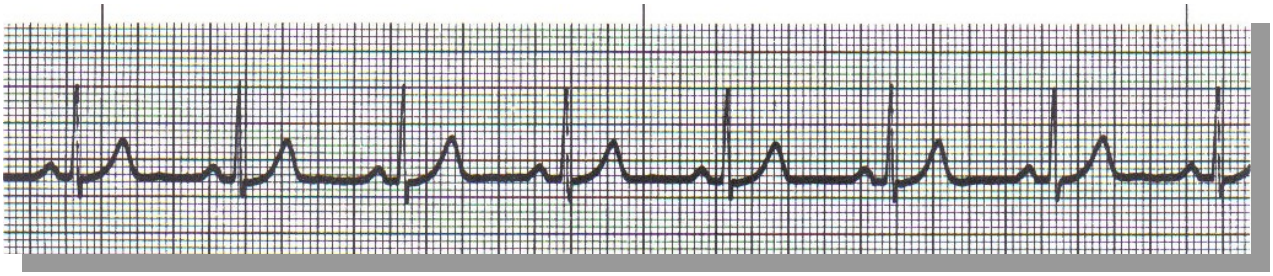
Chris Rivera IM7

Rhythm Strips Analysis for Practice

Practice #1:



1. What is the Rate?
   (Look at the atrial rate: P-P or ventricular rate: R-R)
   60bpm
2. Is there a “P” wave with every “QRS” complex?

   Yes
3. What is the width of the “QRS”?

   0.10
4. What is the length of the “PR” interval?

   0.12
5. What is the rhythm?

   Normal Sinus Rhythm
6. Any complications with this rhythm?

   No
7. What interventions are anticipated?
   None needed

Rhythm Strips Analysis for Part I of Intro to EKG

Practice #2

1. What is the Rate?
   (Look at the atrial rate: P-P or ventricular rate: R-R)
   80bpm
2. Is there a “P” wave with every “QRS” complex?

   Yes
3. What is the width of the “QRS”?

   0.9
4. What is the length of the “PR” interval?

   0.12
5. What is the rhythm?

   Sinus Rhythm
6. Any complications with this rhythm?
   Inverted T wave show a previous injury
7. What interventions are anticipated?

   No. Monitor the patient for changes

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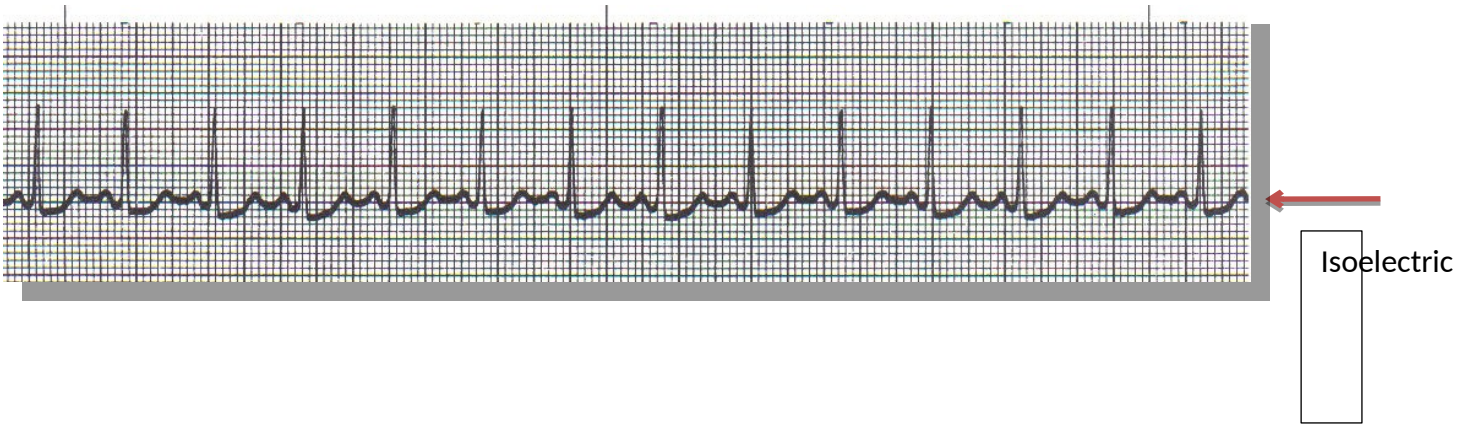
Practice #3



1. What is the Rate?
   (Look at the atrial rate: P-P or ventricular rate: R-R)
   120bpm
2. Is there a “P” wave with every “QRS” complex?

   Yes
3. What is the width of the “QRS”?

   0.5
4. What is the length of the “PR” interval?

   0.6
5. What is the rhythm?

   Sinus Tachycardia
6. Any complications with this rhythm?
   No.
7. What interventions are anticipated?

   None. Monitor patient for changes

Rhythm Strips Analysis for Part I of Intro to EKG

Practice #4

1. What is the Rate?
   (Look at the atrial rate: P-P or ventricular rate: R-R)
   120bpm
2. Is there a “P” wave with every “QRS” complex?

   Yes in the beginning and then they disappear
3. What is the width of the “QRS”?

   0.3
4. What is the length of the “PR” interval?

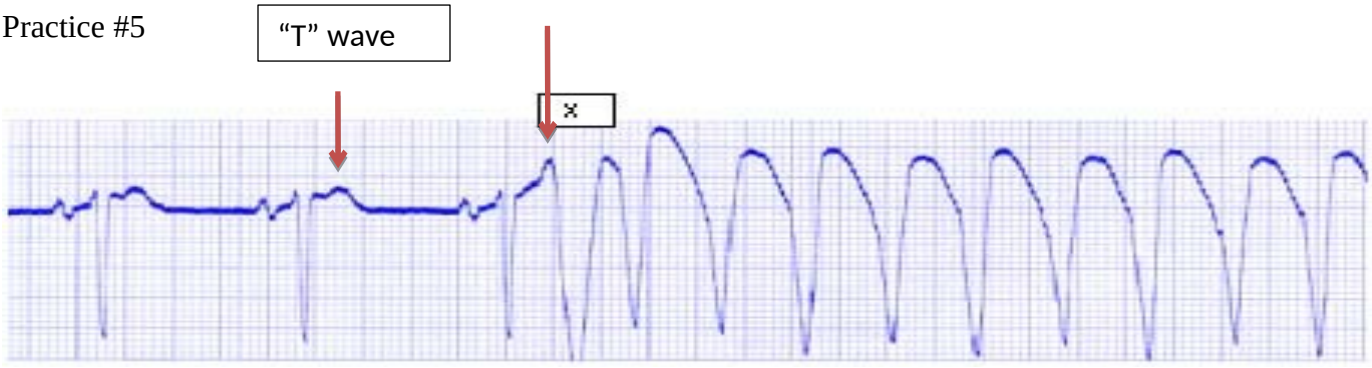
   0.12 until they disappear
5. What is the rhythm?

   SVT
6. Any complications with this rhythm?
   Yes. Patient may have palpitations, diaphoresis, hypotension, and syncope
7. What interventions are anticipated?

   Begin with Valsalva maneuver. If that doesn’t work 6mg RIVP followed by 20CC flush. 2nd dose of adenosine at 12mg RIVP followed by 20cc flush. If still no conversion perform synchronized cardiovert.

Rhythm Strips Analysis for Part I of Intro to EKG

Practice #5



1. What is the Rate?
   (Look at the atrial rate: P-P or ventricular rate: R-R)
   None
2. Is there a "P" wave with every "QRS" complex?

   NO
3. What is the width of the "QRS"?

   unmeasurable
4. What is the length of the "PR" interval?

   NONE
5. What is the rhythm?

   VTach
6. Any complications with this rhythm?
   VTach w/o a pulse = cardiac arrest
   Vtach w/ a pulse = cath lab
7. What interventions are anticipated?

   Vtach w/o a pulse CPR, defibrillation, and cardiac medications

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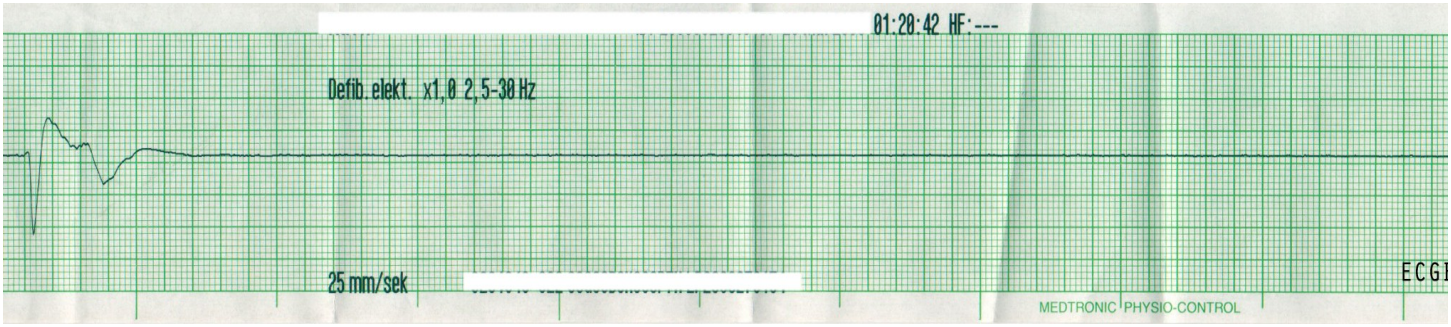
Practice #6



1. What is the Rate?
   (Look at the atrial rate: P-P or ventricular rate: R-R)
   0

2. Is there a “P” wave with every “QRS” complex?

   No

3. What is the width of the “QRS”?

   No

4. What is the length of the “PR” interval?

   None

5. What is the rhythm?

   Asystole

6. Any complications with this rhythm?
   Cardiac arrest

7. What interventions are anticipated?

   Check leads, perform CPR and give cardiac drugs until rhythm changes.

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Practice #7

1. What is the Rate?
   (Look at the atrial rate: P-P or ventricular rate: R-R)
2. Is there a “P” wave with every “QRS” complex?
3. What is the width of the “QRS”?
4. What is the length of the “PR” interval?
5. What is the rhythm?
6. Any complications with this rhythm?
7. What interventions are anticipated?

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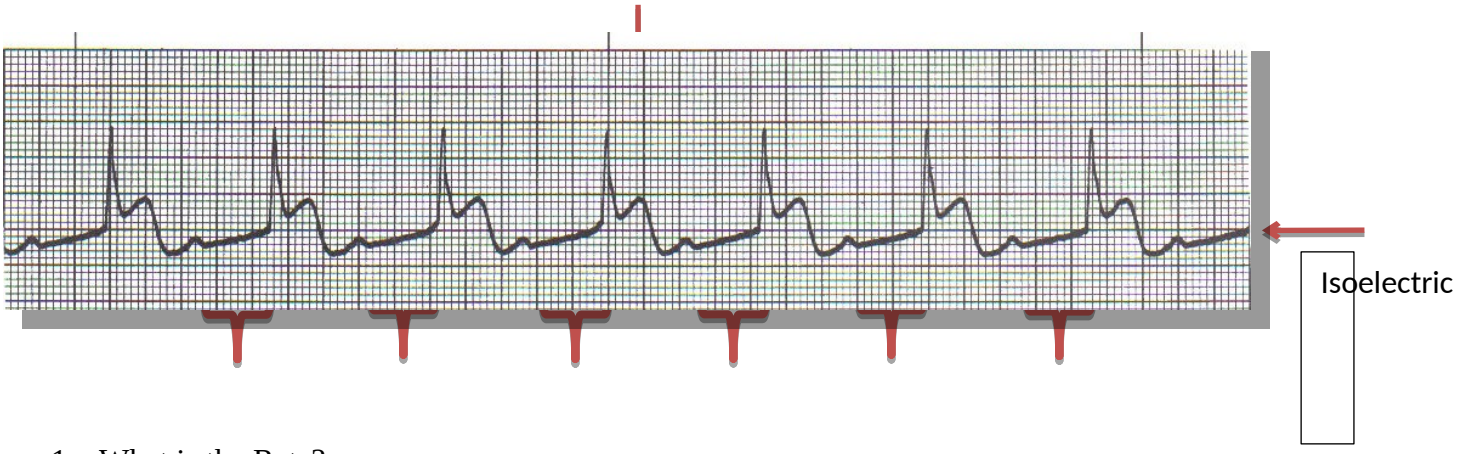
Practice #8



1. What is the Rate?
   (Look at the atrial rate: P-P or ventricular rate: R-R)
2. Is there a “P” wave with every “QRS” complex?
3. What is the width of the “QRS”?
4. What is the length of the “PR” interval?
5. What is the rhythm?
6. Any complications with this rhythm?
7. What interventions are anticipated?

You can do this!