

ELECTROCARDIOGRAM

Date of ECG: - -
Day Month Year

Time of ECG: : (use 24hr clock)
Hour Minute

Heart rate: beats per min.

12 leads: No Yes

Results Normal Abnormal

If abnormal, please mark the appropriate answer

Rhythm:

- Normal Sinus
- Sinus Arrythmia
- Atrial Fibrillation
- Atrial Flutter
- Premature Ventricular Contraction
- Other Arrythmia: _____

Conduction:

- Normal
- LBBB
- RBBB
- AV Block
- Other: _____
- QT prolongation **If marked:** interval milliseconds

QRS-ST Complex:

- Normal
- Non-specific ST changes
- Old MI
- Myocardial ischemia
- Acute myocardial infarction
- Other: _____

Comments, please complete clearly:
