

# **ECG ANALYSIS OF ARRHYTHMIAS I.**

## **(SUPRAVENTRICULAR DISTURBANCES OF IMPULSE FORMATION)**

UNIVERSITY OF DEBRECEN  
FACULTY OF MEDICINE  
DIVISION OF CLINICAL PHYSIOLOGY



# **General considerations**

- **P wave, PP distance, P wave and QRS complex, QRS morphology**
- **QRS axis, axis deviations**
- **leads II-III, aVR, aVF, V1-V2 are particularly important**
- **retrograde atrial activation results in negative P wave in II-III-aVF leads and in positive P wave in V1 (P')**

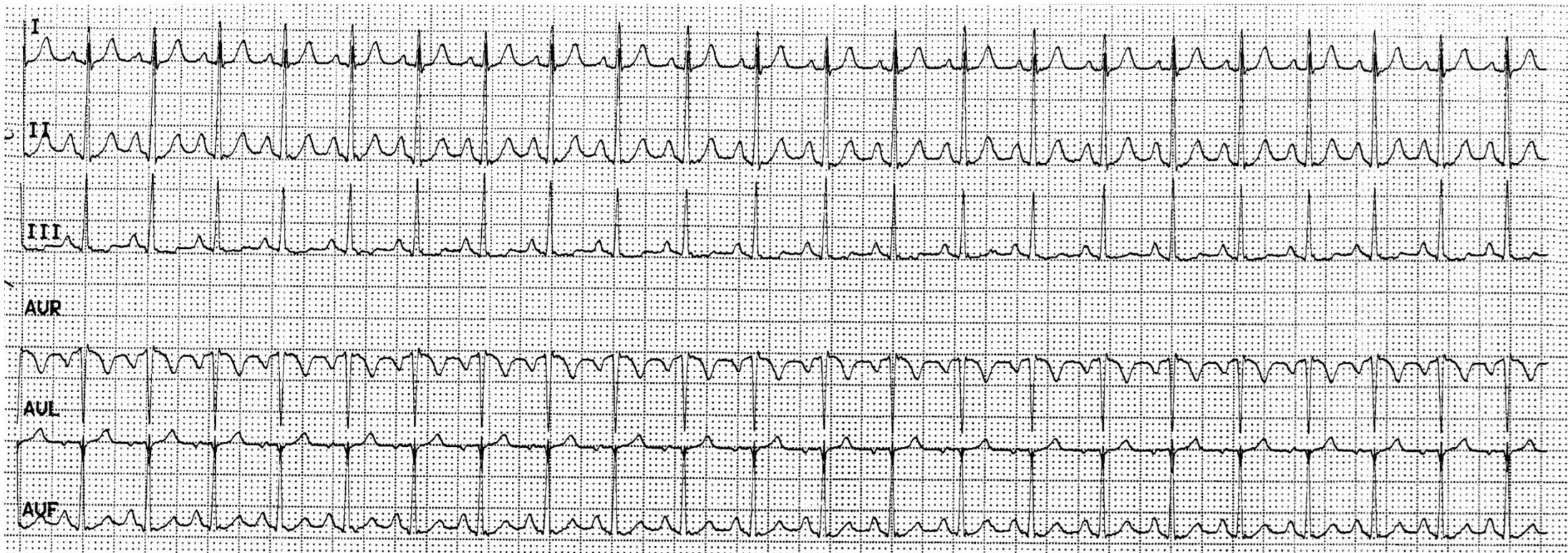
# **Supraventricular (SV) disturbances of impulse formation**

Nomotopic SV disturbances                          Heterotopic SV disturbances



- 1. Sinus tachycardia (frequency: 100-180/min.)**
- 2. Sinus bradycardia (frequency: < 60/min. (<50/min.))**
- 3. Sinus node reentry tachycardia**
- 4. Wandering atrial pacemaker**
- 5. Sinus arrhythmia**
- 6. Sick sinus syndrome**

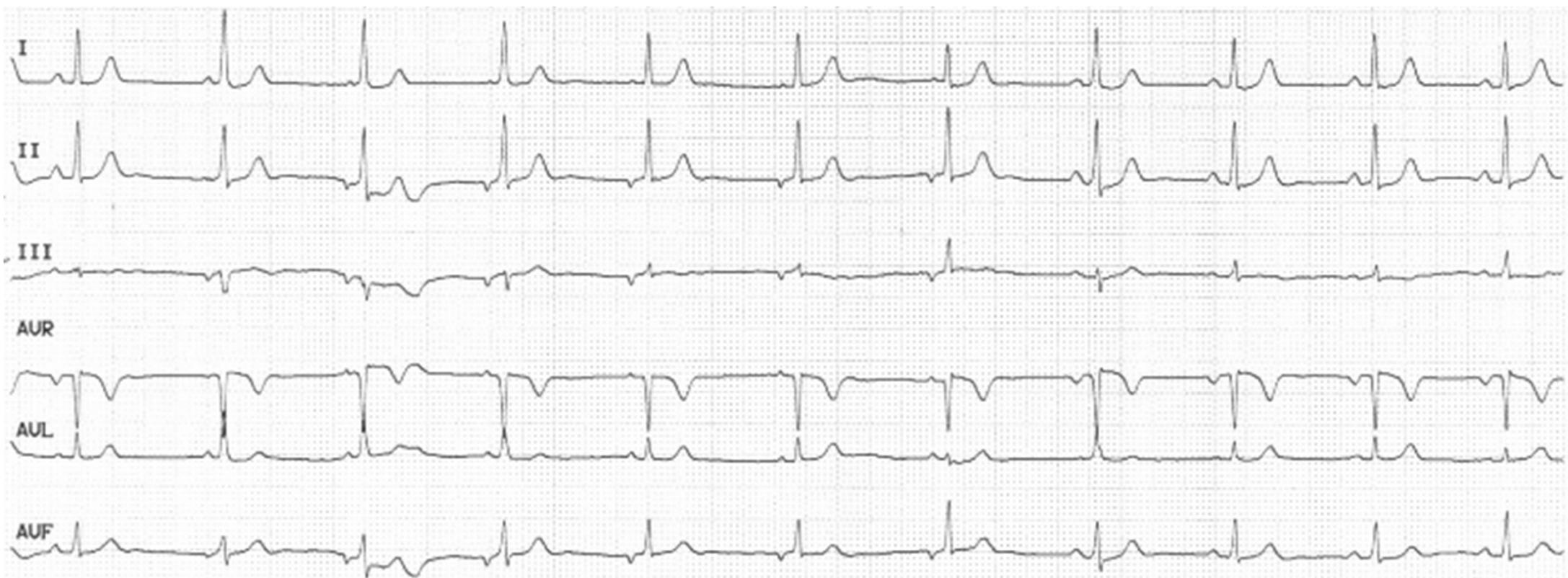
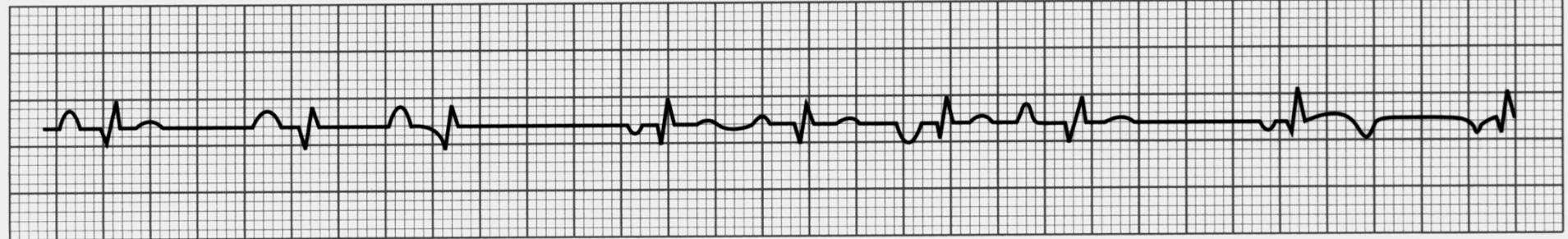
# Sinus tachycardia



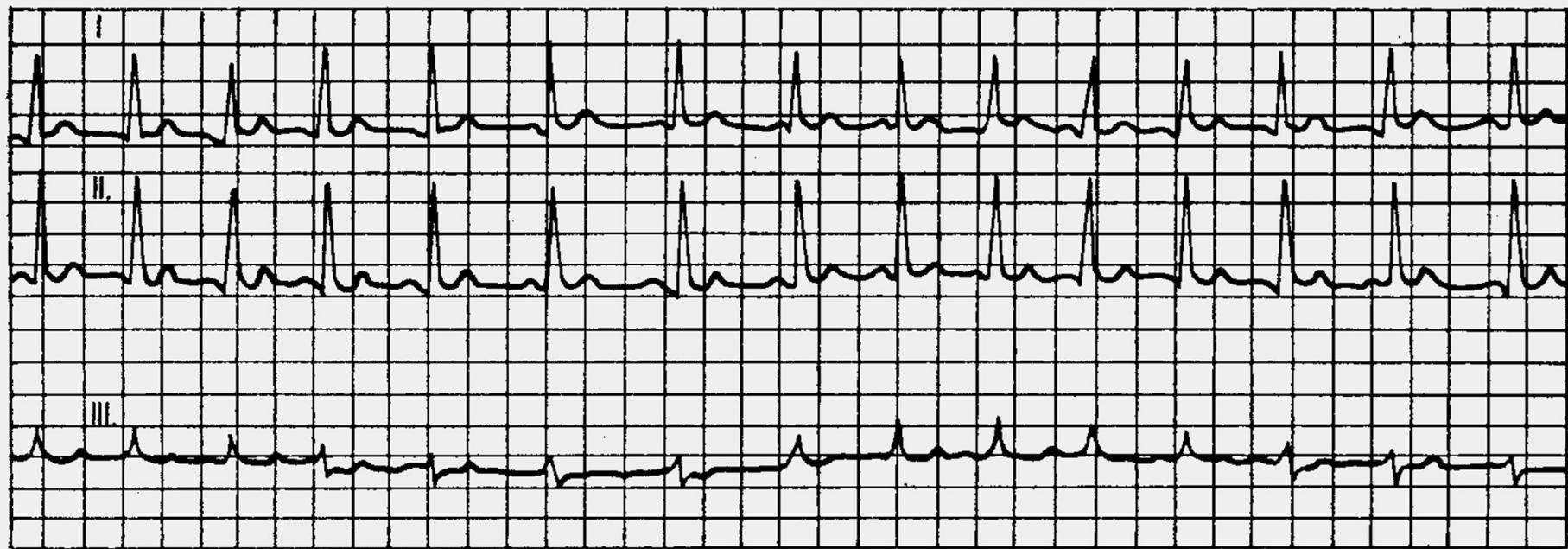
# Sinus bradycardia



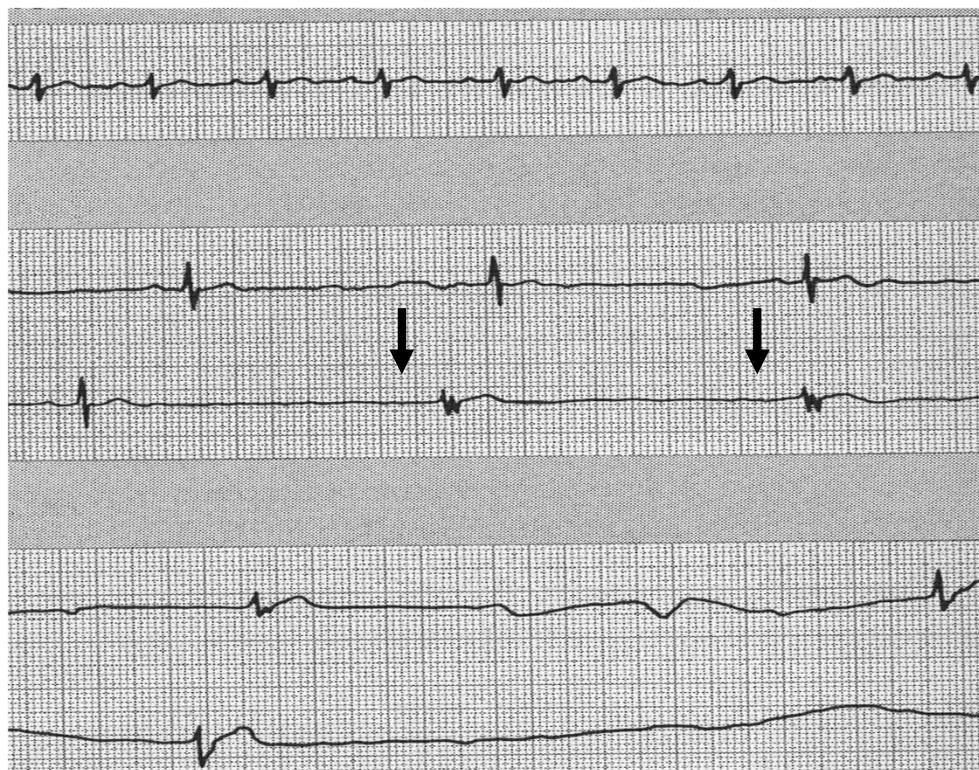
# Wandering atrial pacemaker



# Respiratory sinus arrhythmia

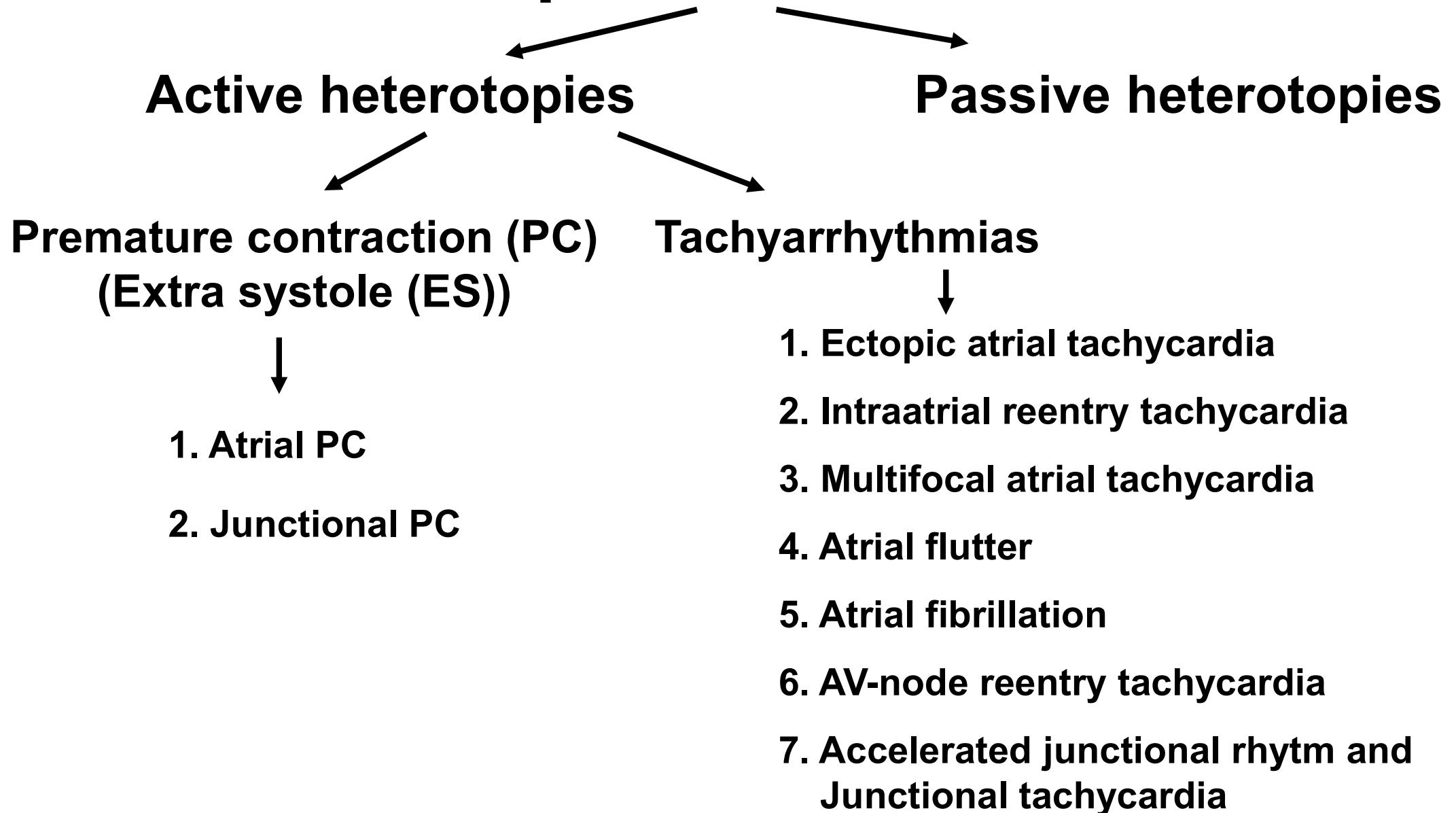


# Sick-sinus syndrome



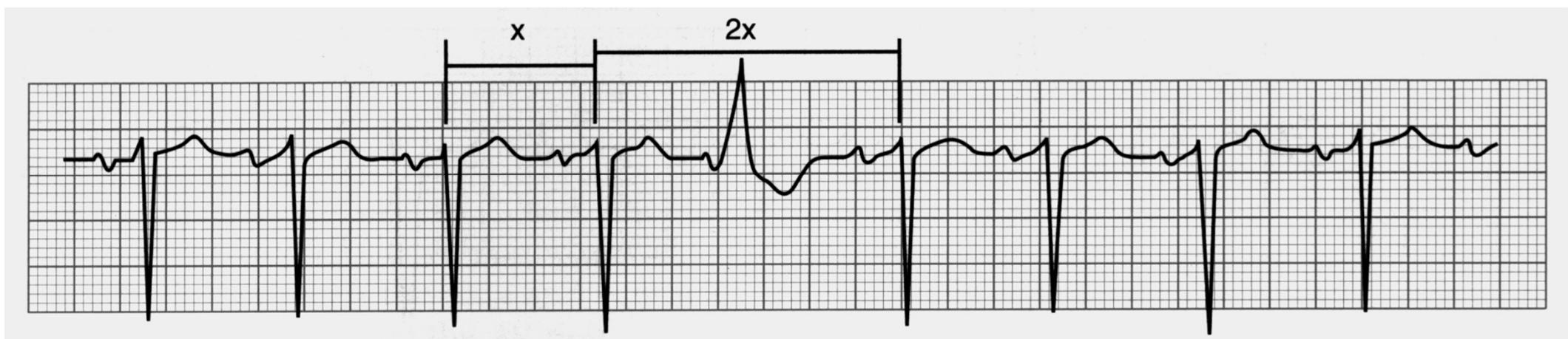
**sinus arrest**

# Heterotopic SV disturbances of impulse formation

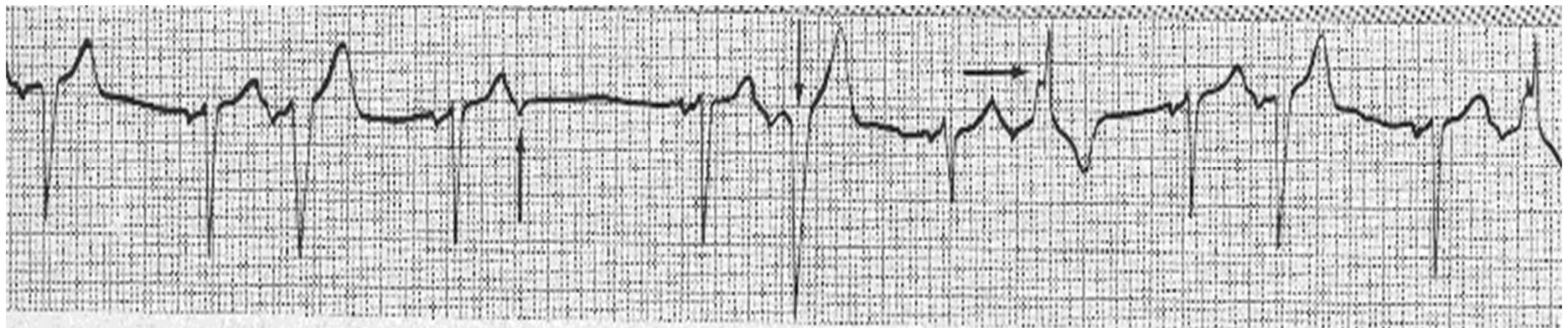


# Premature contraction (PC) and related terms

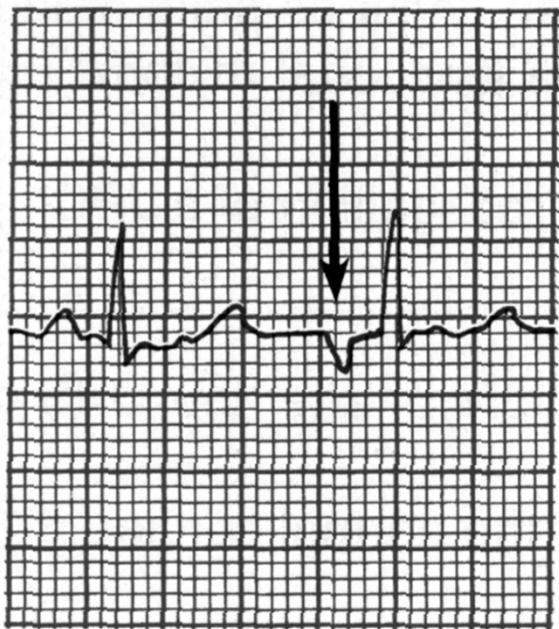
compensated PC



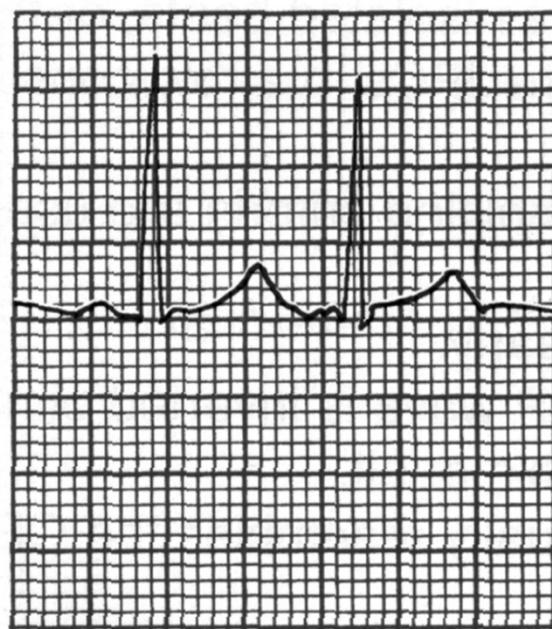
# Atrial premature contractions



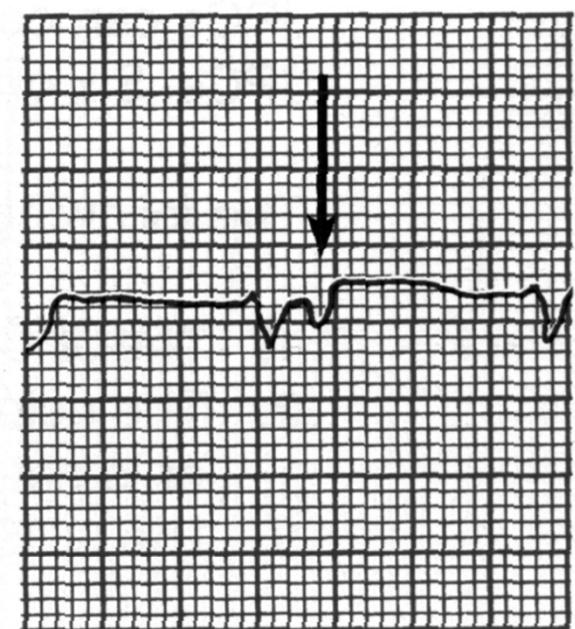
# Junctional premature contractions



**JPC with inverted P  
wave preceding QRS**

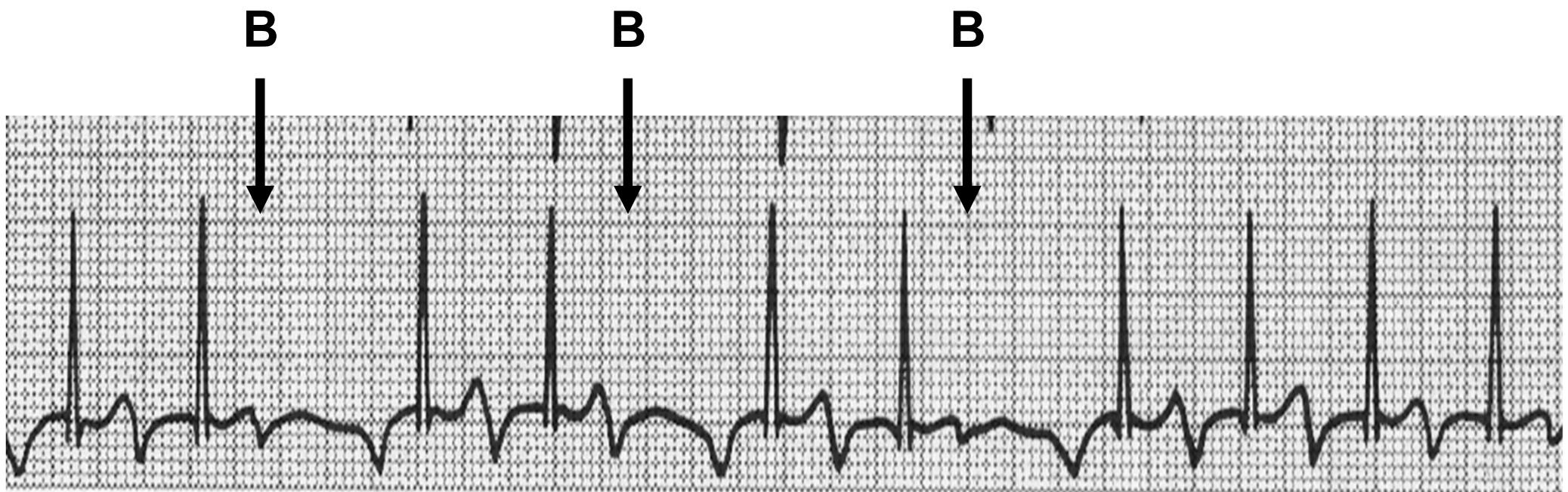


**JPC with no P wave  
visible**



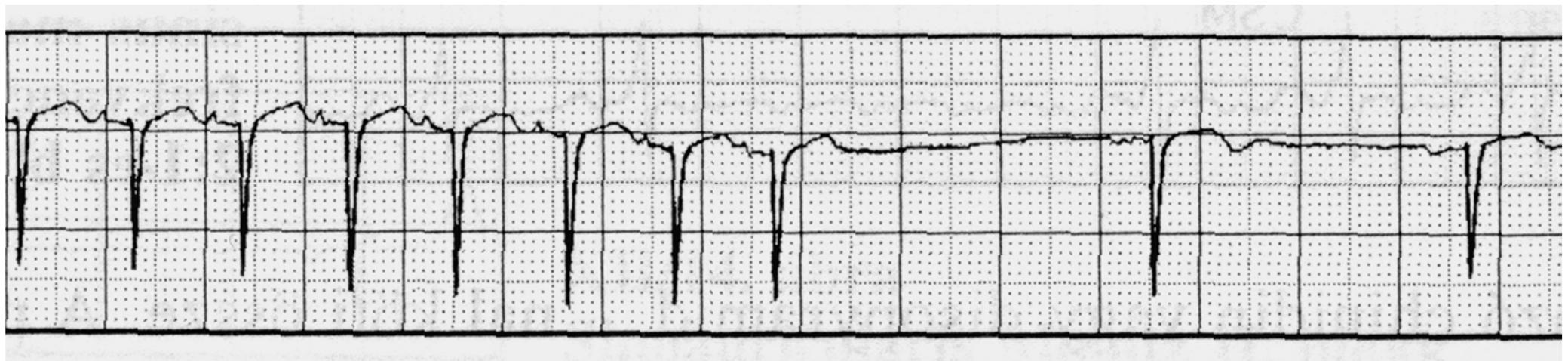
**JPC with inverted P  
wave following QRS**

# Ectopic atrial tachycardia

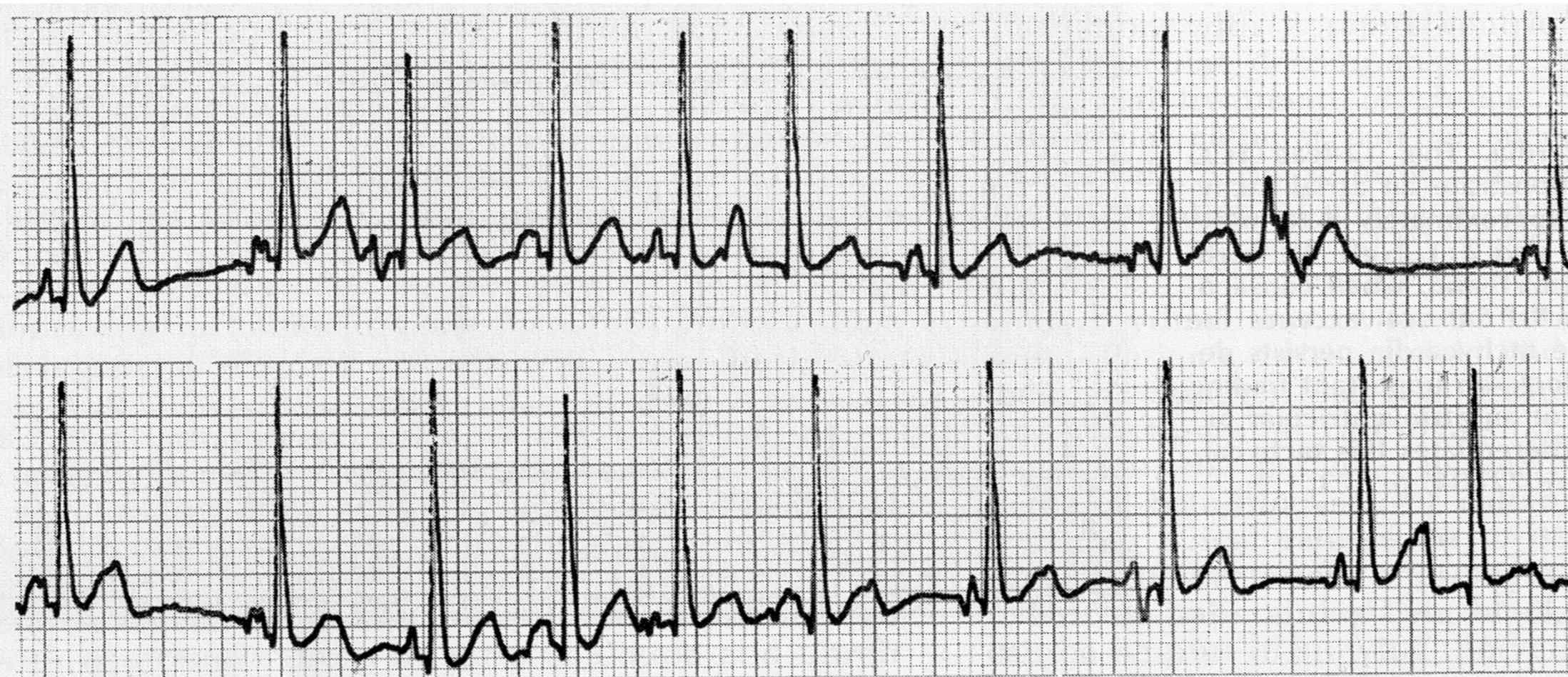


aVF lead

# Atrial reentry tachycardia

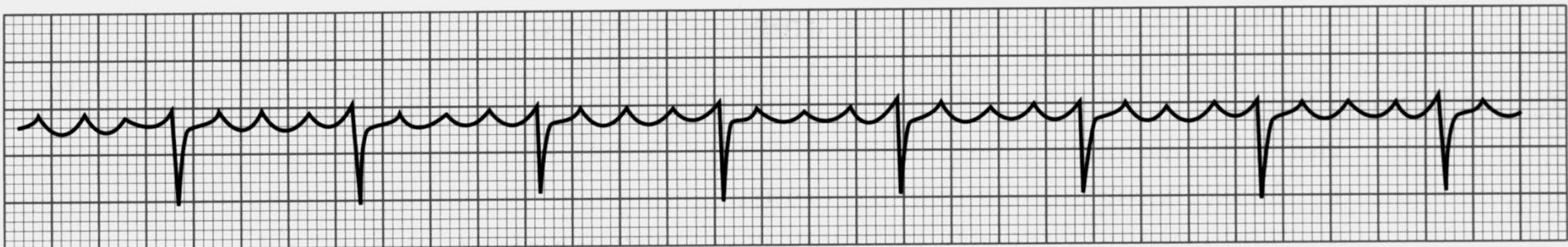


# Multifocal atrial tachycardia

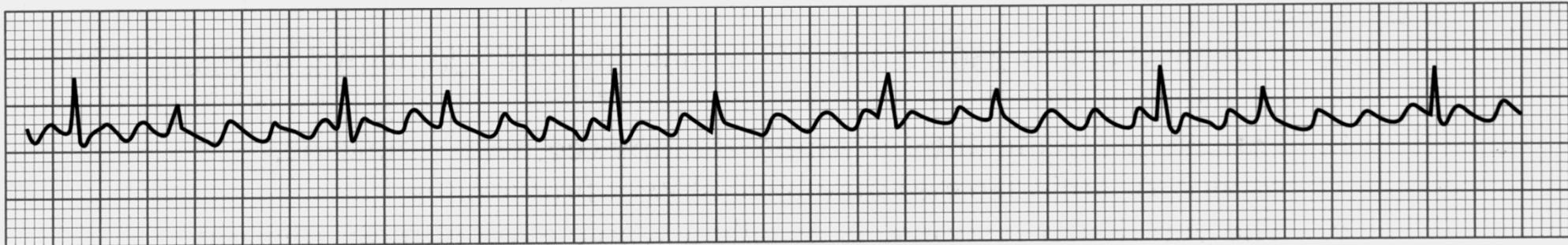


# Atrial flutter

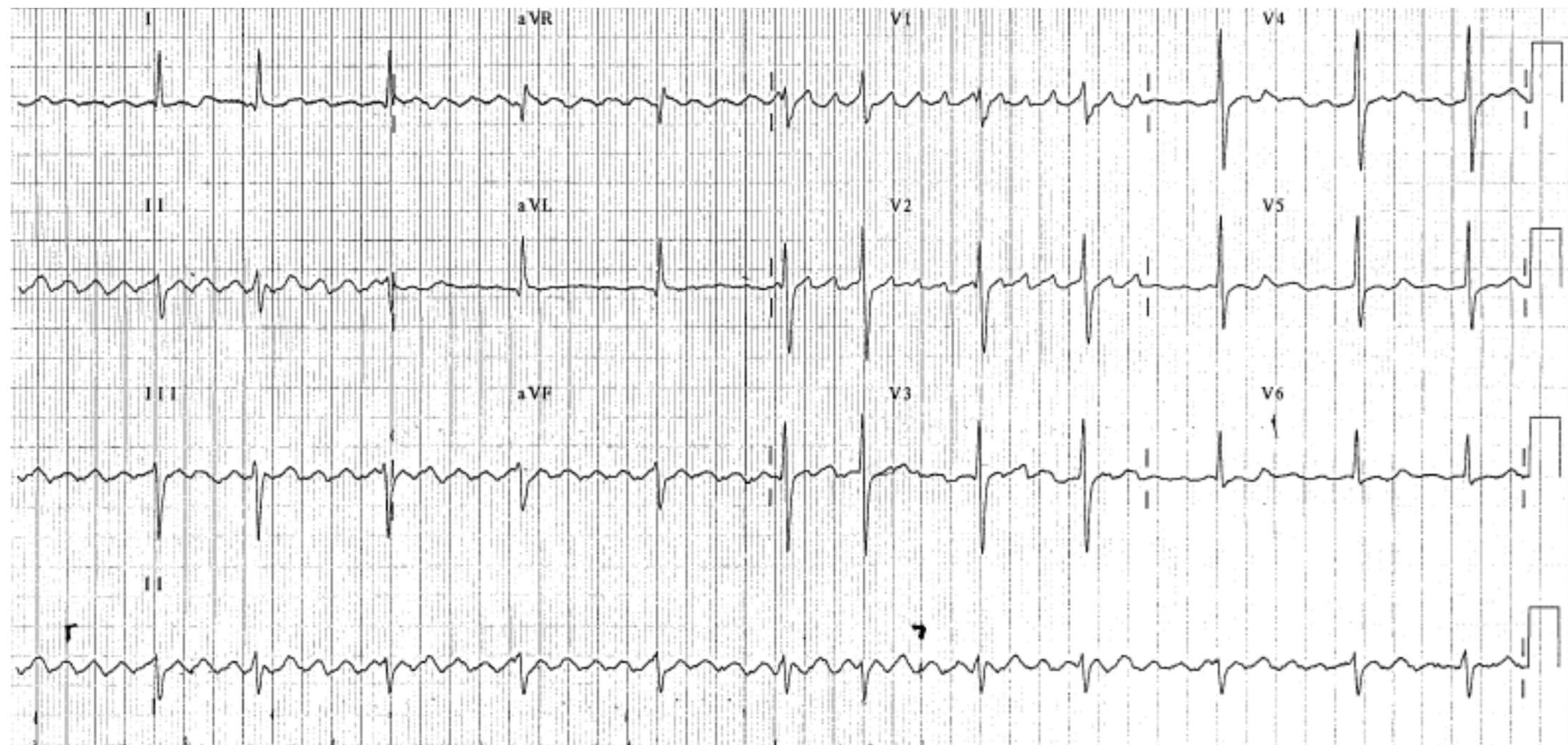
Lead V<sub>1</sub>— atrial flutter and 4:1 block



Lead II—atrial flutter with alternating 2:1 and 4:1 block

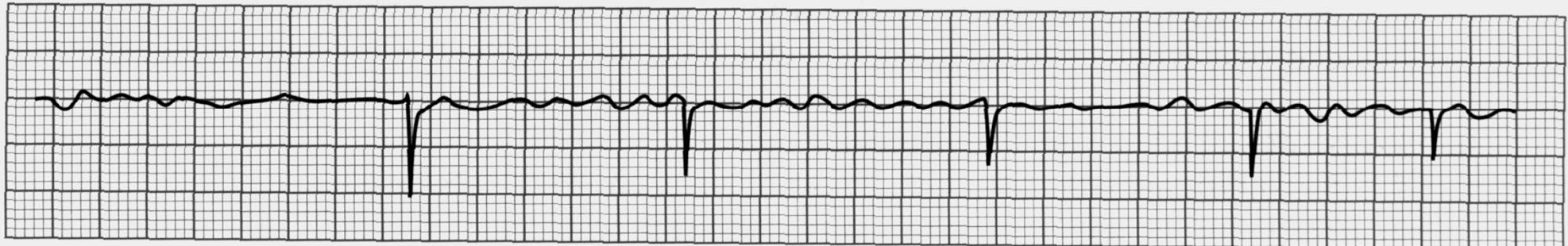


# Atrial flutter with alternating 2:1 and 4:1 block

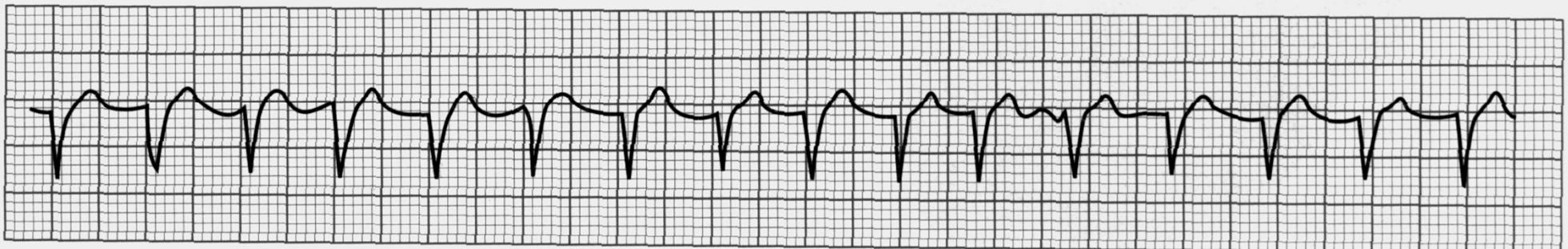


# Atrial fibrillation

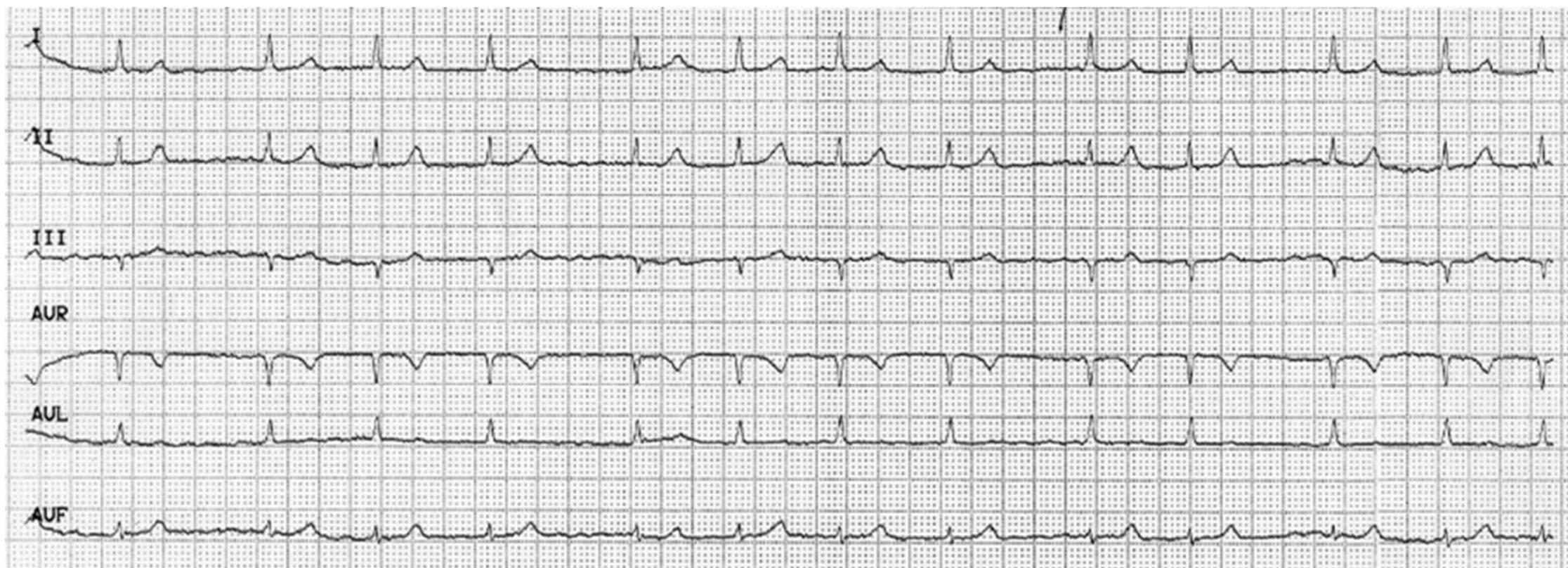
Lead V<sub>1</sub>—atrial fibrillation with slow ventricular response



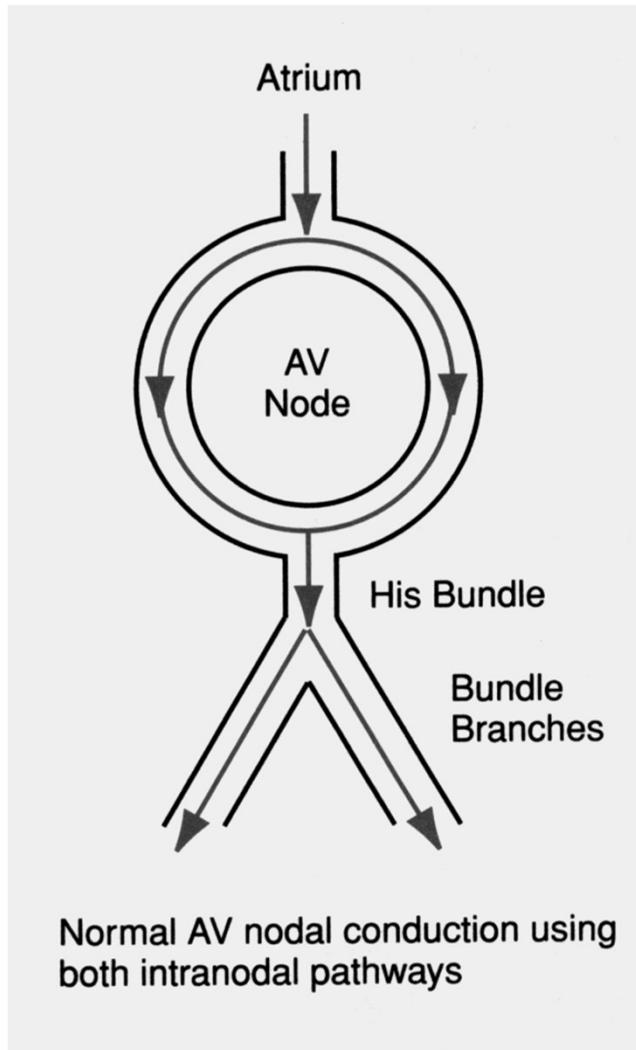
Lead V<sub>1</sub>—atrial fibrillation with rapid ventricular response



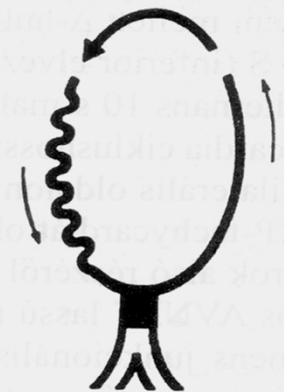
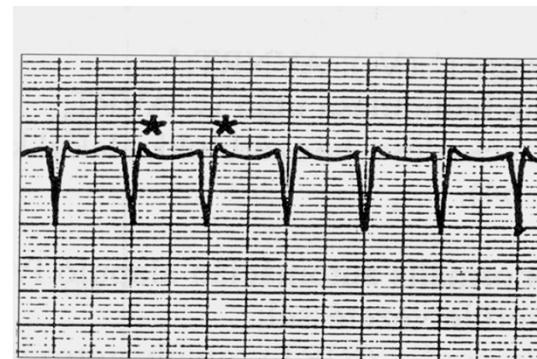
# Atrial fibrillation



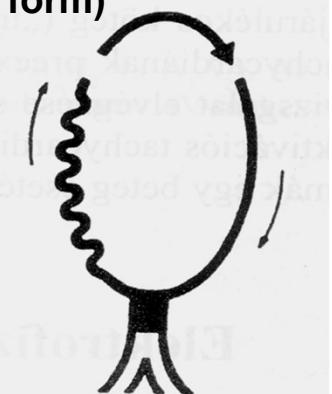
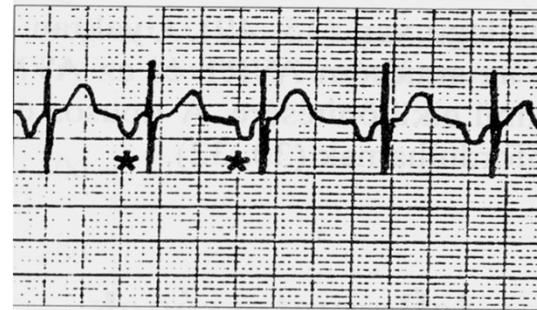
# AV-nodal reentry tachycardia (AVNRT)



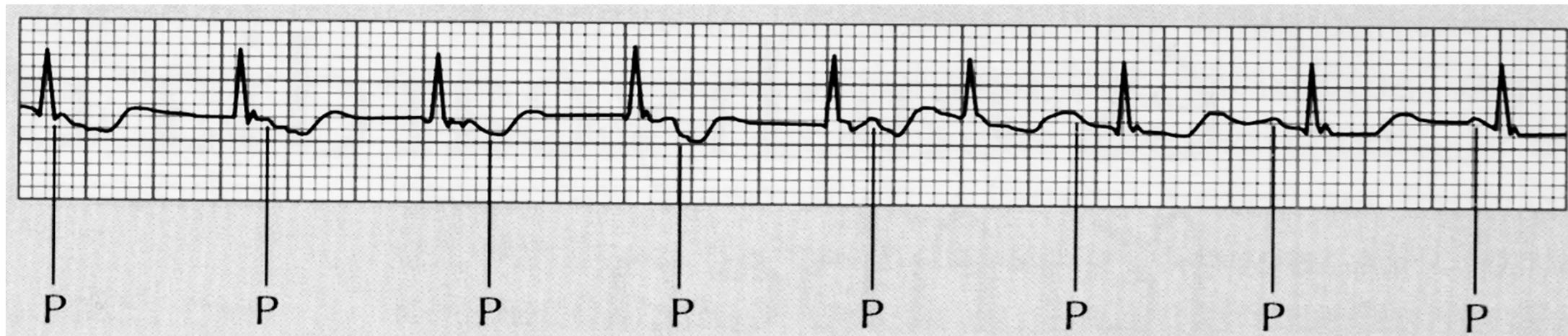
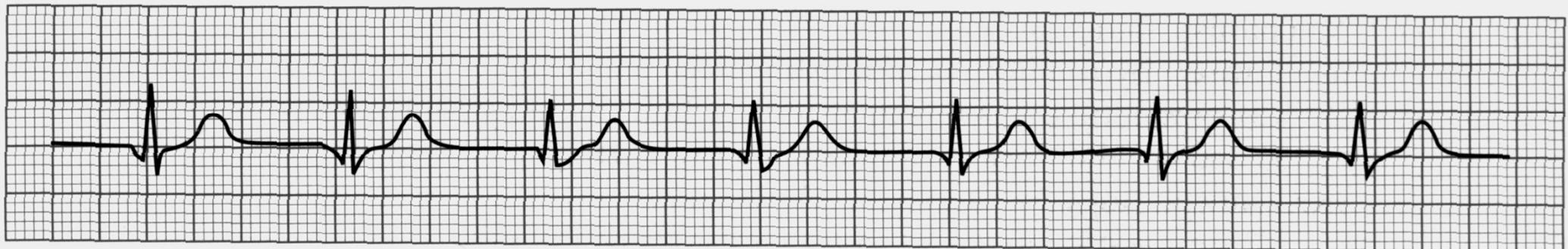
Typical slow-fast AVNRT  
(common form)



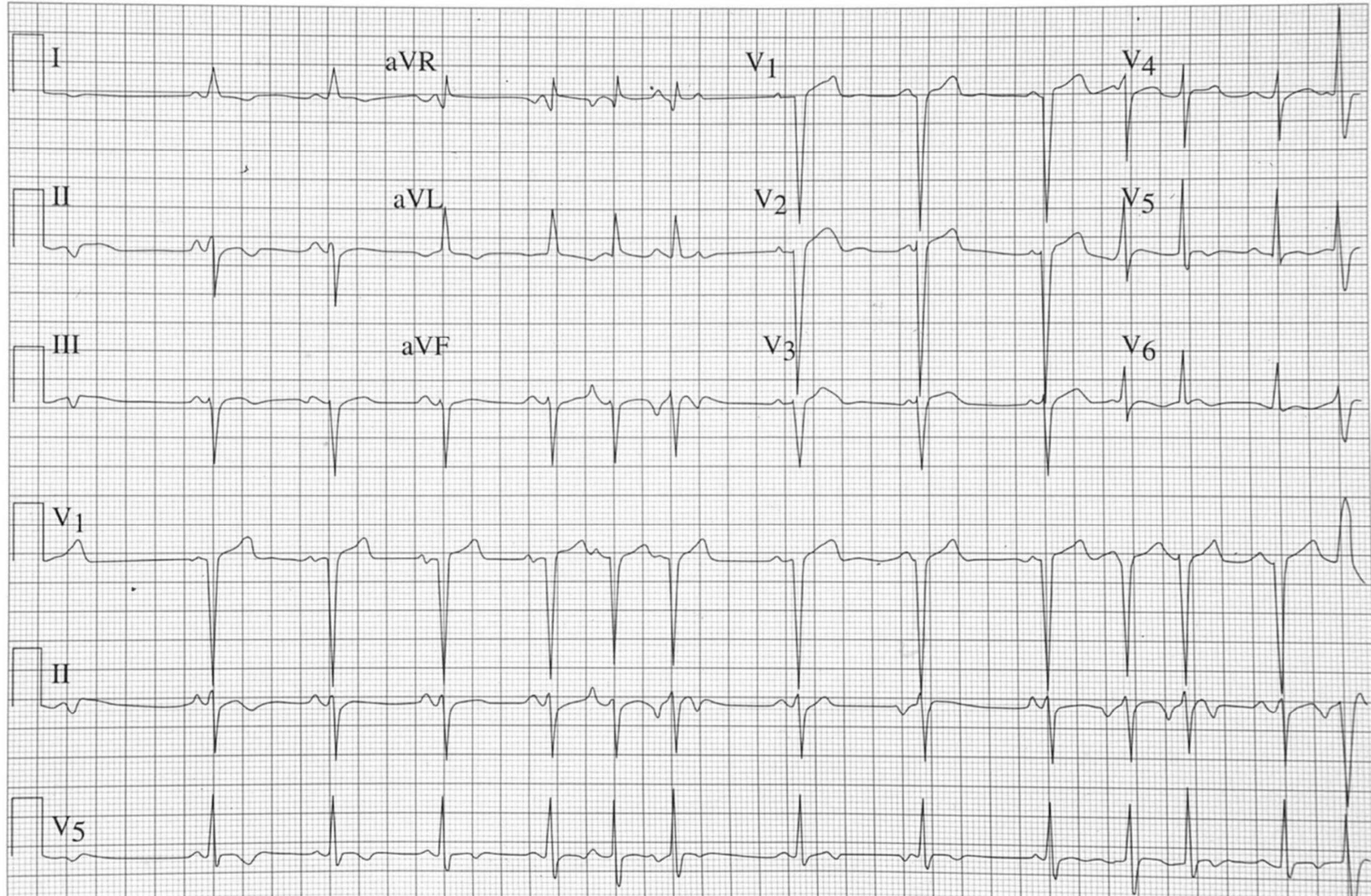
Atypical fast-slow AVNRT  
(uncommon form)



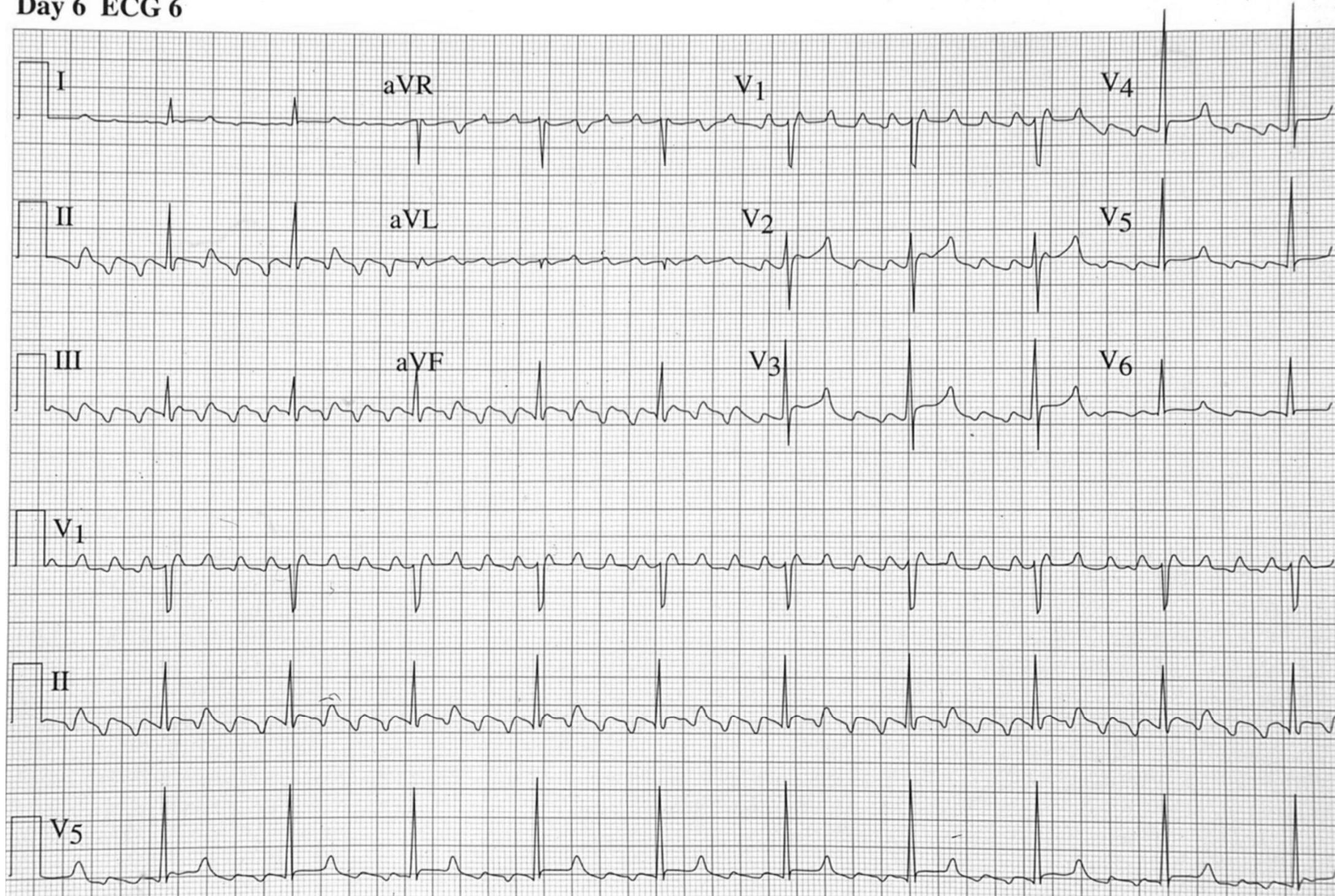
# Accelerated junctional rhythm and junctional tachycardia



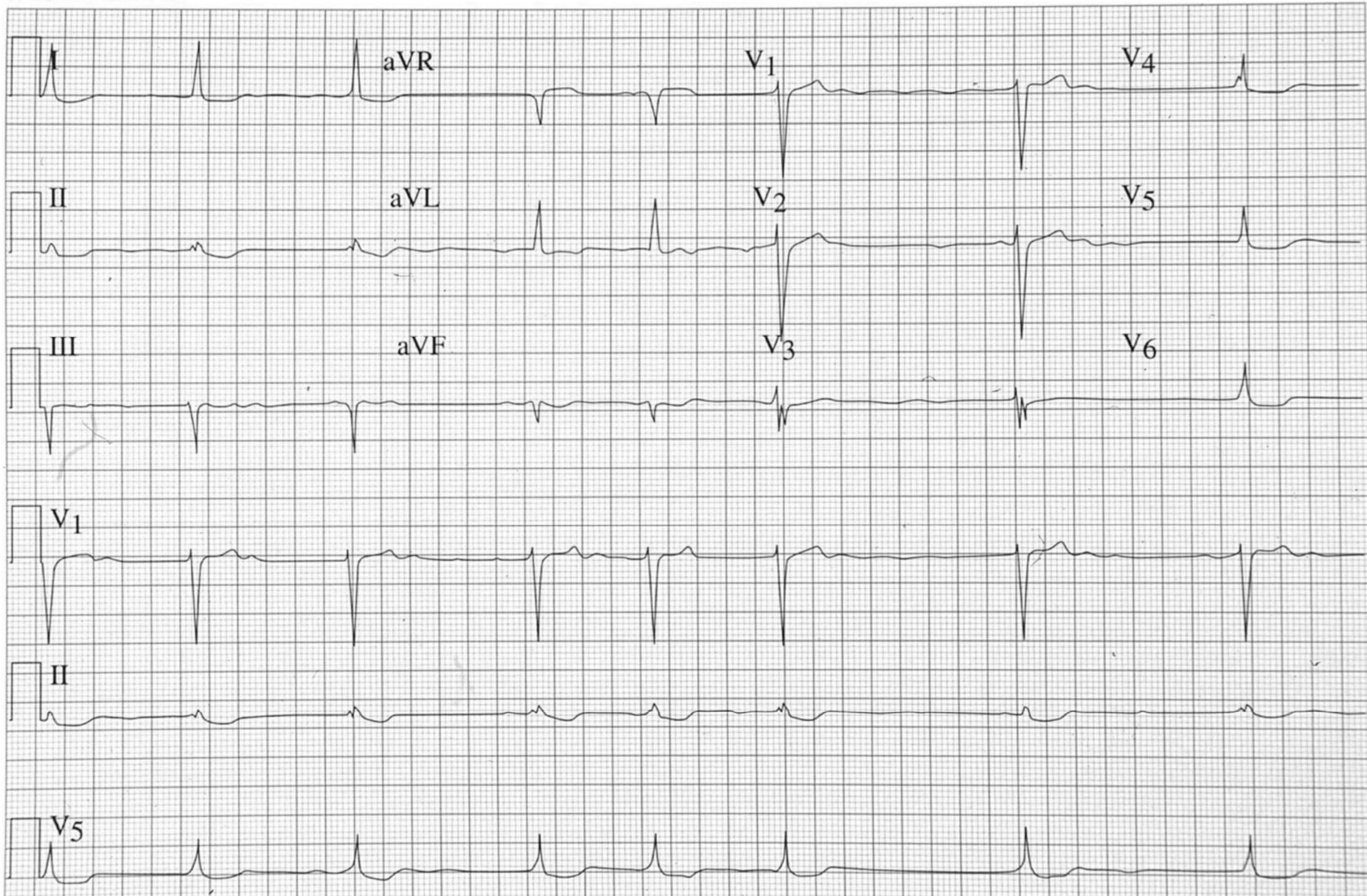
# Day 6 ECG 14



## Day 6 ECG 6



# Day 6 ECG 17



## Day 6 ECG 20

