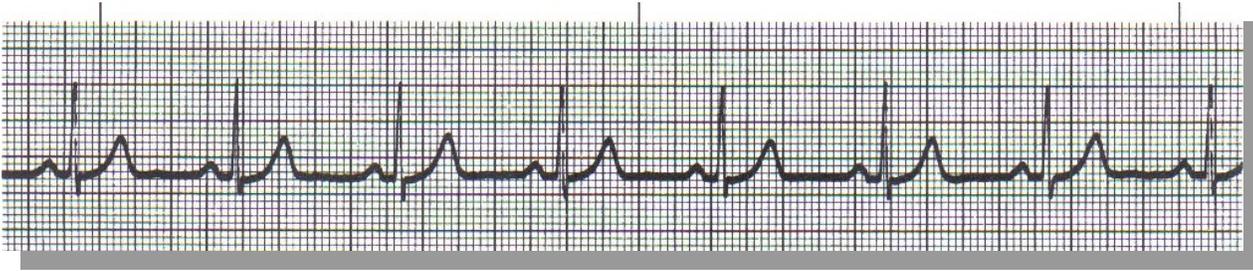


Rhythm Strips Analysis for Practice Answers

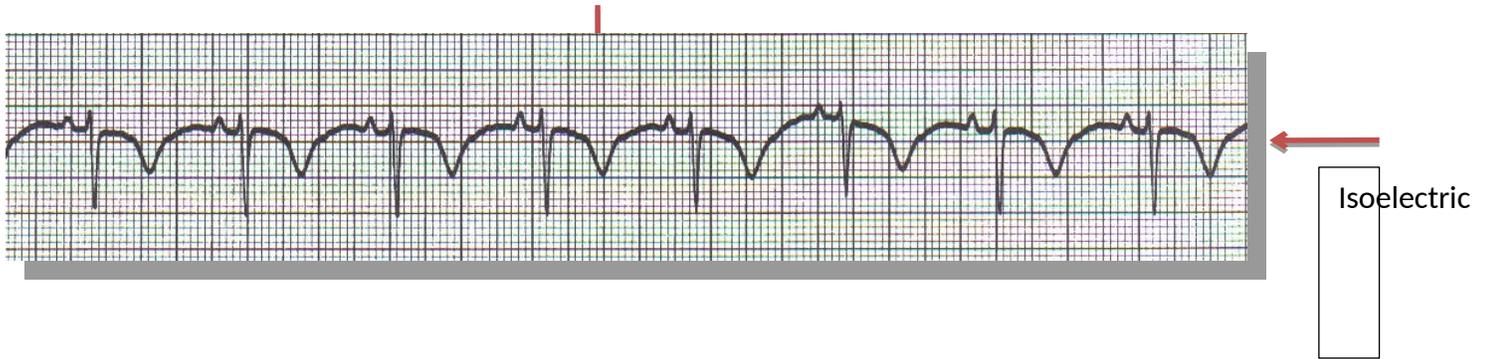
Practice #1:



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"? **0.08s**
4. What is the length of the "PR" interval? **0.16s**
5. What is the rhythm? **Normal Sinus Rhythm**
6. Any complications with this rhythm? **No**
7. What interventions are anticipated? **Assess the patient, radial and apical pulses**

Normal HR: 60-100 bpm

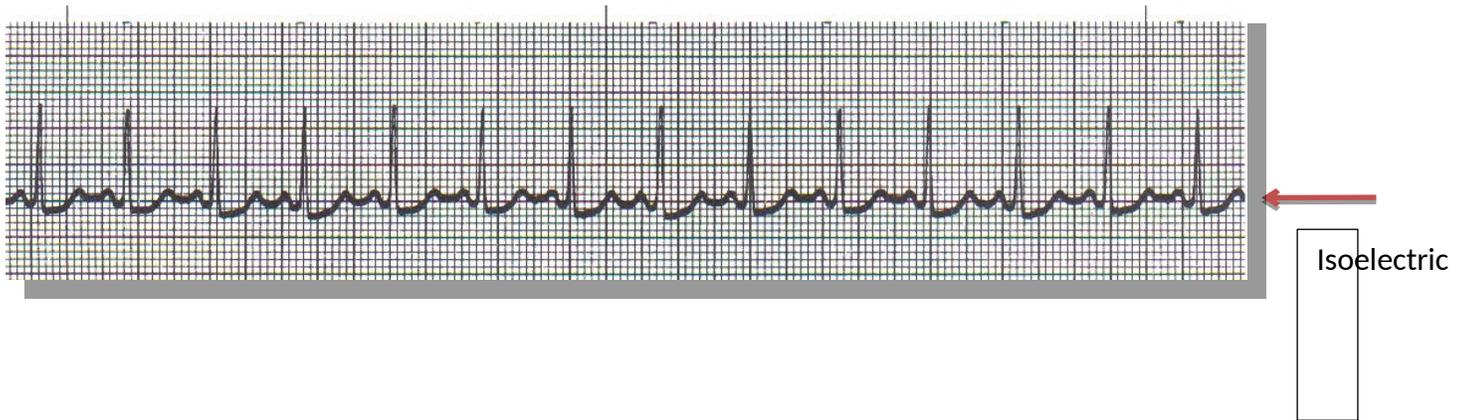
Practice #2



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”? **0.08s**
4. What is the length of the “PR” interval? **0.12s**
5. What is the rhythm? **Sinus Rhythm with inverted “T” wave.**
6. Any complications with this rhythm? **Ischemia**
7. What interventions are anticipated? **cardiac assessment, labs, oxygen, notify the physician.**

Rhythm Strips Analysis for Part I of Intro to EKG

Practice #3

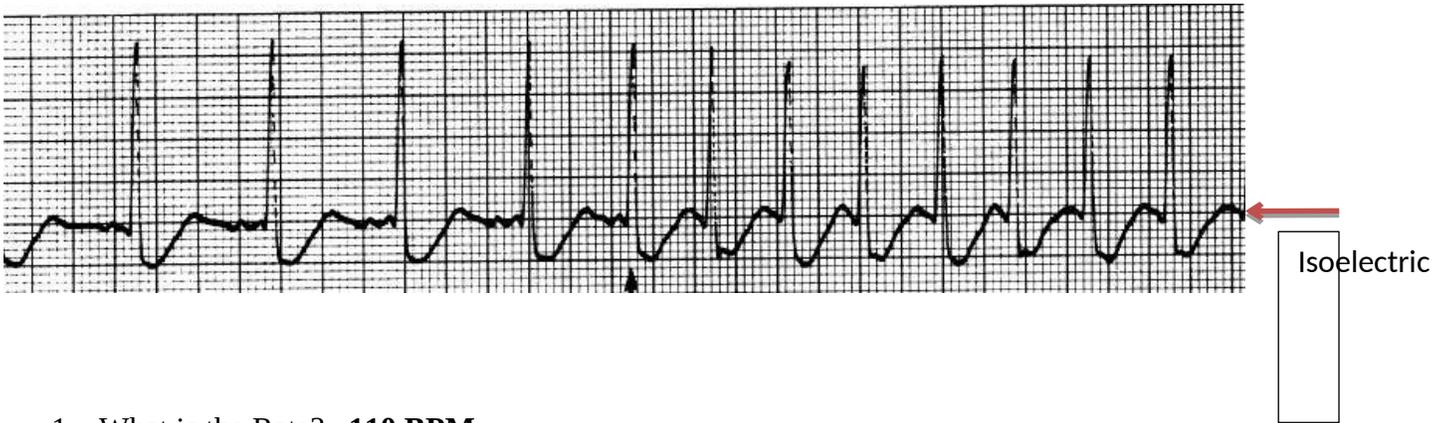


1. What is the Rate? **130 bpm**
(Look at the atrial rate: P-P or ventricular rate: R-R)
2. Is there a "P" wave with every "QRS" complex? **Yes**
3. What is the width of the "QRS"? **0.08s**
4. What is the length of the "PR" interval? **0.12s**
5. What is the rhythm? **Sinus Tachycardia with slightly depressed 'ST'**
6. Any complications with this rhythm? **loss of filling times, decreased cardiac output if the patient already has a heart disease**
7. What interventions are anticipated? **Treat the cause, fever, pain, fear, anxiety, hypovolemia. Have the patient rest if the tachycardia is due to exercise or over exertion.**



Rhythm Strips Analysis for Part I of Intro to EKG

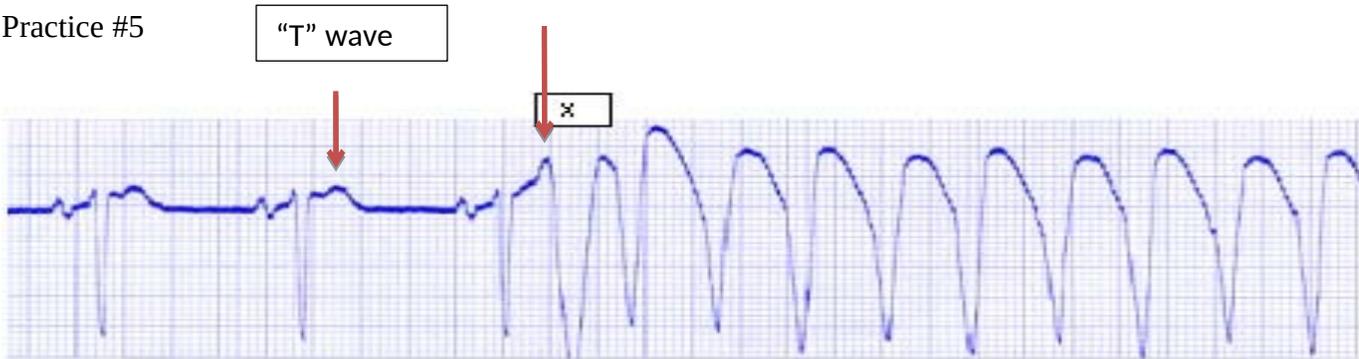
Practice #4



1. What is the Rate? **110 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"? **0.08s**
4. What is the length of the "PR" interval? **No "PR" interval**
5. What is the rhythm? **Paroxysmal Atrial fibrillation with Rapid Ventricular Response (RVR)**
6. Any complications with this rhythm? **Low perfusion and decreased cardiac output**
7. What interventions are anticipated? **antiarrhythmic drug amiodarone or diltiazem**

Rhythm Strips Analysis for Part I of Intro to EKG

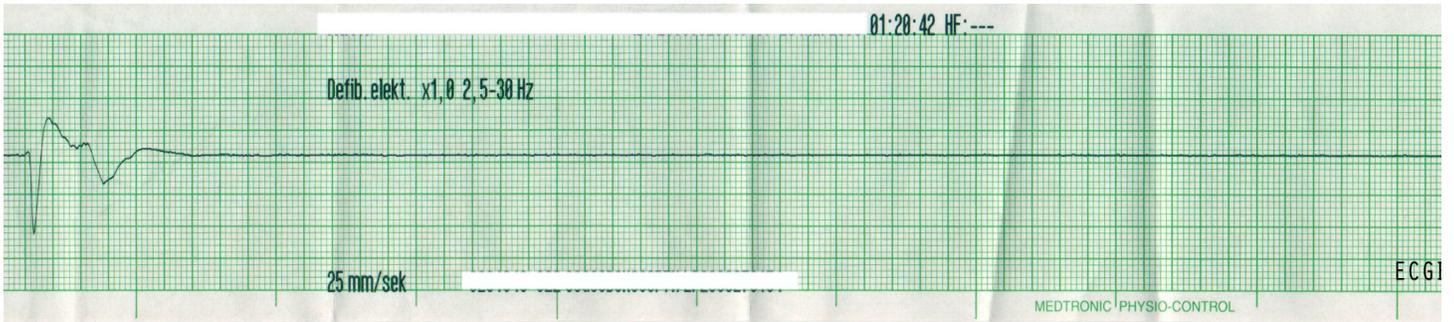
Practice #5



1. What is the Rate? **130 bpm**
(Look at the atrial rate: P-P or ventricular rate: R-R)
2. Is there a "P" wave with every "QRS" complex? **Yes before VTACH**
3. What is the width of the "QRS"? **0.08s then 0.32s**
4. What is the length of the "PR" interval? **0.20s**
5. What is the rhythm? **"R" on "T" phenomenon Vtach**
6. Any complications with this rhythm? **Low cardiac out put and patient might die**
7. What interventions are anticipated? **Depends on the if the patient is stable whether you would start CPR or if you would do a vagal maneuver. Notify the HCP**

Rhythm Strips Analysis for Part I of Intro to EKG

Practice #6



1. What is the Rate? **Asystole** (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"? **0.16s then asystole**
4. What is the length of the "PR" interval? **NO**
5. What is the rhythm? **Asystole**
6. Any complications with this rhythm? **Death**
7. What interventions are anticipated? **Initial BLS/ACLS, CPR (chest compressions), DO NOT DEFIBRILLATE!**

Practice #7



1. What is the Rate? **90 bpm**
(Look at the atrial rate: P-P or ventricular rate: R-R)
2. Is there a "P" wave with every "QRS" complex? **No normal "P" waves**
3. What is the width of the "QRS"? **0.08s**
4. What is the length of the "PR" interval? **None**
5. What is the rhythm? **Atrial Flutter**
6. Any complications with this rhythm? **Decreased cardiac output, thrombus, emboli, CVA, PE**
7. What interventions are anticipated? **Cardio-aversion if the pt has been in AFIB for less than 48 hrs and if the pt has been in AFIB for more than 48 hrs then start on warfarin therapy to prevent clots from traveling somewhere else**

Practice #8



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”? **0.16s**
4. What is the length of the “PR” interval? **0.48s**
5. What is the rhythm? **Sinus rhythm with 1st degree AV block & “ST” elevation**
6. Any complications with this rhythm? **Most 1st degree AV blocks are benign, but this patient has “ST” elevation....notify physician**
7. What interventions are anticipated? **Send to the cath lab to fix the MI**



You can do this!

I don't know this is really hard but I'm trying.