

Rhythm Interpretation



Method Used	<ul style="list-style-type: none"> ○ Telemetry/Cardiac Monitor ○ 12/15 Lead ECG 	ACTIONS
Heart Rate	<p>_____ (Normal Adult 60-100)</p> <p>_____ (Normal Paed 1-10 years old 60-140)</p> <p>_____ (Normal Infant to 1 year old 100-160)</p>	<p>Stat if abnormal and unstable.</p> <p>Unstable = cool, clammy, decrease LOC, hypotension, chest pain, SOB</p>
Regularity	<p>Normal: Regular</p> <p>Abnormal: Irregular</p>	<p>If new: assess VS: Stable - inform Charge Nurse/M.D</p> <p>If unstable: Stat call. Do ECG</p>
PR Intervals	<p>Normal: PR interval the same (0.12-0.2 sec)</p> <p>Abnormal: PR interval long/changing (AV block)</p>	<p>If new, assess patient: Inform Charge Nurse, M.D;</p> <p>If unstable: Stat call. Do ECG</p>
QRS	<p>Normal: QRS 0.12 sec or less</p> <p>Abnormal: QRS is wide (possible BBB)</p>	<p>If new, assess patient and Inform Charge Nurse, MD,</p> <p>If unstable: Stat call. Do ECG.</p>
QT Interval	<p>Normal: QT is Less than Half the R-R</p> <p>Abnormal: QT is greater than Half the R-R</p> <p>If ECG: Normal QTc <0.46 (f) <0.44 (m) sec</p>	<p>Note: QT Interval varies with Heart Rate.</p> <p>If QT has prolonged from previous assessment, Inform Charge Nurse, M.D.</p> <p>Check recent electrolytes and medication.</p>
ST Segment & T Wave	<p>Normal: ST baseline and upright T</p> <p>Abnormal: ST not baseline and/or T inverted</p>	<p>If anything but normal, check patient and Inform the Charge Nurse or M.D., stat if having symptoms. Stat ECG</p>
Rhythm: Circle	<p>Rate: Normal or Bradycardia or Tachycardia</p> <p>Regular or Irregular</p> <p>PR Interval: Normal or Abnormal</p> <p>QRS: Normal Width or Wide Width</p> <p>QT: Normal or prolonged</p> <p>ST/T: baseline and upright</p>	<p>If unstable: MD or CCRT stat.</p> <p>If no pulse: Call Code Blue, as per your hospital policy.</p>

