

Patient Name: _____
 DOB: _____ Age: _____
 Hospital Number: _____ ECG Date: _____
 Presentation: _____

ECG
 Calibrated at 1mm:10mV? Paper at 25 mm/s?
 Lead position: right arm clockwise (R,Y,G,B) + V4R in all under-5s?

RATE

Regular (300 / R-R interval): _____
 Irregular (6 x pnumber of complexes in rhythm strip): _____

RHYTHM

Assess LEAD II. 1 small square = 0.04s therefore 1 big square = 0.2s

P wave before every QRS?
 ?SVT, ?Heart Block

PR Interval		QRS Duration		QTc Interval	
< 2 y	0.08 – 0.16s	<2y = <0.08s	>16y = <0.12s	< 6 months	Variable
2y - 15y	0.09 – 0.18s	NB Lengthens with age: 'normal' can represent slight prolongation i.e. BBB		> 6 months	< 0.44s
>16 y	0.12 – 0.2s			$QTc = QT/\sqrt{\text{preceding R-R}(s)}$	

AXIS

P wave axis (i.e. SAN location) normal?
 Normal = positive in I, III and aVF

QRS axis
 NB RAD normal in <3/12, normalising to LAD by 1y & progressing to adult parameters by 8y.

Causes of superior RAD:
 AVSD, Tricuspid atresia,
 Ebstein's phenomenon,
 WPW, Dextrocardia

MORPHOLOGY

P wave (lead II)
 Normal amplitude < 3mm
 Normal duration: < 0.07s (infants) / < 0.09s (children)
 RED FLAG: tall (RA) and wide (or bifid, LA) = combined atrial hypertrophy

QRS complex
 Normal Variants:
 - RSR' in V1-V3 in neonates, persisting in 7% of under-5s
 - R wave dominance generally regresses by 4y
 RED FLAGS:
 - Delta Wave
 - Q waves in I and aVL
 - Deep Q waves (>5mm) inferolaterally
 - BBB (WiLLiaM MaRRoW)

ST segment
 Normal variant: Upsloping ST depression

RED FLAGS:
 1) Down-sloping ST 2) Horizontal ST depression > 0.08s

T wave
 'Juvenile pattern': Inverted T waves in V1-V4 are physiological after 48hrs of age, persisting in V1 until 8y and often into adolescence.
 RED FLAGS: Tall (>2/3 R wave), peaked // Flat // Deeply inverted

U wave

Normal finding in sinus bradycardia:
- small (0.5mm) and same direction as T
RED FLAGS: inverted or large U waves



OUTCOME

Interpretation:	NORMAL	ABNORMAL
Comment:		

Referral indicated?

- Discussed with attending consultant: Y / N
- Refer to cardiology SpR at GOSH, Tel. **0207 405 9200**

Name:	Grade:
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Signature:	Date:
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