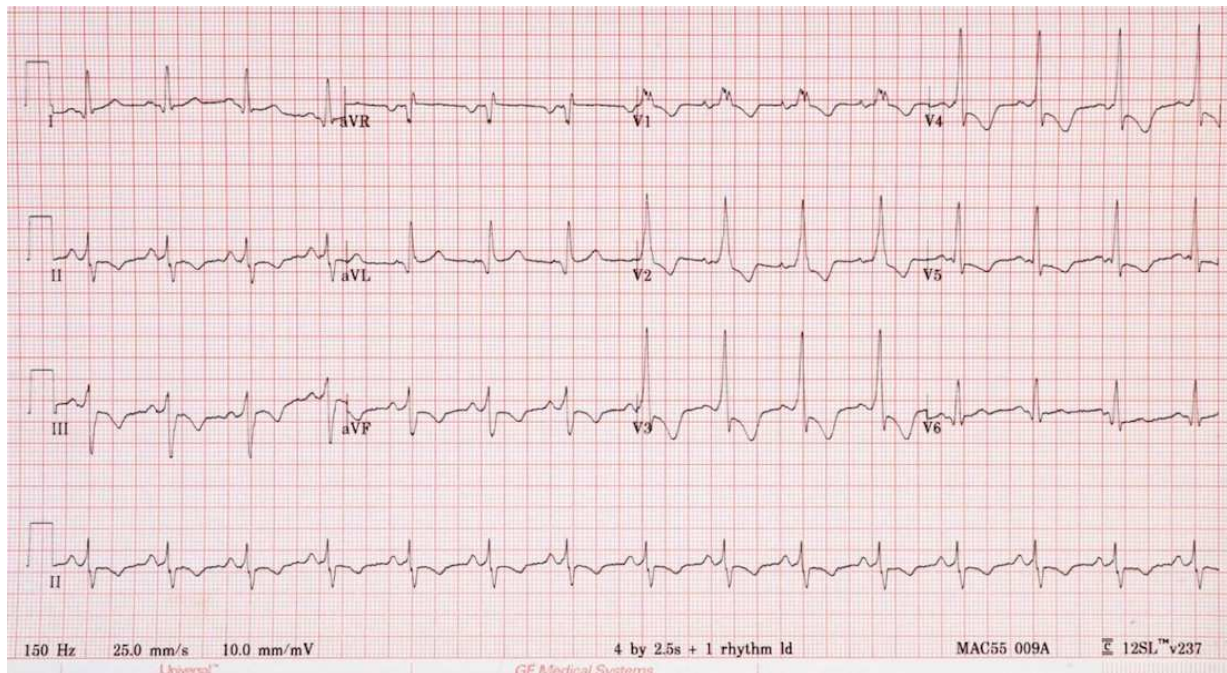


## VAQ 2011.2.4 (ECG)

A 50 year old man presents following an episode of palpitations and syncope.  
At the time of the ECG shown he is asymptomatic.



a. Describe and interpret his ECG (100%)

This ECG demonstrates a number of abnormalities. The short PR, delta wave, widened QRS and ST segment changes with this clinical picture are highly suggestive of WPW and re-entrant tachyarrhythmia. Other significant differentials include myocardial ischaemia (ST changes, middle aged man) PE (RBBB pattern and syncope)

Rate 90 bpm  
Rhythm sinus  
Axis – borderline LAD

P – biphasic V1/2 otherwise unremarkable  
Q – no significant changes  
R – RSR pattern right in V1-3 (RBBB pattern)  
S – deep S III, aVF  
T – inverted inferiorly and V1-5  
U – not seen

PR – short (<0.12s)  
QRS – long (>0.12s)  
ST – downsloping ST depression V1-5  
QTc – visually normal (less than half R-R)

Delta wave noted - WPW  
LAD and RBBB suggest bifascicular block  
RBBB

- idiopathic
- RH strain – PE
- ischaemia
- degenerative

ST segment / T changes  
repolarisation abnormality (WPW, RBBB)  
cardiac ischaemia

Cardiac ischaemia less likely in absence of symptoms. WPW and arrhythmia more likely