36yM with HTN c/o intermittent CP that lasts for 3-4 hours at a time. No exertional pain, diaphoresis, family history of early MI/dissection. PERC negative.

**HR:** 60  **BP:** 160/110  **RR:** 18  **O2 Sat:** 96%

**What is your interpretation of the EKG?**

**History/Clinical Picture**

**Rate**

**Rhythm**

**Axis**

**P Waves**

**Q/R/S Waves**

**T Waves**

**U Waves**

**PR Interval**

**QRS Width**

**ST Segment**

**QT Interval**

Would you expect the EKG abnormalities to be more or less pronounced if the patient’s heart rate increased to 110?
Triage EKG

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