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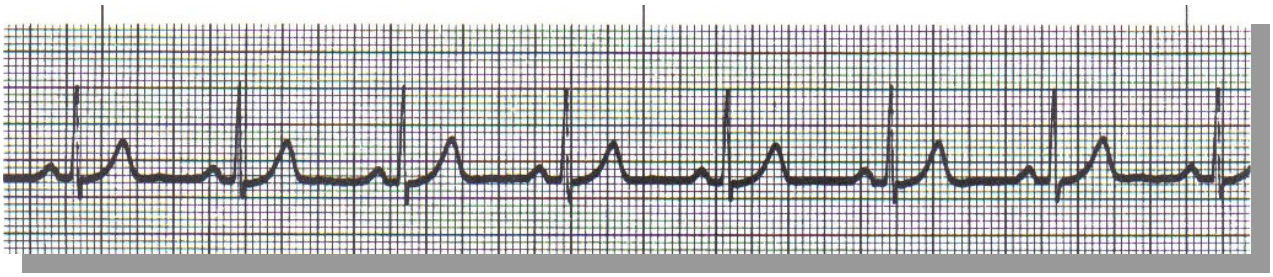
12/1/20

Rhythm Strips Analysis for Practice

Practice #1:



1. What is the Rate? 60 bpm
   (Look at the atrial rate: P-P or ventricular rate: R-R)
2. Is there a “P” wave with every “QRS” complex? Yes
3. What is the width of the “QRS”? 0.04 sec/1 small box
4. What is the length of the “PR” interval? 0.16 sec/ 4 small boxes
5. What is the rhythm? Regular
6. Any complications with this rhythm? No
7. What interventions are anticipated? Observe

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Practice #2

1. What is the Rate? 70 bpm
   (Look at the atrial rate: P-P or ventricular rate: R-R)
2. Is there a "P" wave with every "QRS" complex? Yes
3. What is the width of the "QRS"? 0.08 sec/2 boxes
4. What is the length of the "PR" interval? 0.16 sec/ 4 small boxes
5. What is the rhythm? Regular
6. Any complications with this rhythm? ST depression= injury to heart
7. What interventions are anticipated? Give oxygen and further diagnoses of cause

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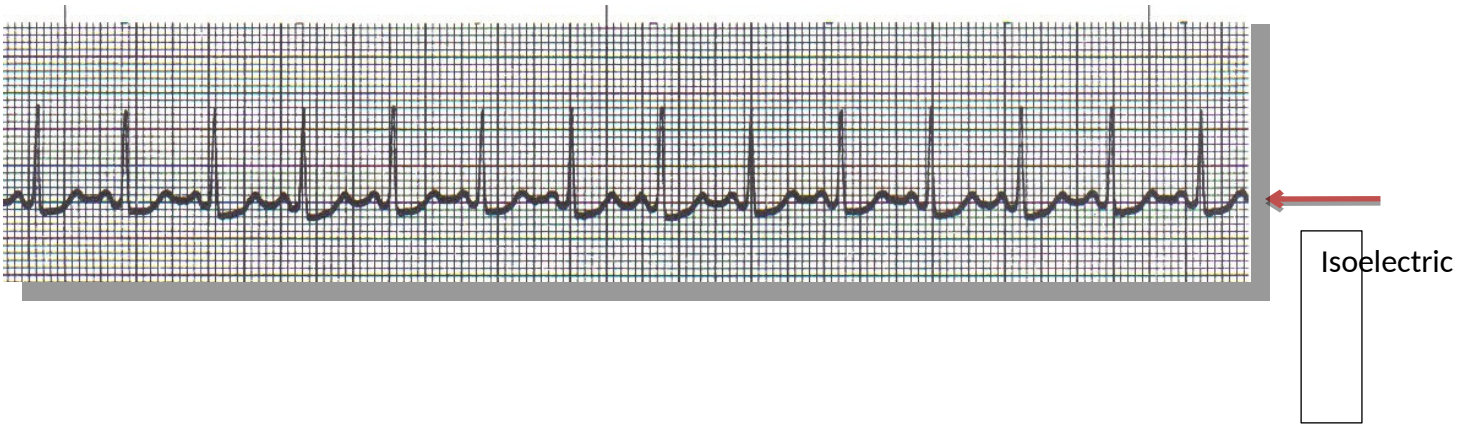
Practice #3



1. What is the Rate? 120 bpm
   (Look at the atrial rate: P-P or ventricular rate: R-R)
2. Is there a "P" wave with every "QRS" complex? Yes
3. What is the width of the "QRS"? 0.04 sec/1 small box
4. What is the length of the "PR" interval? 0.12 sec/ 3 small boxes
5. What is the rhythm? Regular
6. Any complications with this rhythm? Sinus Tachycardia
7. What interventions are anticipated? Observe for symptoms. If they are symptomatic: treat tachycardia, treat pain if this is the cause, treat hypovolemia if this is the cause, Beta Blocker, Calcium Channel Blocker, Adenosine, O2. If they become unstable use synchronized cardioversion,

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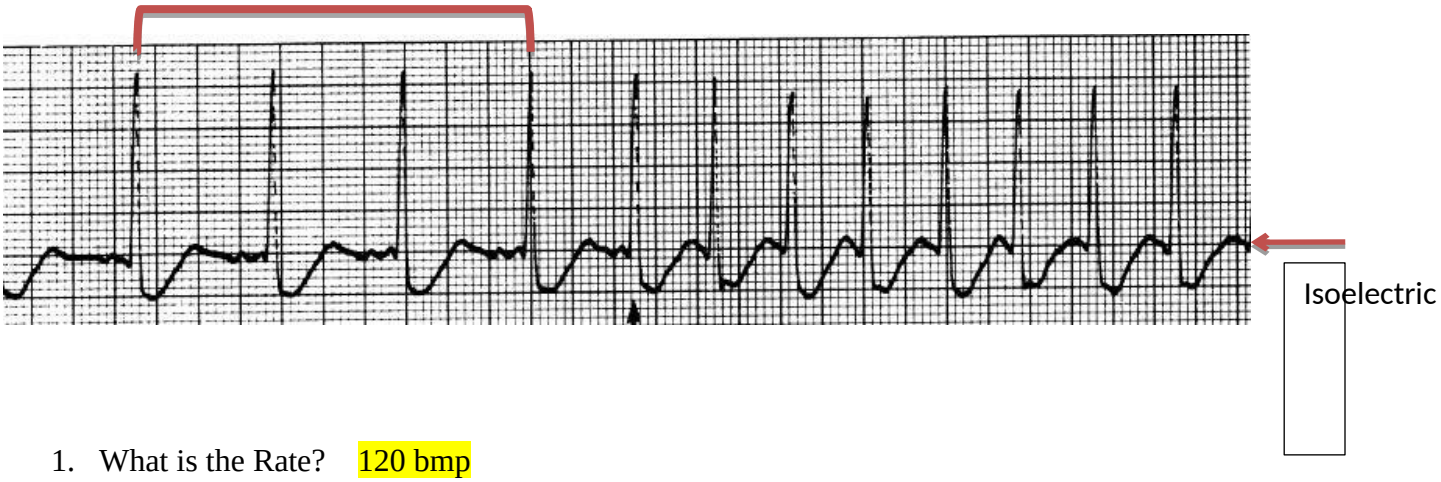
Practice #4



1. What is the Rate? 120 bmp
   (Look at the atrial rate: P-P or ventricular rate: R-R)
2. Is there a "P" wave with every "QRS" complex? No, non-distinct
3. What is the width of the "QRS"? 0.04 sec/ 1 small box
4. What is the length of the "PR" interval? Unable to determine
5. What is the rhythm? Irregular
6. Any complications with this rhythm? Atrial Fibrillation- Uncontrolled
7. What interventions are anticipated? Control ventricular rate to less than 100 bpm. Beta Blockers, Calcium channel blockers, Digoxin, Amioterone, or cardioversion.

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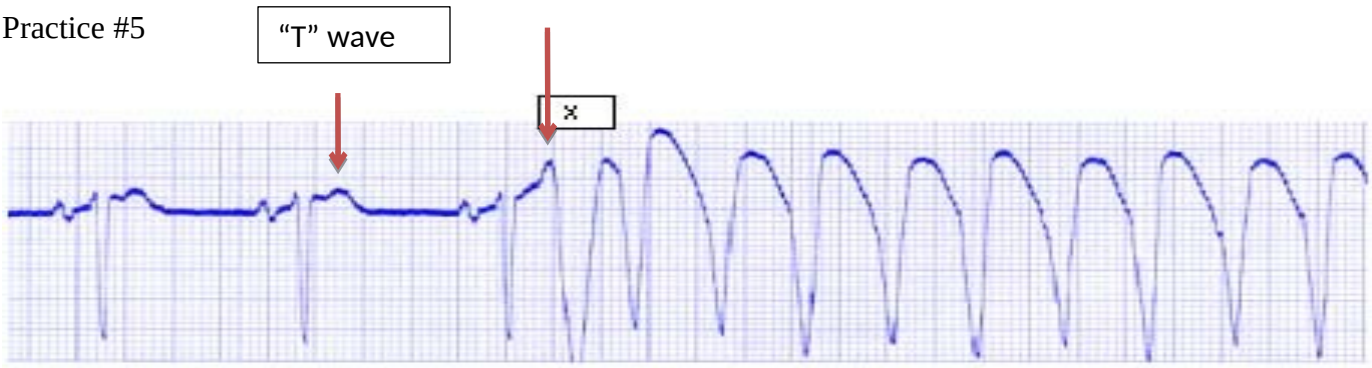
Practice #5



1. What is the Rate? Around 130 bpm
   (Look at the atrial rate: P-P or ventricular rate: R-R)
2. Is there a "P" wave with every "QRS" complex? No
3. What is the width of the "QRS"? wide and irregular
4. What is the length of the "PR" interval? Unable to determine
5. What is the rhythm? Irregular
6. Any complications with this rhythm? Ventricular Tachycardia- Monomorphic
7. What interventions are anticipated? Check for pulse. If they have a pulse send the patient to cath lab. If they have no pulse do CPR and defibrillate, give epinephrine and amiodarone.

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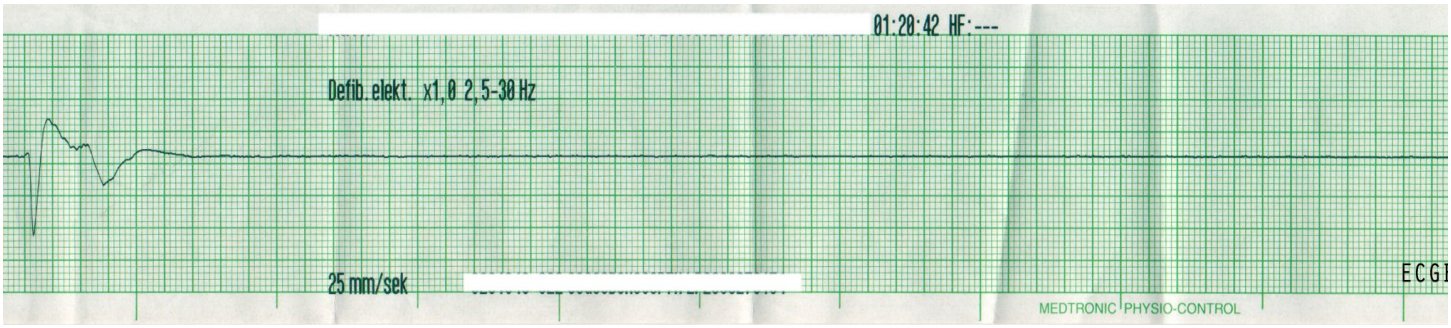
Practice #6



1. What is the Rate? No HR
   (Look at the atrial rate: P-P or ventricular rate: R-R)
2. Is there a "P" wave with every "QRS" complex? No
3. What is the width of the "QRS"? Not present
4. What is the length of the "PR" interval? Not present
5. What is the rhythm? No rhythm
6. Any complications with this rhythm? Asystole
7. What interventions are anticipated? CPR, Epinephrine, Amiodarone, and intubation.

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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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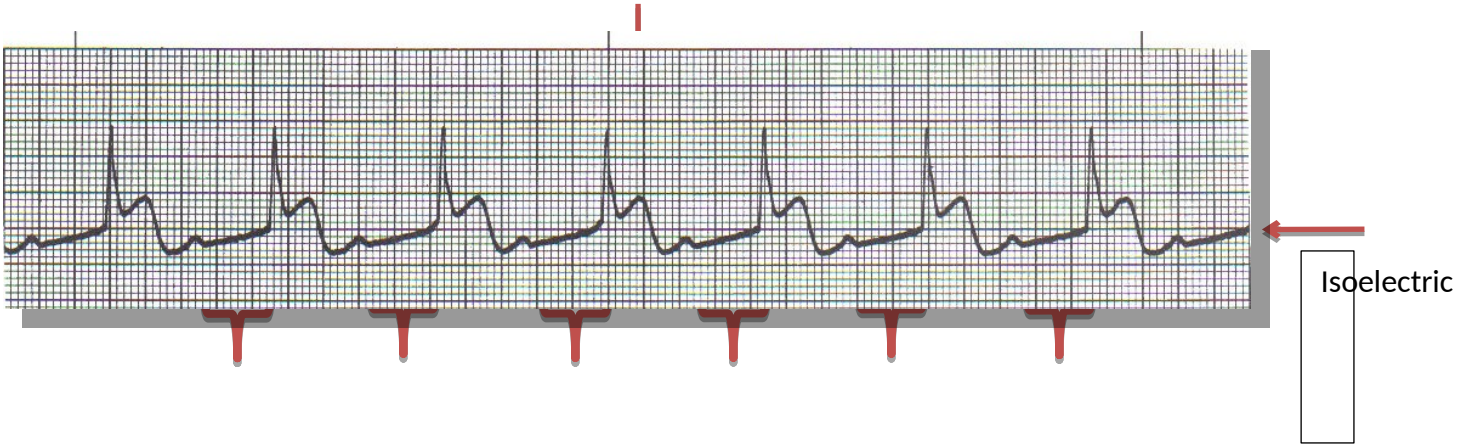
Practice #8



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!