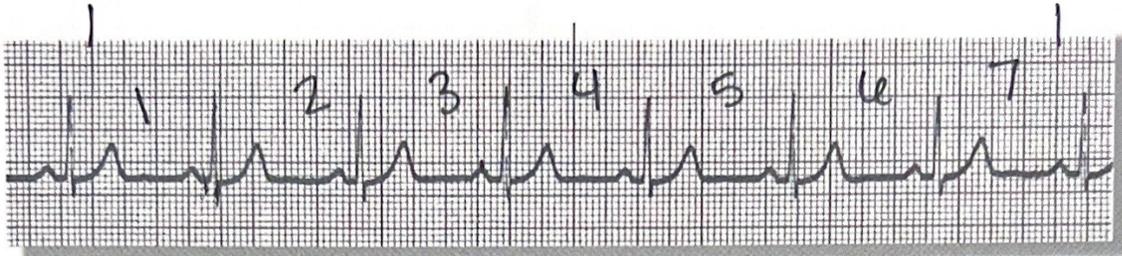


Rhythm Strips Analysis for Practice

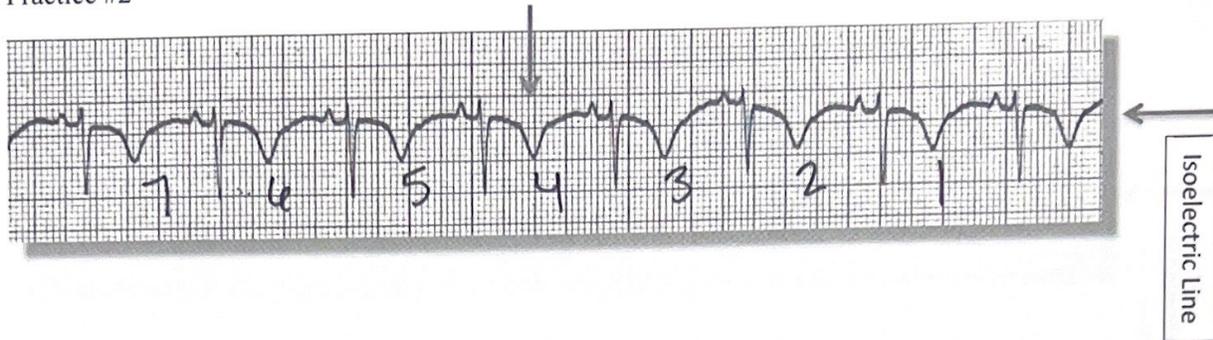
Practice #1:



1. What is the Rate?
(R-R) 70 bpm
2. Is there a "P" wave with every "QRS" complex? Yes
3. What is the width of the "QRS"? .08
4. What is the length of the "PR" interval? .16
5. What is the rhythm?
Normal Sinus Rhythm
6. Any complications with this rhythm?
None
7. What interventions are anticipated?
continue to assess and monitor the patient (Look at the patient). This could be PEA

Rhythm Strips Analysis for Part I of Intro to EKG

Practice #2



1. What is the Rate?

(R-R)

71 bpm

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

Yes

3. What is the width of the "QRS"?

.08

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

0.12

5. What is the rhythm?

Sinus Rhythm w inverted T wave

6. Any complications with this rhythm?

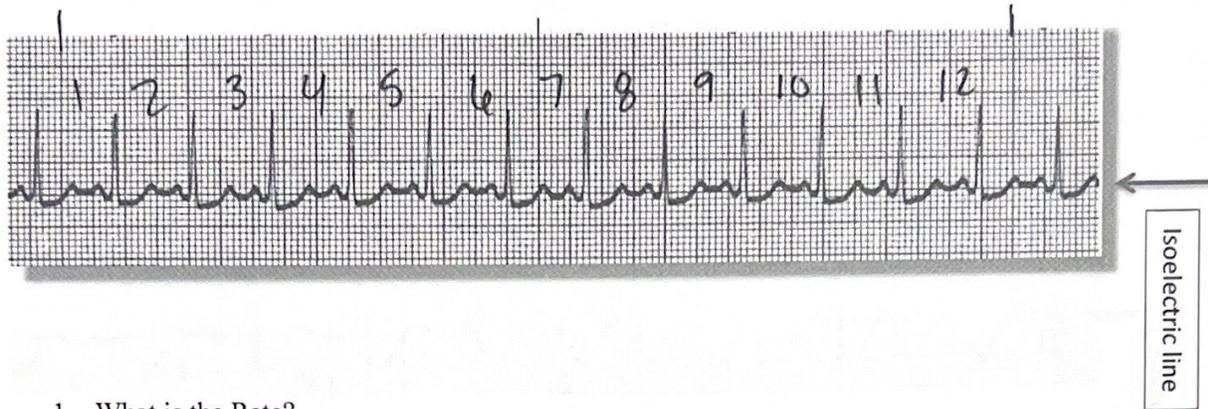
ST depression = ischemia

7. What interventions are anticipated?

- Assess
- labs
- give O₂
- call the doctor

Rhythm Strips Analysis for Part I of Intro to EKG

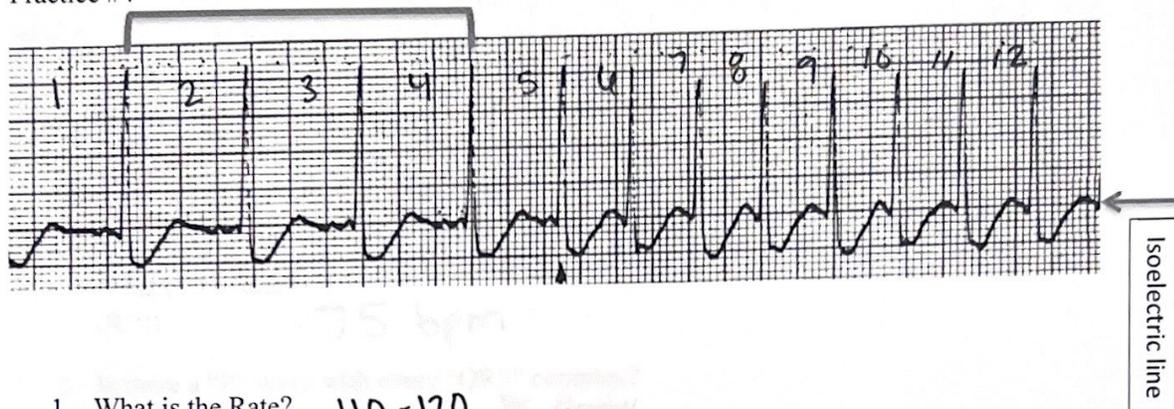
Practice #3



1. What is the Rate?
(R-R) **130 bpm**
2. Is there a "P" wave with every "QRS" complex?
Yes
3. What is the width of the "QRS"?
.08
4. What is the length of the "PR" interval?
0.12
5. What is the rhythm?
Sinus Tach w ST depression
6. Any complications with this rhythm?
Decreased cardiac perfusion and contractility
7. What interventions are anticipated?
 - Treat fever
 - Help w pain
 - Anxiety reduction
 - Aide w possible rapid breathing (hypovolemia)

Rhythm Strips Analysis for Part I of Intro to EKG

Practice #4



1. What is the Rate? **110-120**
(R-R)
2. Is there a "P" wave with every "QRS" complex? **NO**
3. What is the width of the "QRS"? **0.08**
4. What is the length of the "PR" interval? **N/A**
5. What is the rhythm?
[P]A-Fib (RVR)
6. Any complications with this rhythm?
Decreased CO: low out & profusion
7. What interventions are anticipated?
**Since it is paroxysmal the doctor may order amiodrone
if the pt. is unstable we may need synchronized conversion**

Rhythm Strips Analysis for Part I of Intro to EKG

Practice #5



1. What is the Rate?
(R-R)

75 bpm

2. Is there a "P" wave with every "QRS" complex?
Yes Previous

3. What is the width of the "QRS" complex?
0.08 - 0.32

4. What is the length of the "PR" interval?
.20

5. What is the rhythm?

V-Tach (RonT Phenomenon)

6. Any complications with this rhythm?

Decreased CO, No perfusion, low systolic blood pressure

7. What interventions are anticipated?

Unstable

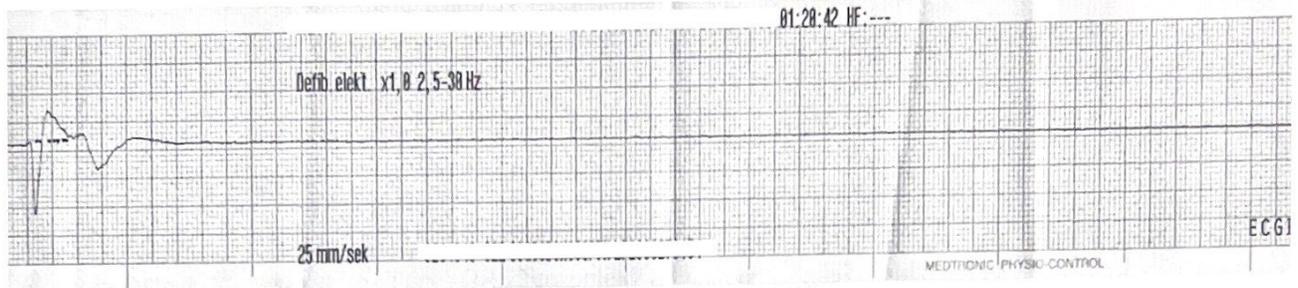
- initiate ACLS and BLS

Stable

- Educate the patient to cough or bore down (vagal maneuver)

Rhythm Strips Analysis for Part I of Intro to EKG

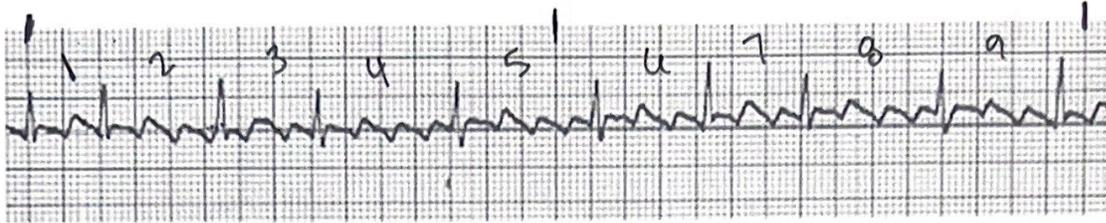
Practice #6



1. What is the Rate?
(R-R) N/A (possible Asystole)
2. Is there a "P" wave with every "QRS" complex? NO
3. What is the width of the "QRS"? ~~MMB~~ 0.60
4. What is the length of the "PR" interval? NO
5. What is the rhythm? Asystole
6. Any complications with this rhythm? Pt. death
7. What interventions are anticipated?
- CPR (good cpr)
NEVER SHOCK/Defibrillate asystole

Rhythm Strips Analysis for Part I of Intro to EKG

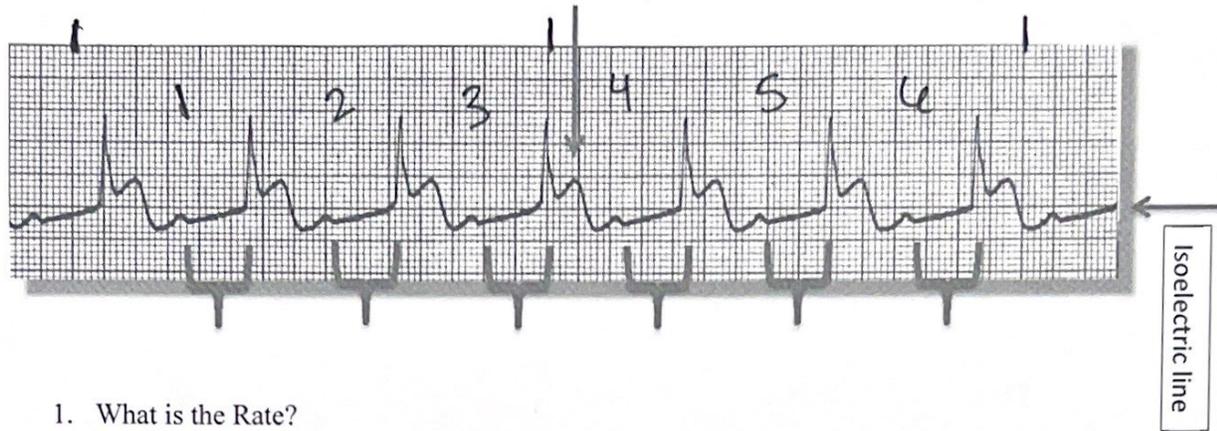
Practice #7



1. What is the Rate?
(R-R) 90bpm
2. Is there a "P" wave with every "QRS" complex? F. waves (not normal "p" waves)
3. What is the width of the "QRS"? 0.08 Normal 2 squares
4. What is the length of the "PR" interval? None variation of flutters
5. What is the rhythm? Atrial Flutter
6. Any complications with this rhythm? Stroke, CVA, emboli, thrombus, PE, ↓ CO
7. What interventions are anticipated?
IF pt stable
anticoag therapy
to prevent
clot formation
|
unstable
synchronized cardioversion

Rhythm Strips Analysis for Part I of Intro to EKG

Practice #8



1. What is the Rate?

(R-R)

60 bpm

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

yes, UP to QRS (wide)

3. What is the width of the "QRS"?

.16s

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

.48s

5. What is the rhythm?

Sinus w 1st degree AV block + ST elevation - MI

6. Any complications with this rhythm?

1st degree AV block are okay but w ST elevation MI can lead to death.

7. What interventions are anticipated?

Initiate MONA, will need 2 large bore IV for cath lab. Fixing the MI may fix the AV Block.

Notify the Doctor
Fast (time)



You can do this!