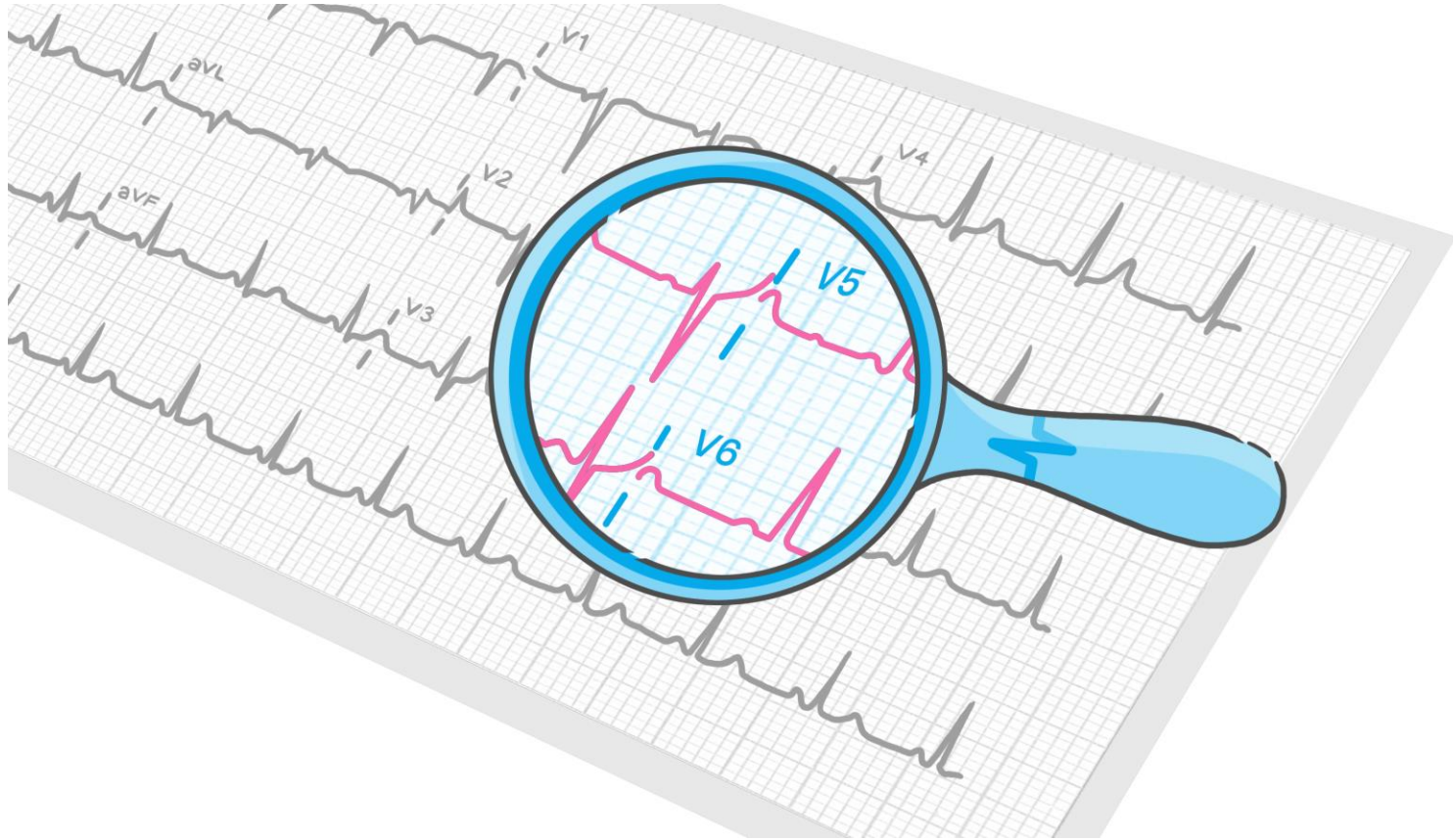


# The 12 Lead ECG & ACS



## 12 Lead ECG Workbook

# 12 Lead ECG in Acute Coronary Syndromes:

## Practical Steps to Priority Actions

### 1. Baseline

- begin with a focused history and assessment
- fully* interpret the ECG *rhythm* – *is the QRS wide? BBB?*
- collect prior 12 lead ECG(s) and current lab values (no delay)

### 2. Search for ST, T, Q changes

### 3. Rule out Rule in

- rule out imposters
- rule in acute coronary syndromes
- rule in those who require rapid reperfusion

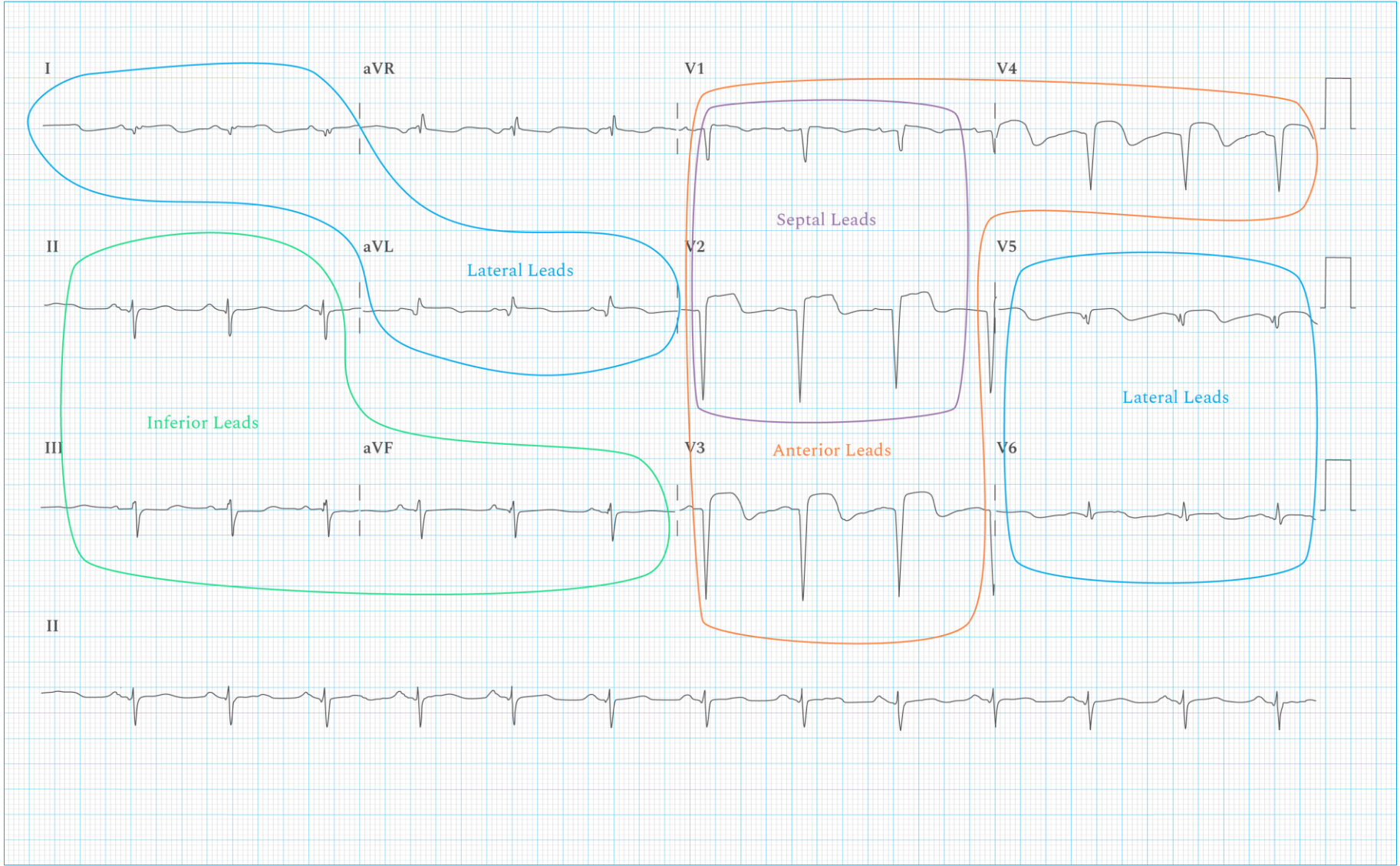
### Possible Imposters

- Early repolarization (diffuse ST elevation)
- Pericarditis (diffuse ST elevation)
- Brugada syndrome (coved ST elevation in V1 & V2)
- Subarachnoid hemorrhage (ST elevation or depression)
- Hypokalemia (mild ST depression and T wave inversion)
- Left ventricular hypertrophy (strain pattern of ST depression)
- Digoxin dip (ST depression)
- Tension pneumothorax
- Pulmonary Embolus
- And more...

Consider a 15/18 lead ECG when faced with ST depression only, an inferior MI or an inconclusive 12 lead ECG (when coupled with suspicious signs and symptoms of ischemia and infarction).

# Lead View Summary

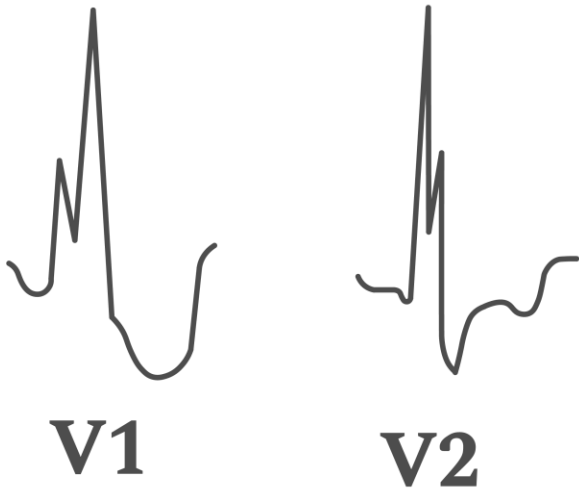
| Lead        | View      |
|-------------|-----------|
| V1,V2       | Septal    |
| V3,V4       | Anterior  |
| I,aVL,V5,V6 | Lateral   |
| II,III,aVF  | Inferior  |
| V4-6R       | Right     |
| V7-9        | Posterior |



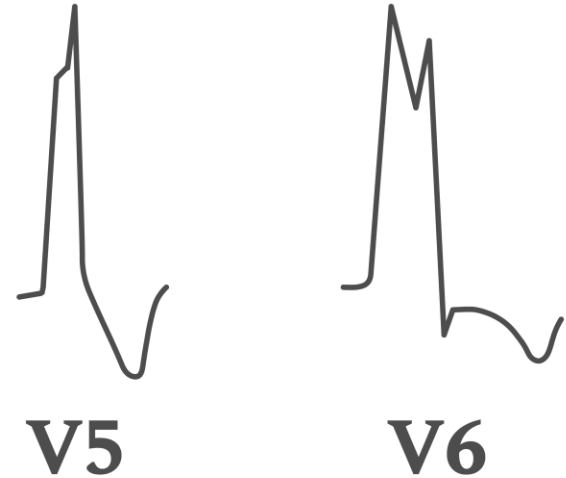
# Right and Left BBB

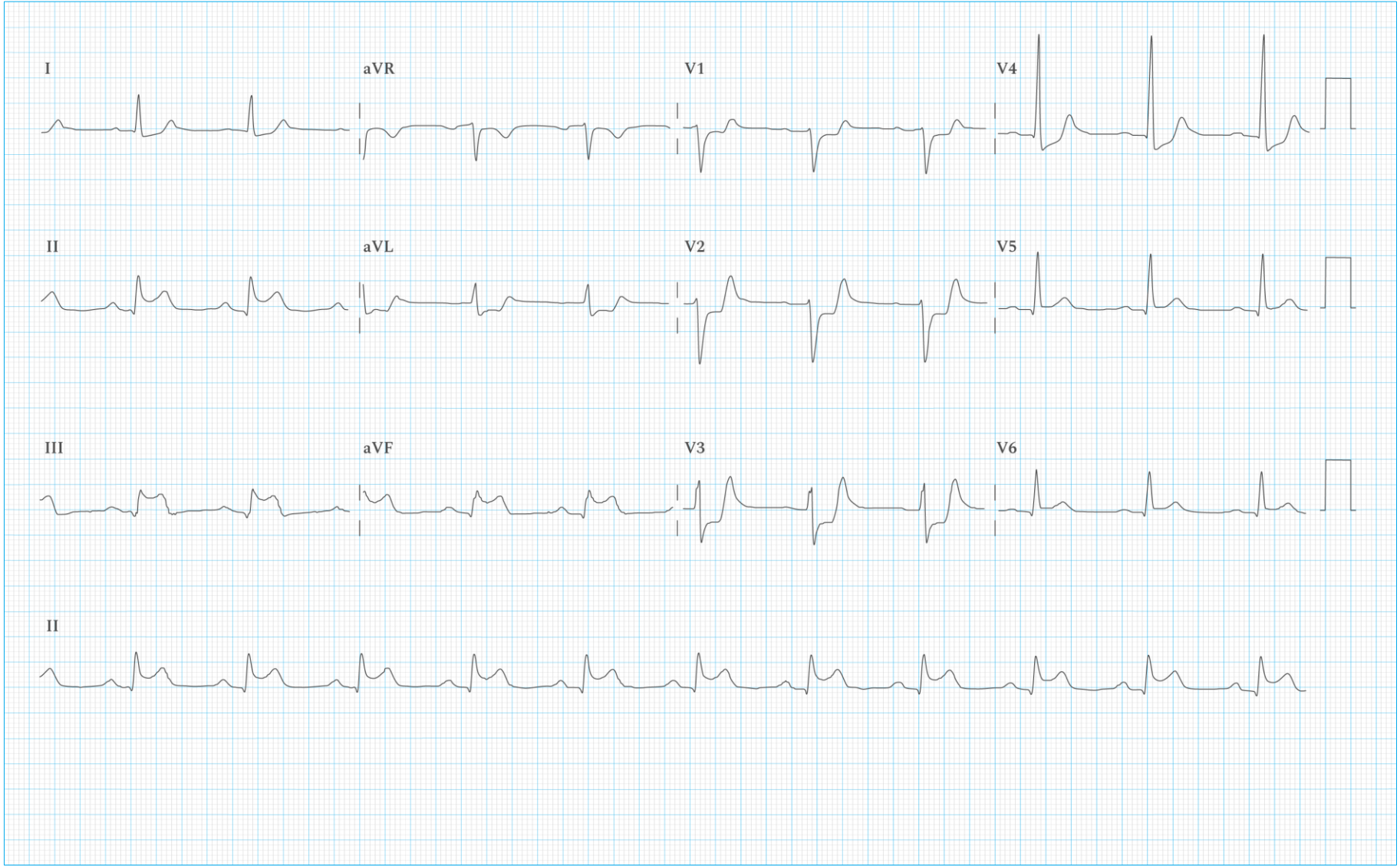
- **RBBB**: QRS 3 mm or more with notching of QRS in **V1,V2**
- **LBBB**: QRS 3 mm or more with notching of QRS in **V5,V6**

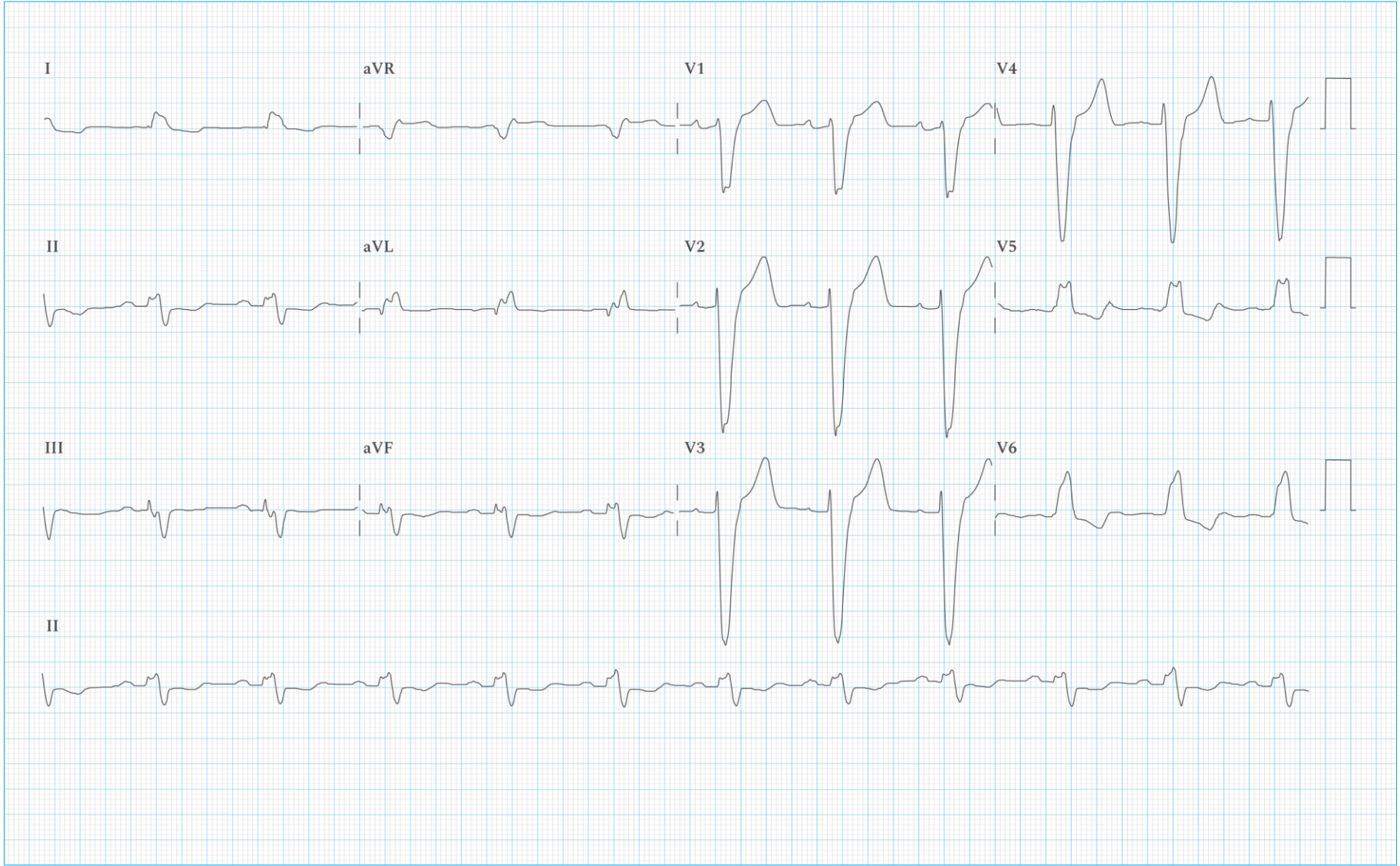
## RBBB

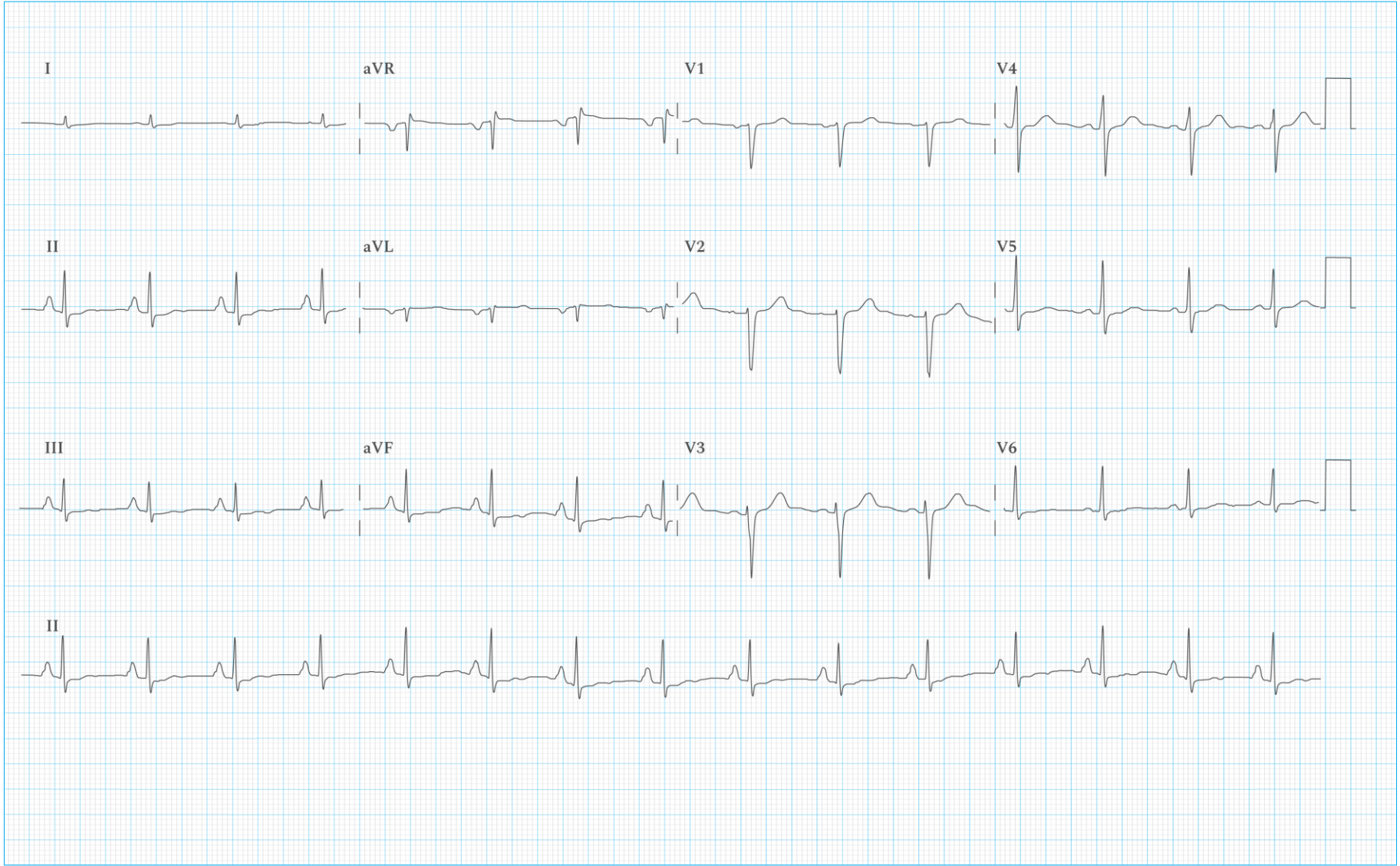


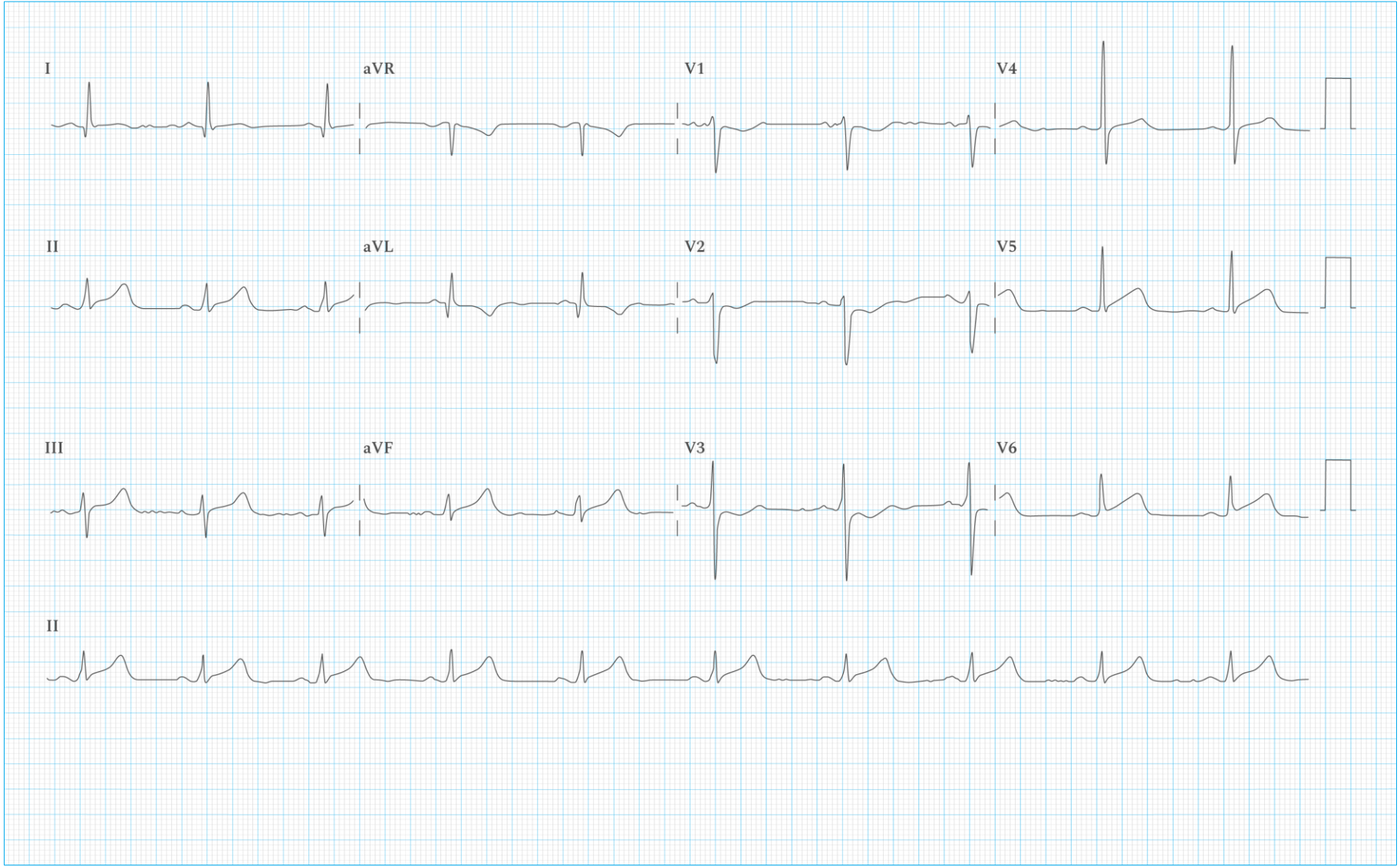
## LBBB

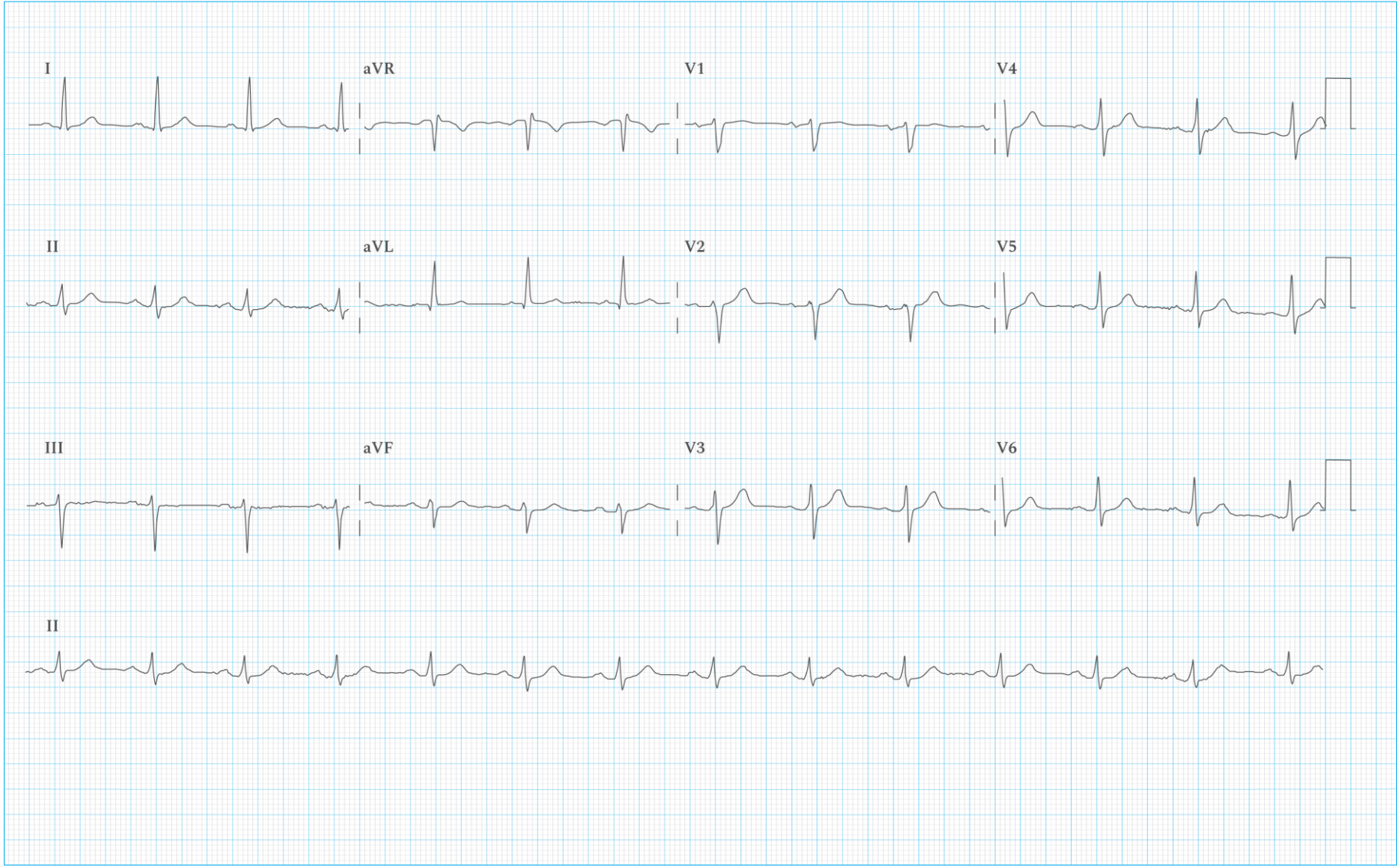


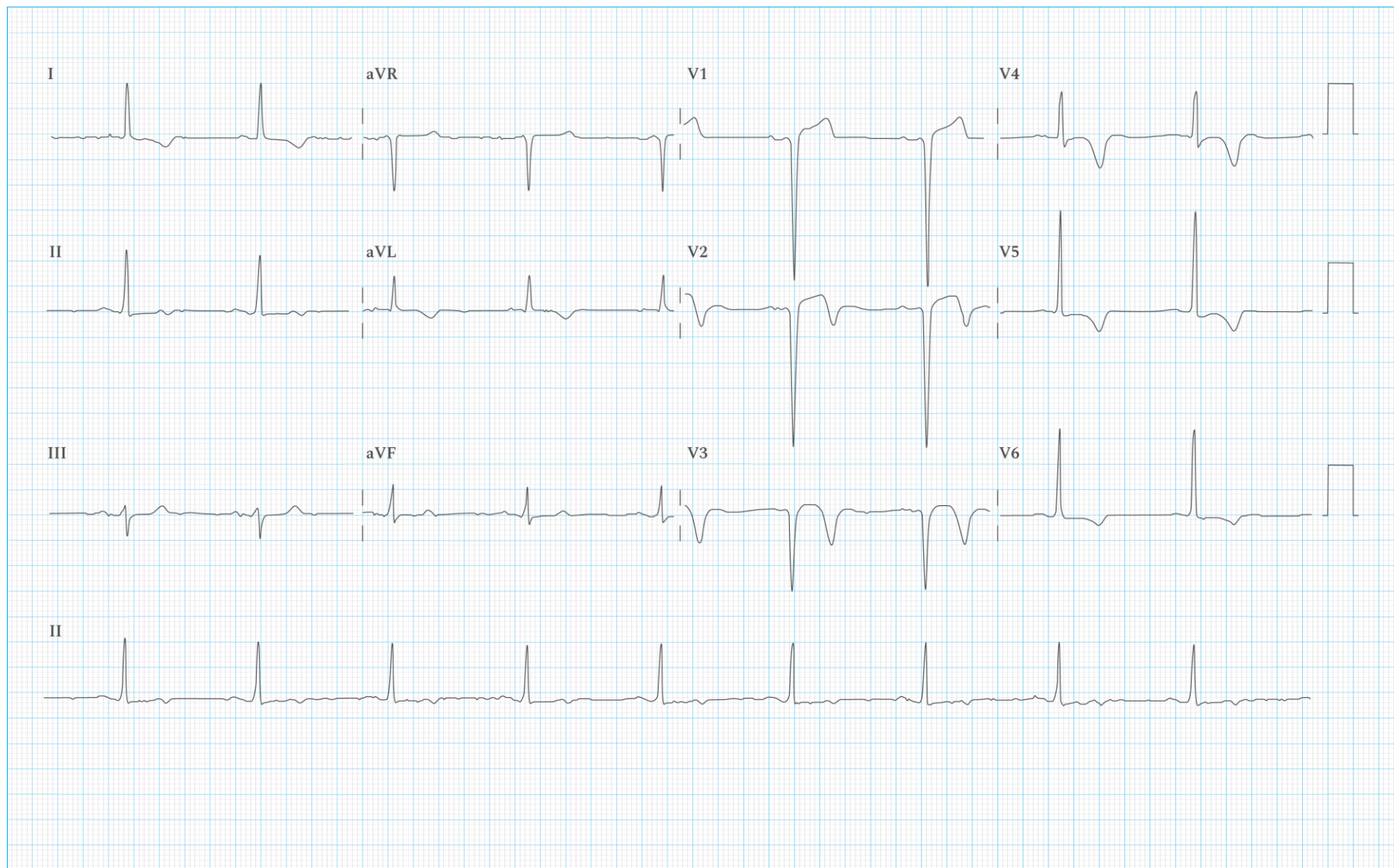


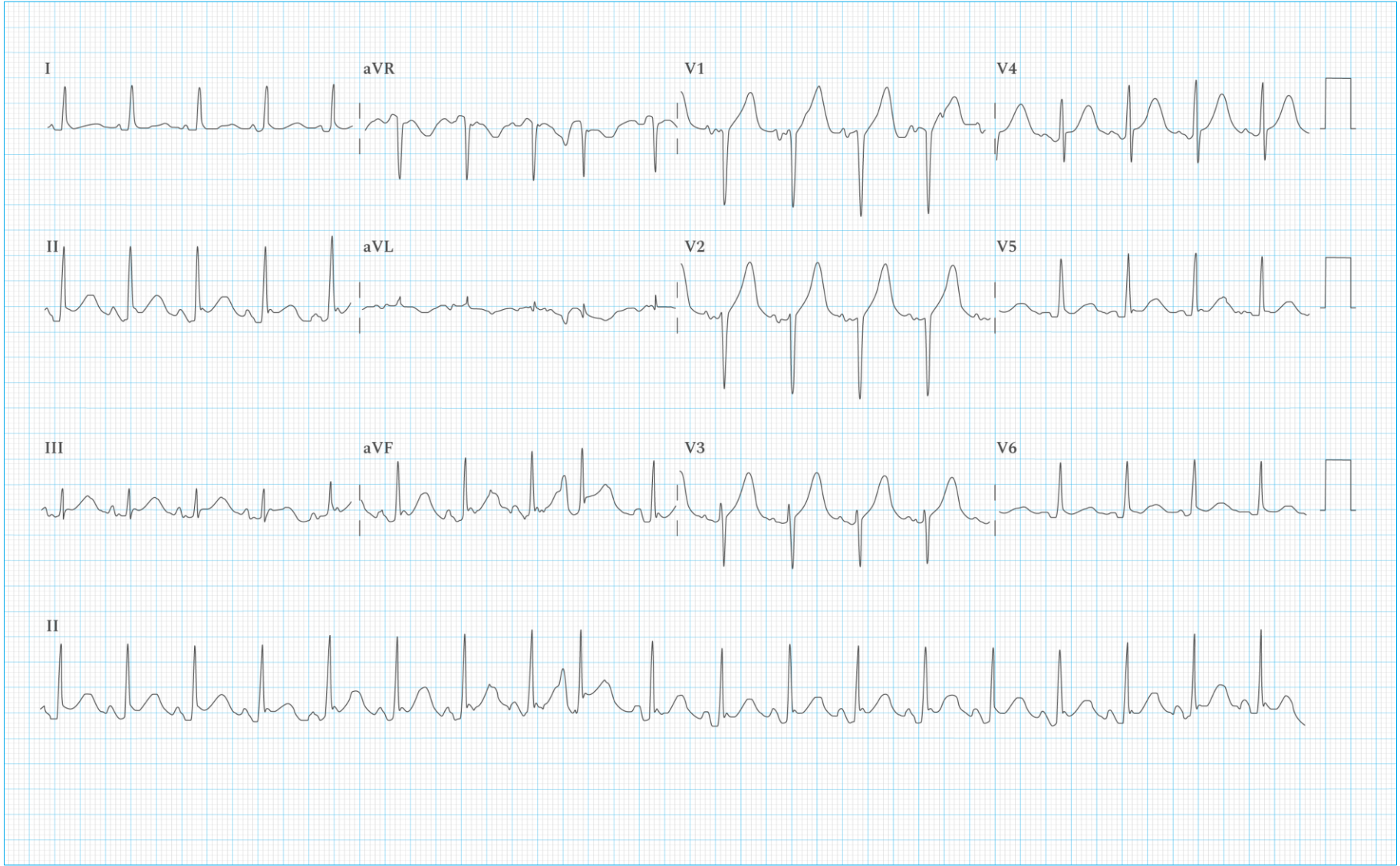


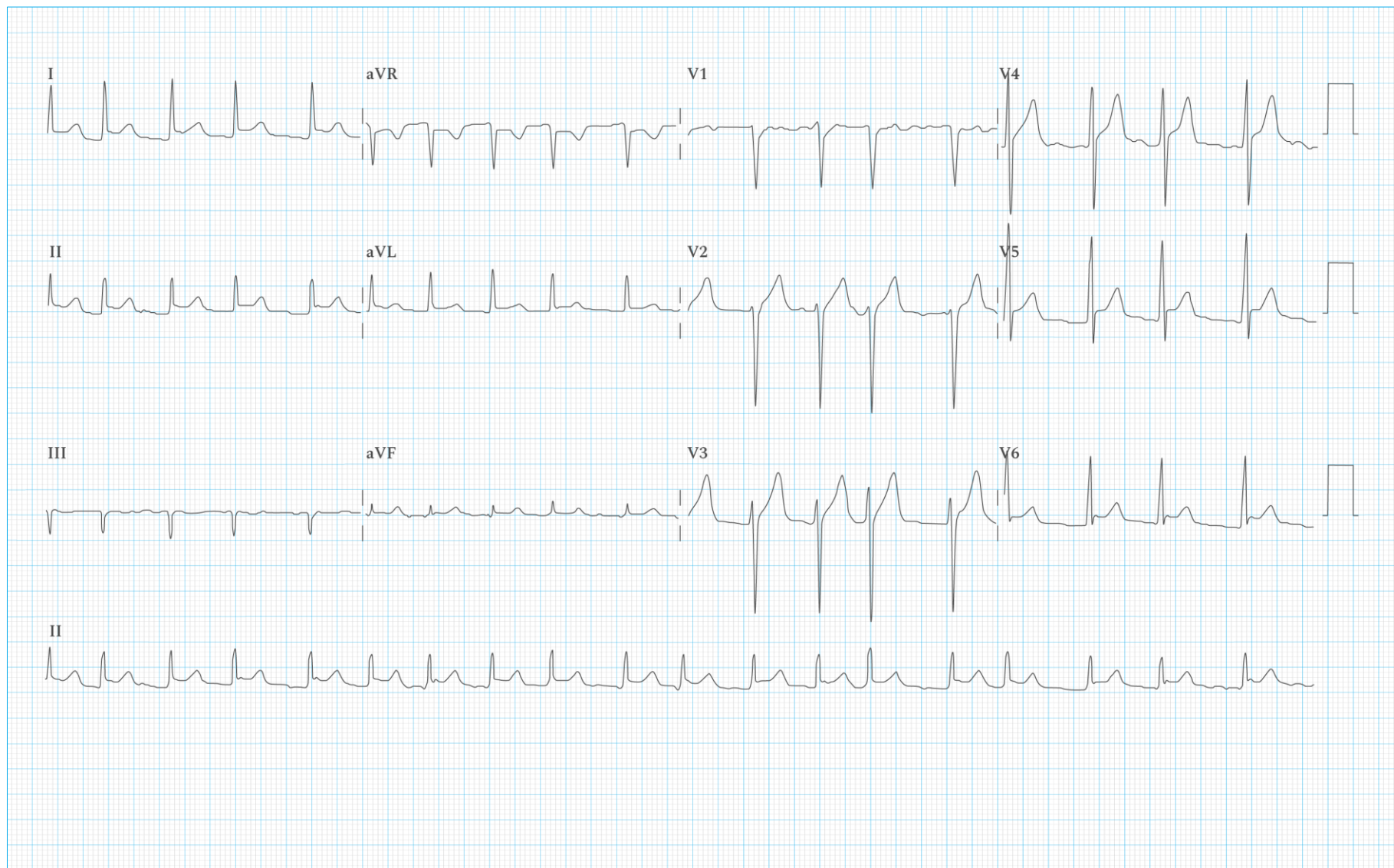


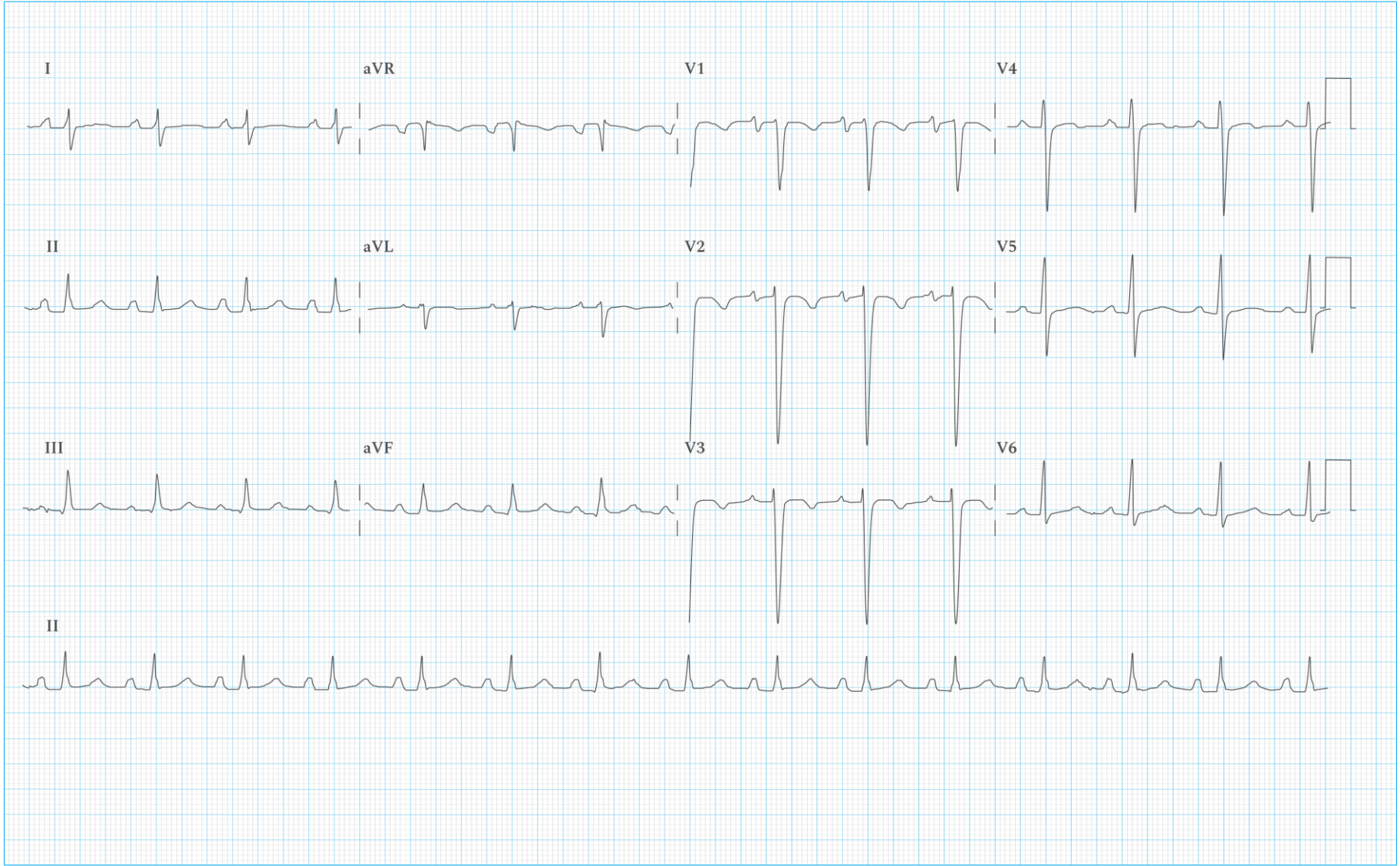


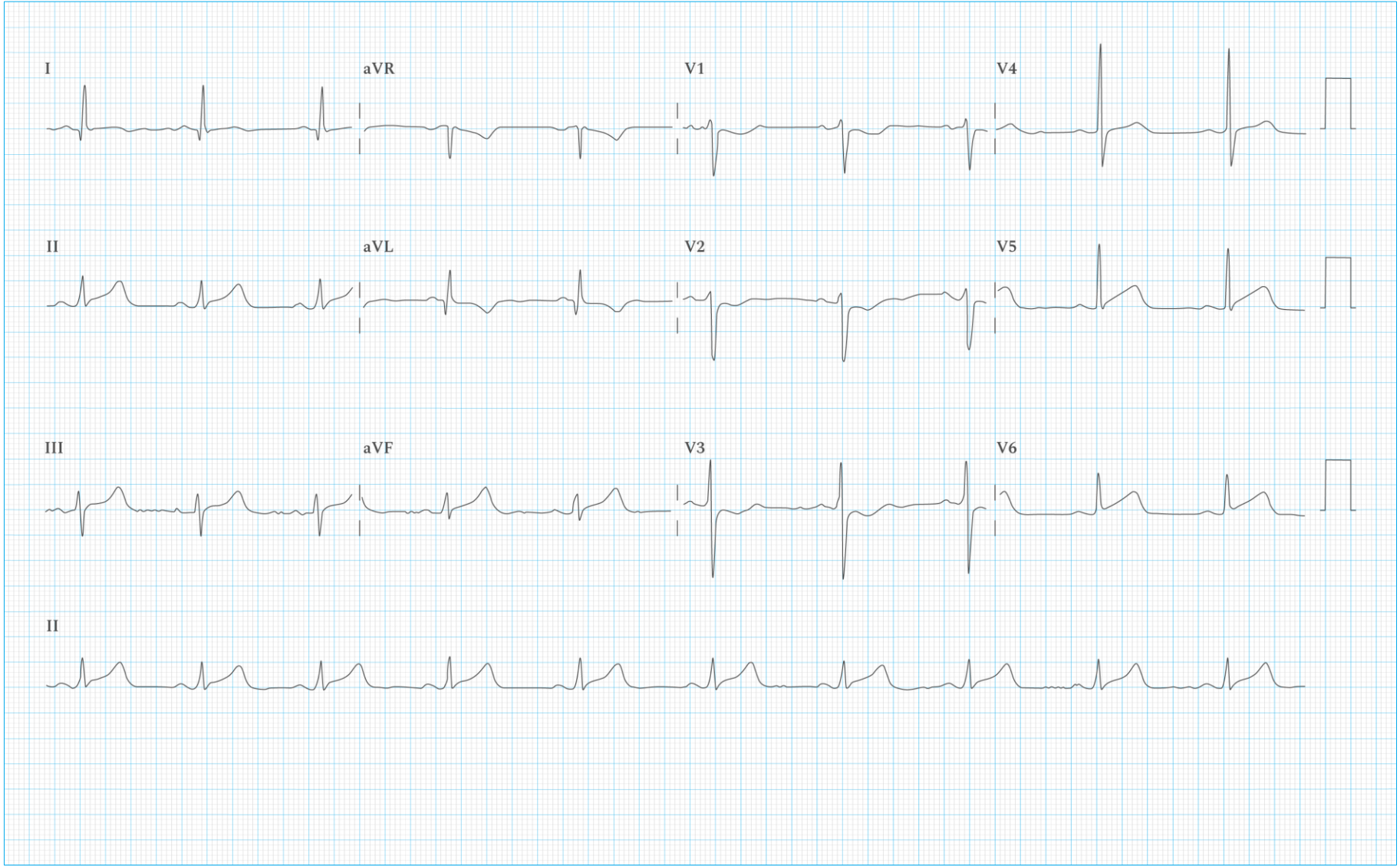


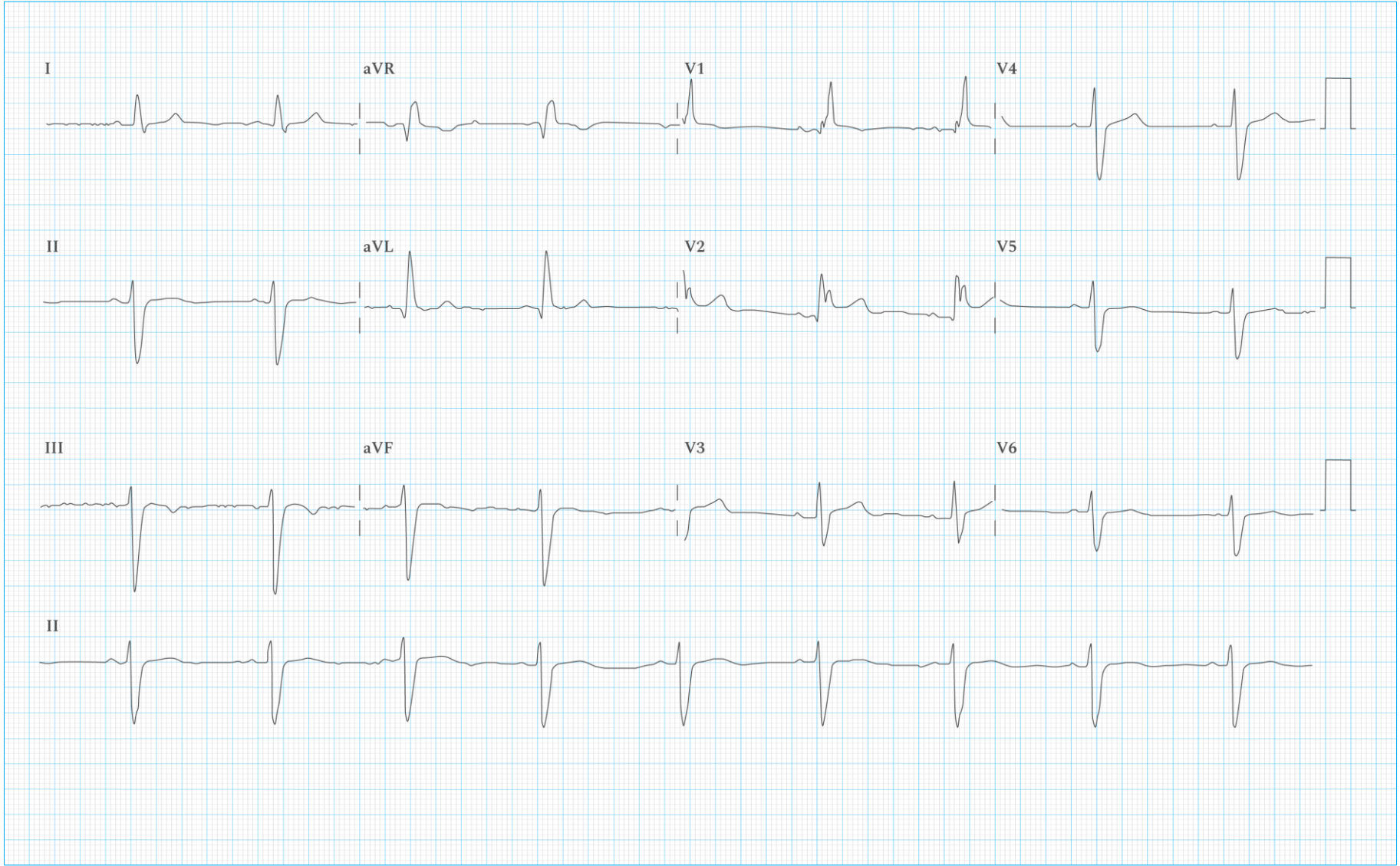


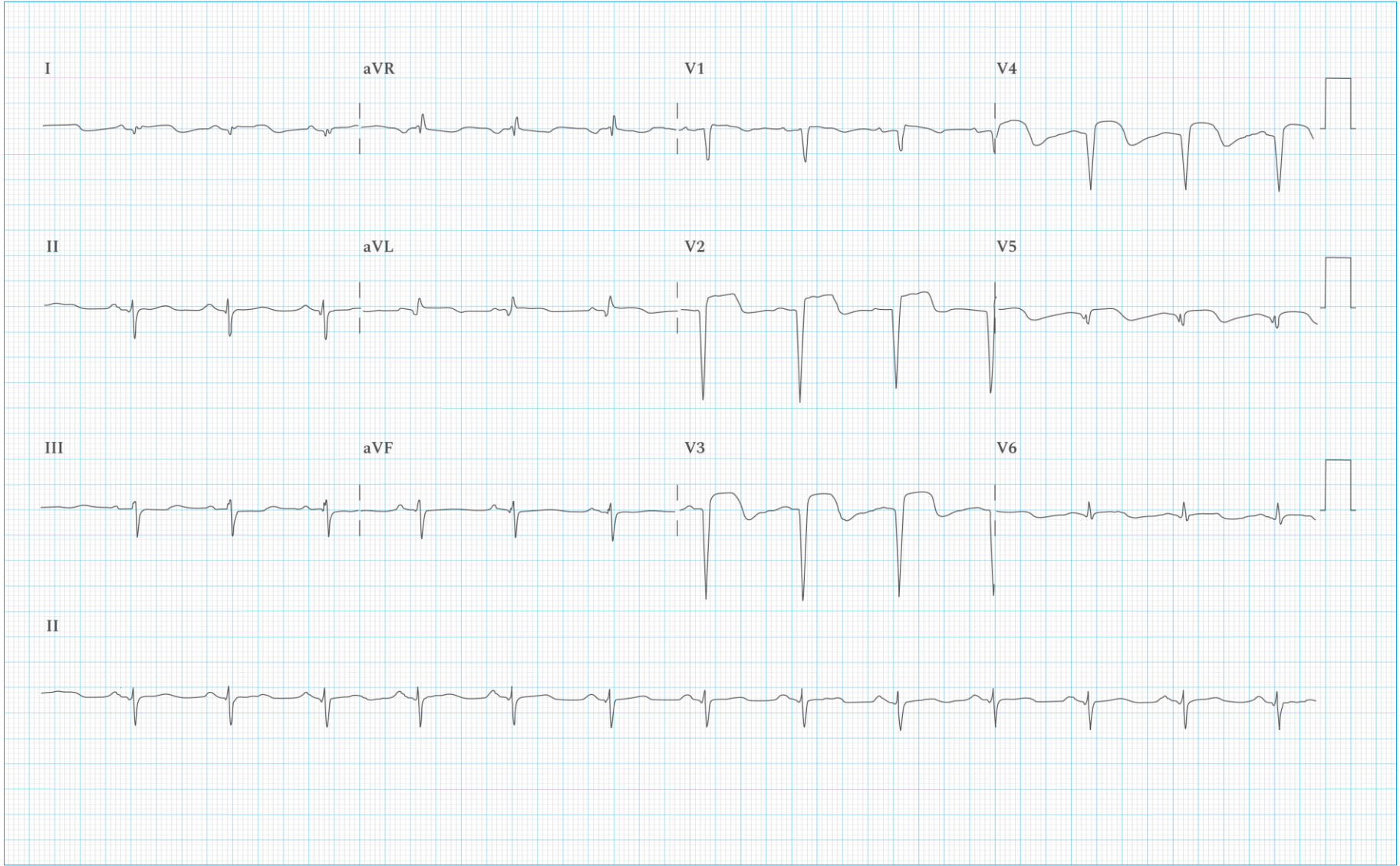


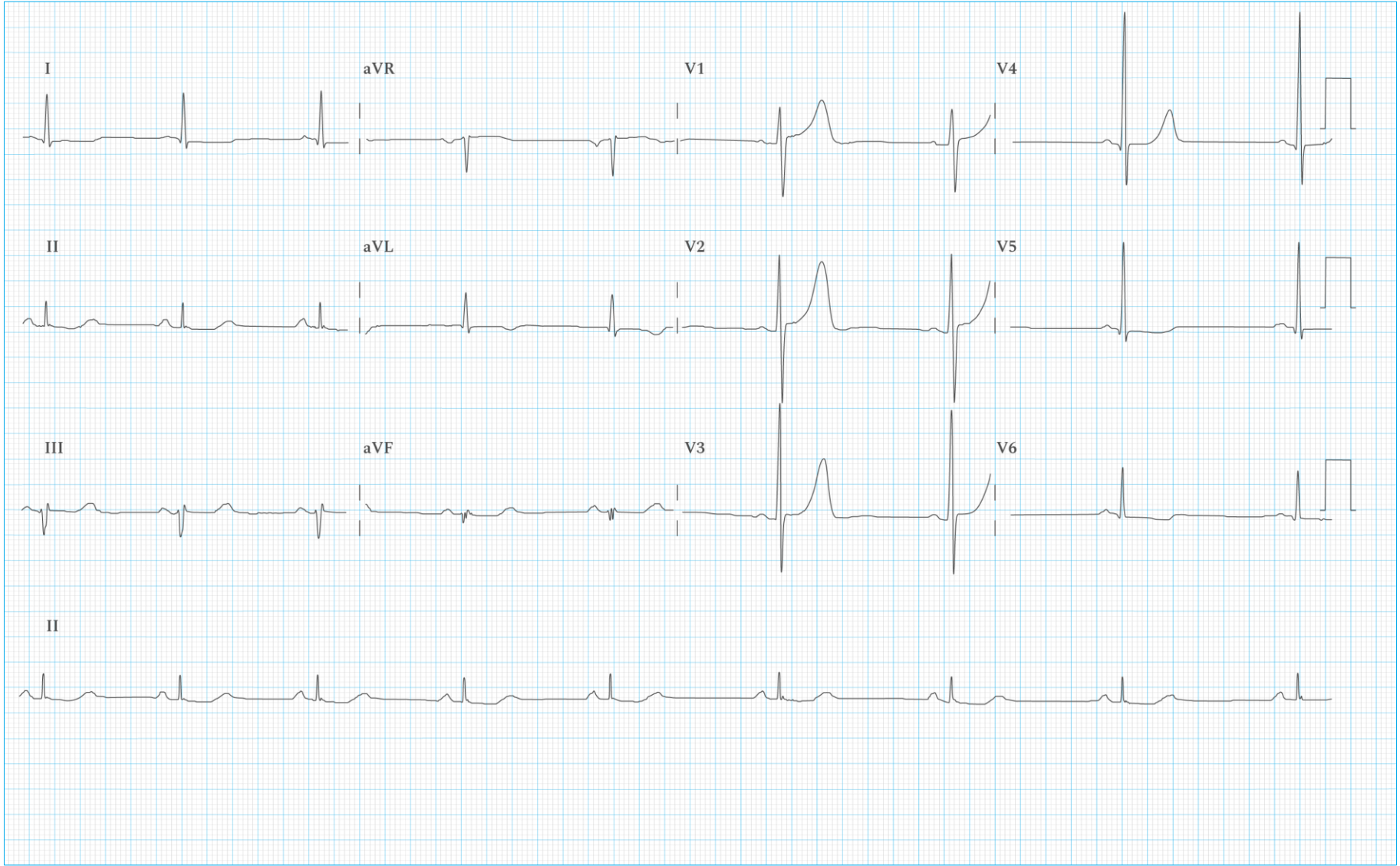


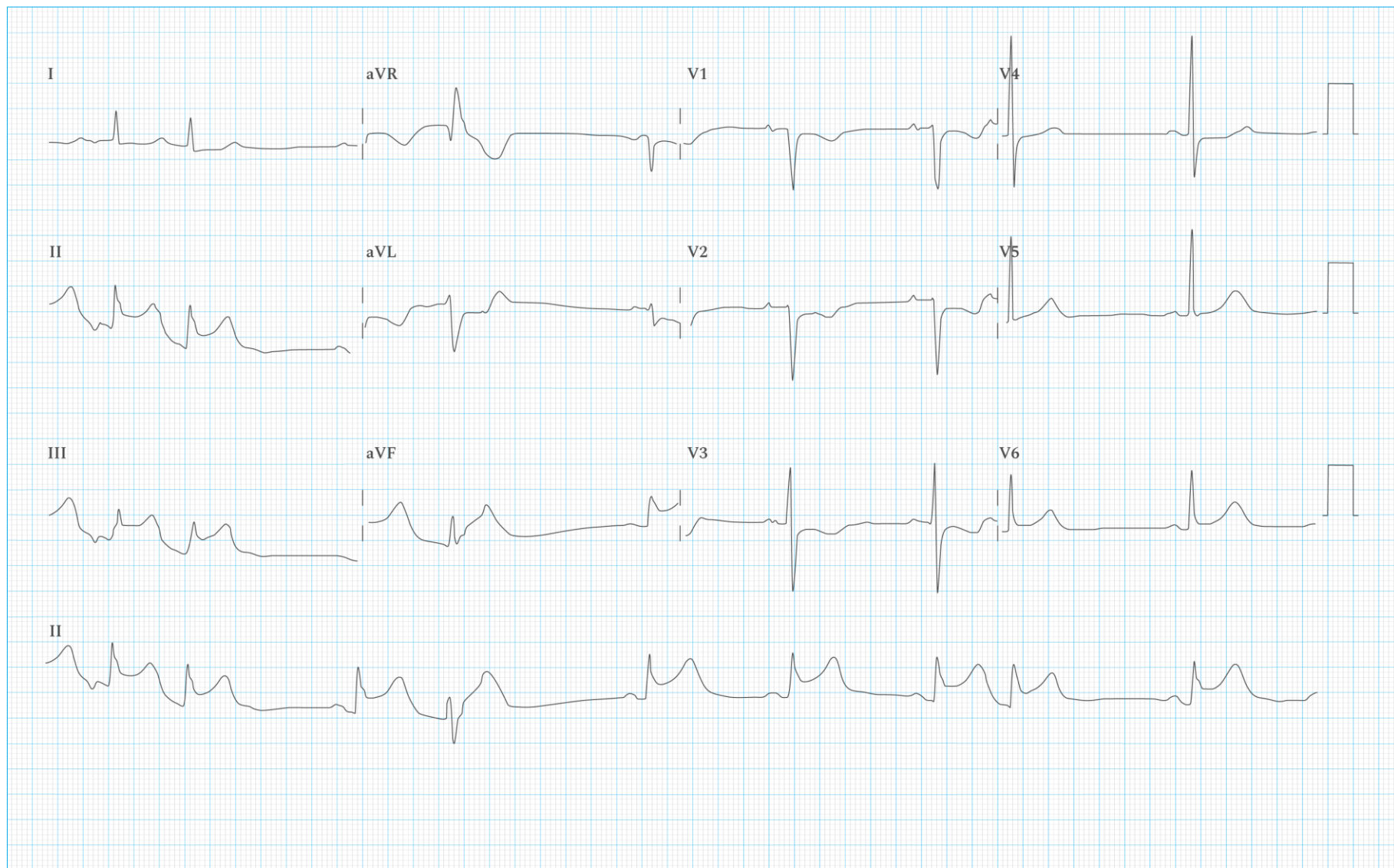


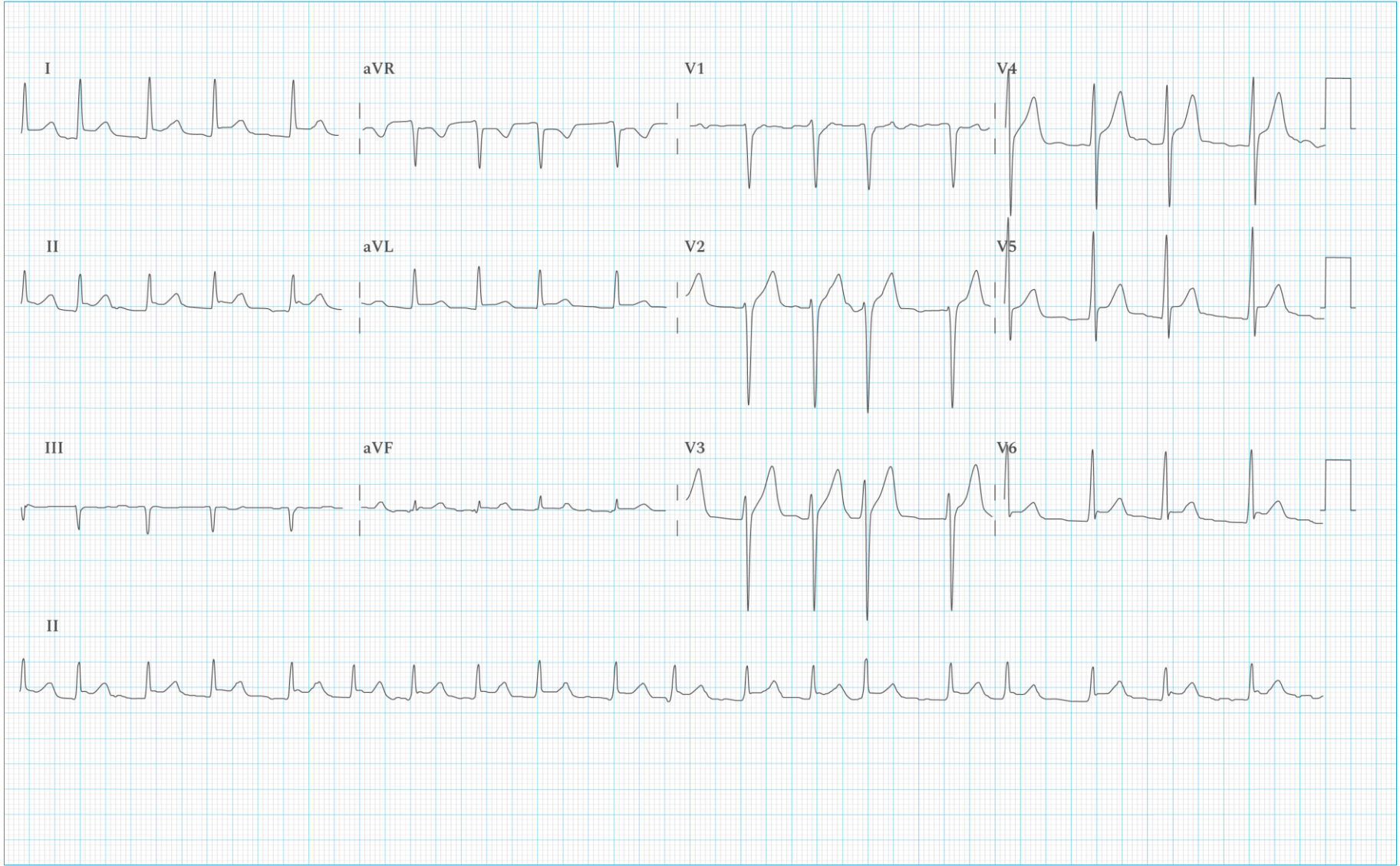


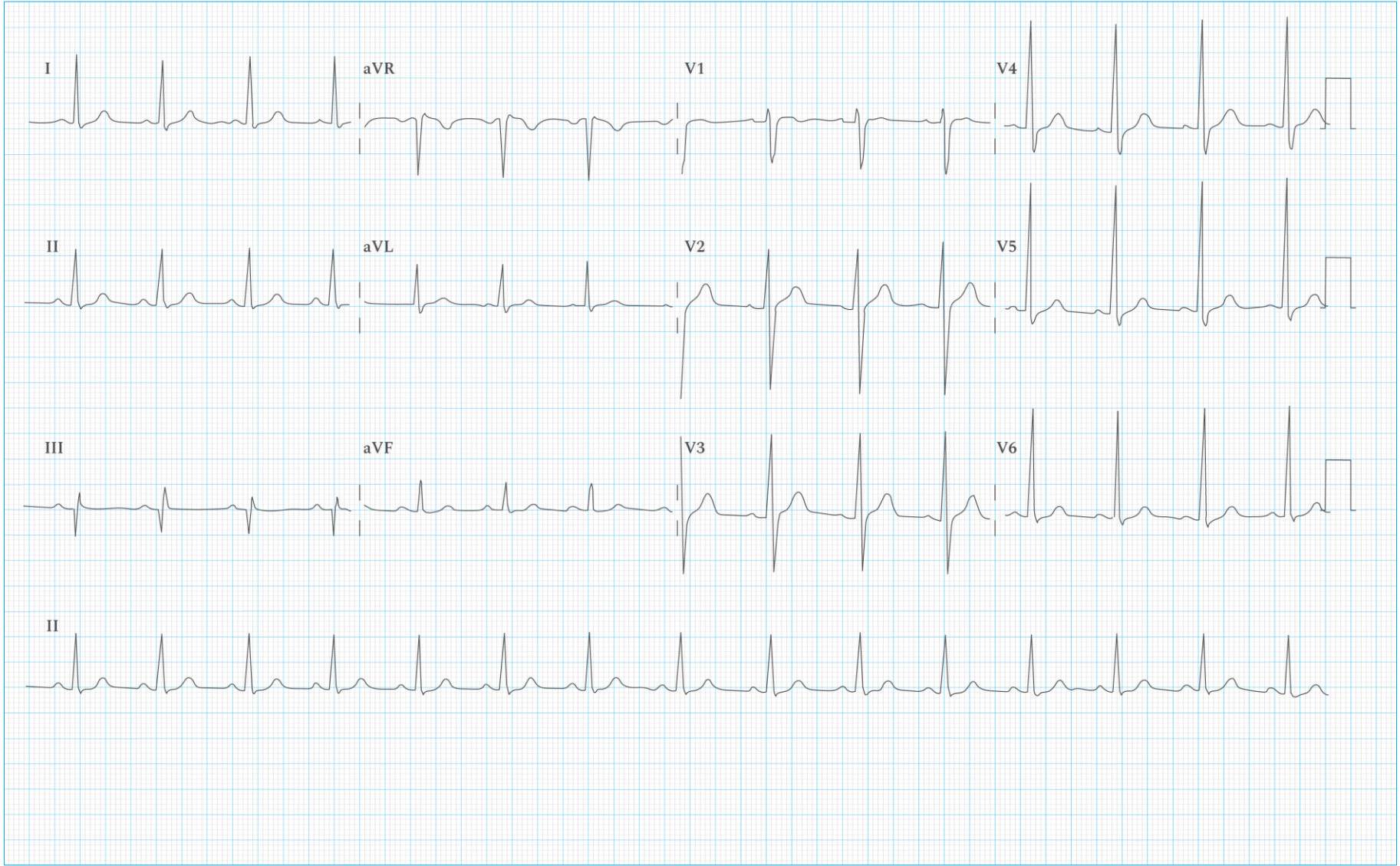


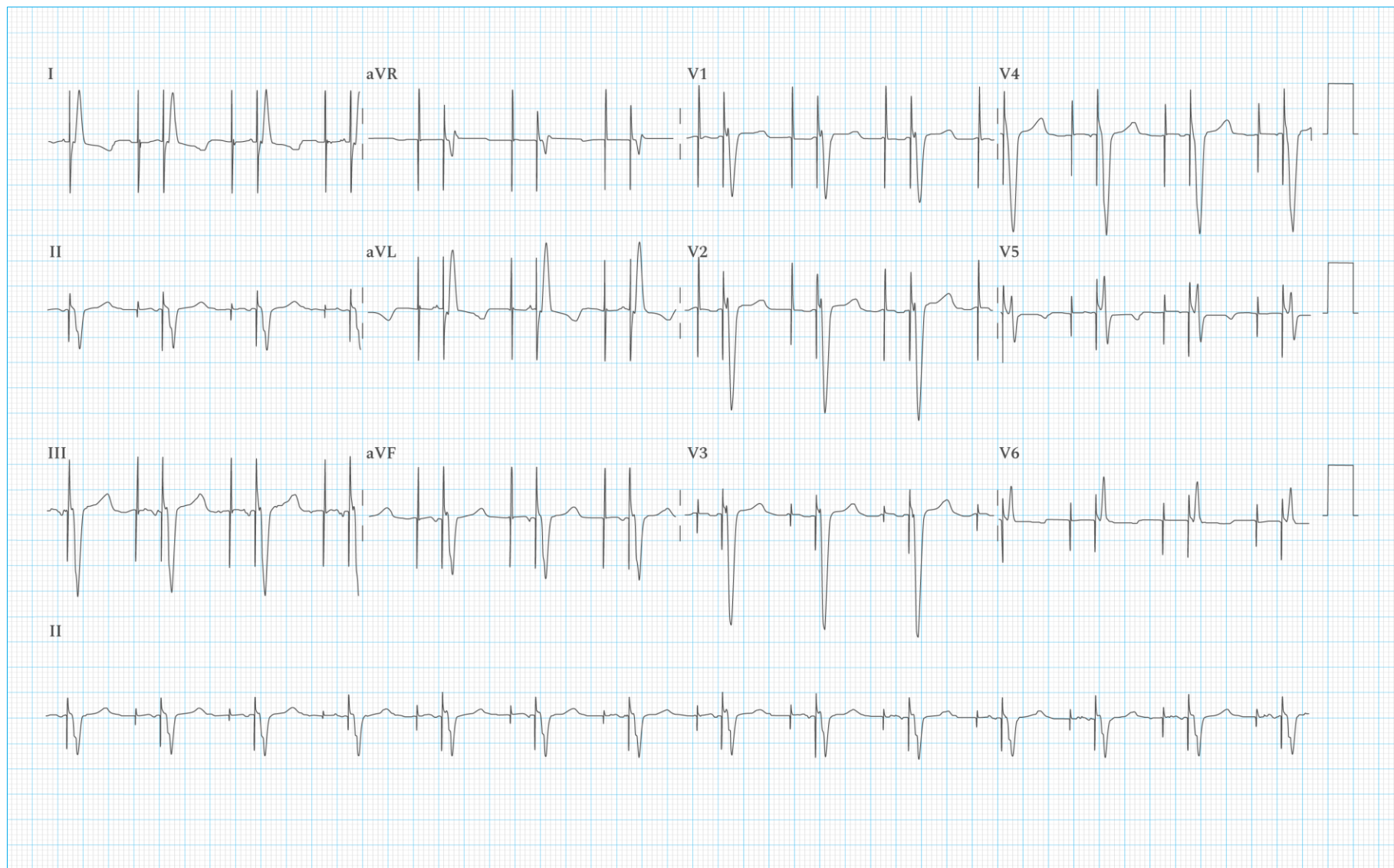




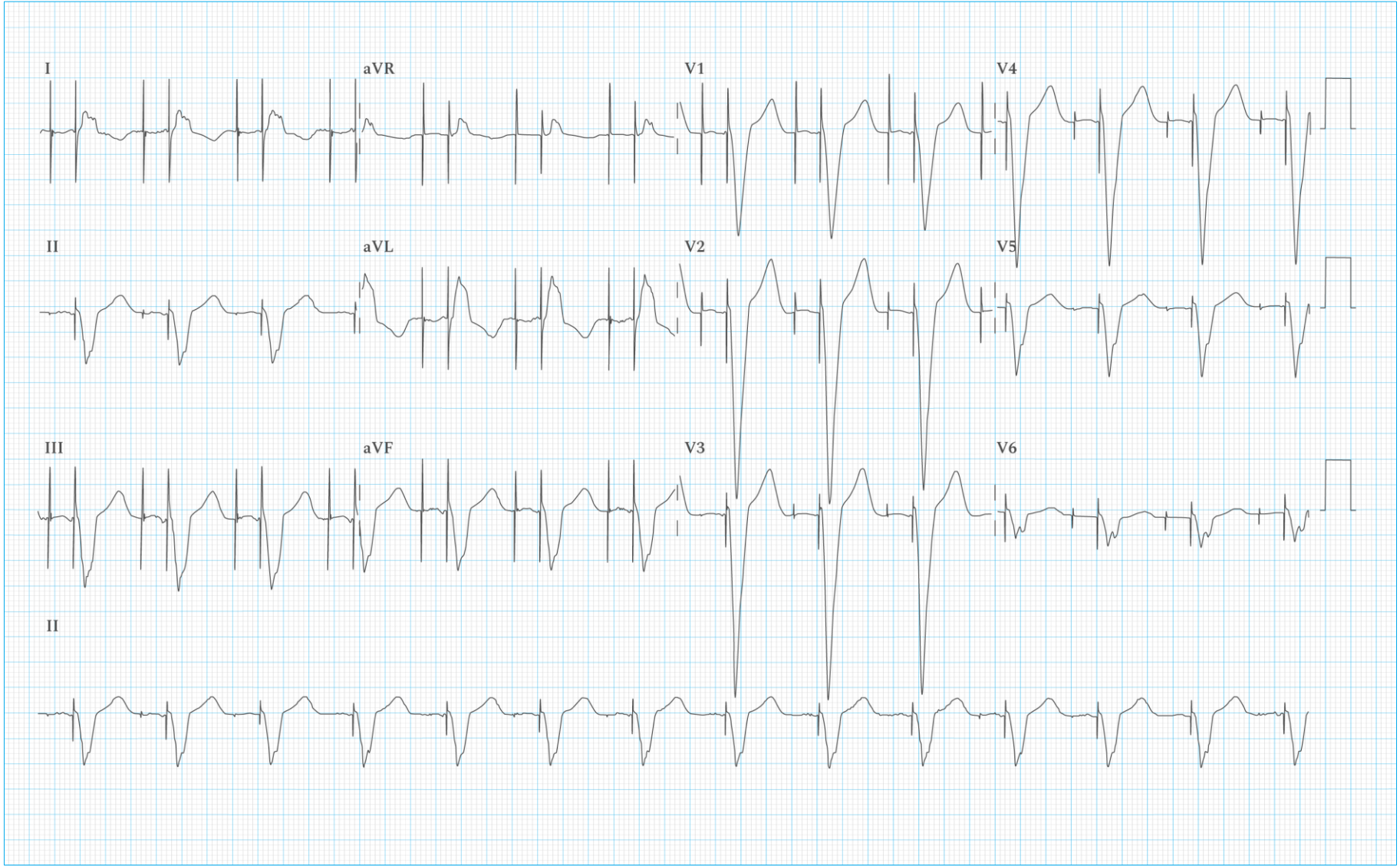


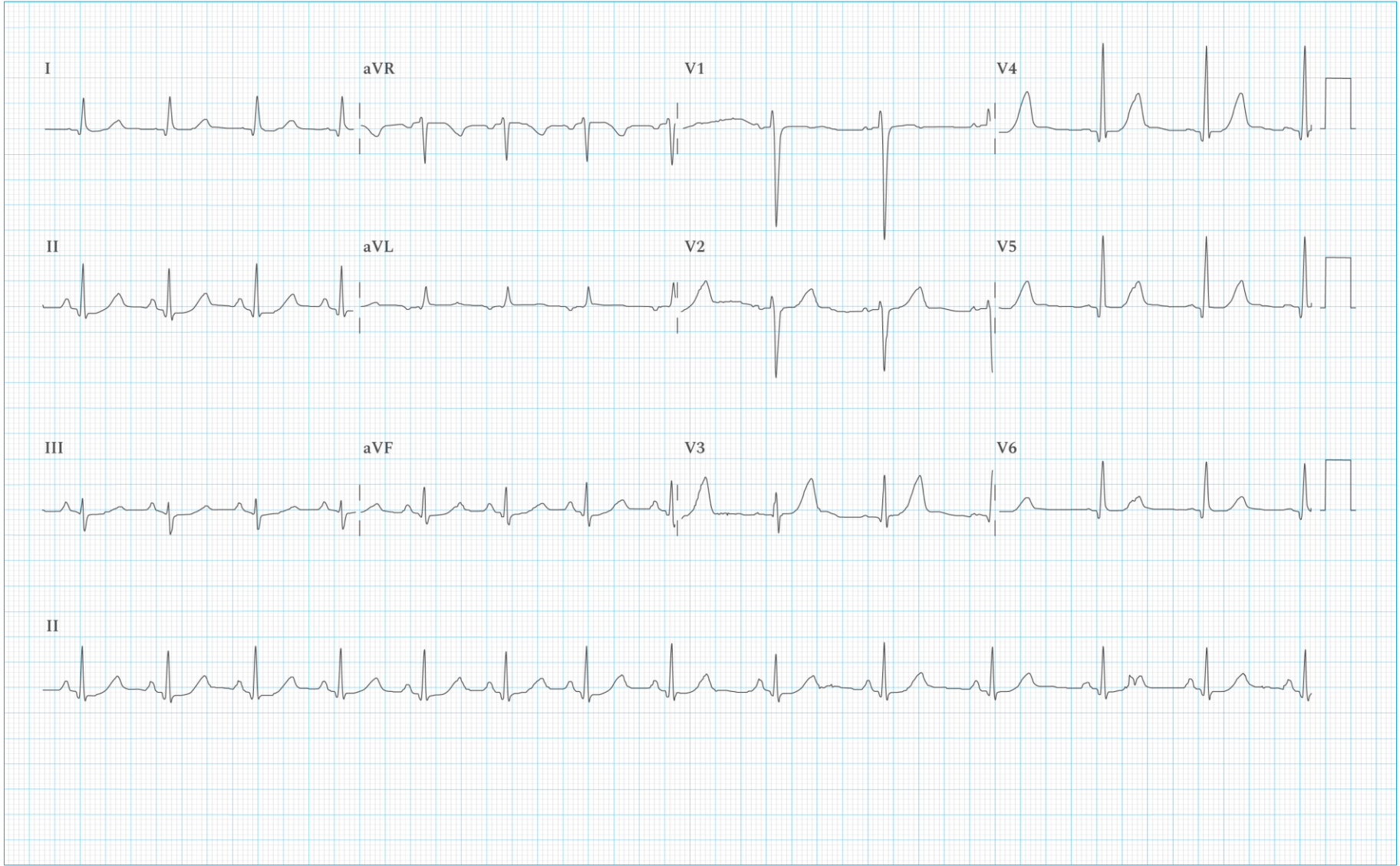












# 12 Lead ECG Answers

Pg 4: Anterolateral STEMI v1

Pg 6: Inferior STEMI v1

Pg 7: NSTEMI Imposter LBBB v2

Pg 8: NSTEMI Inferior v1

Pg 9: Posterior STEMI v1a

Pg 10: Normal v1

Pg 11: Anterior STEMI v1

Pg 12: Inferolateral STEMI v1

Pg: 13 STEMI Imposter Early Repolarization v1

Pg 14: NSTEMI Imposter Ventricular Hypertrophy v1

Pg 15: Posterior STEMI v2

Pg 16: NSTEMI Imposter RBBB v1

Pg 17: Anterolateral STEMI v1

Pg 18: Normal v3

Pg 19: Inferior STEMI v2

Pg 20: Inferolateral STEMI v2

Pg 21: Normal v2

Pg 22: Pacemaker (AV Sequential) v2

Pg 23: Pacemaker (Vent Paced) v3a

Pg 24: Pacemaker (AV Sequential) v1

Pg 25: Normal v4

# What's Next

- **Practice, Practice, Practice**
  - ECG monitor, 12 leads
  - Six Second ECG Simulator