

Foundations EKG II - Unit 9, Case 36



68 y/o M with PMH of obesity, DM2, and a heavy smoking history presents for acute onset crushing chest pain and shortness of breath. Previous EKG shows a narrow QRS and a normal axis.

HR: 105 BP: 66/52

RR: 20 O2 Sat: 88%

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

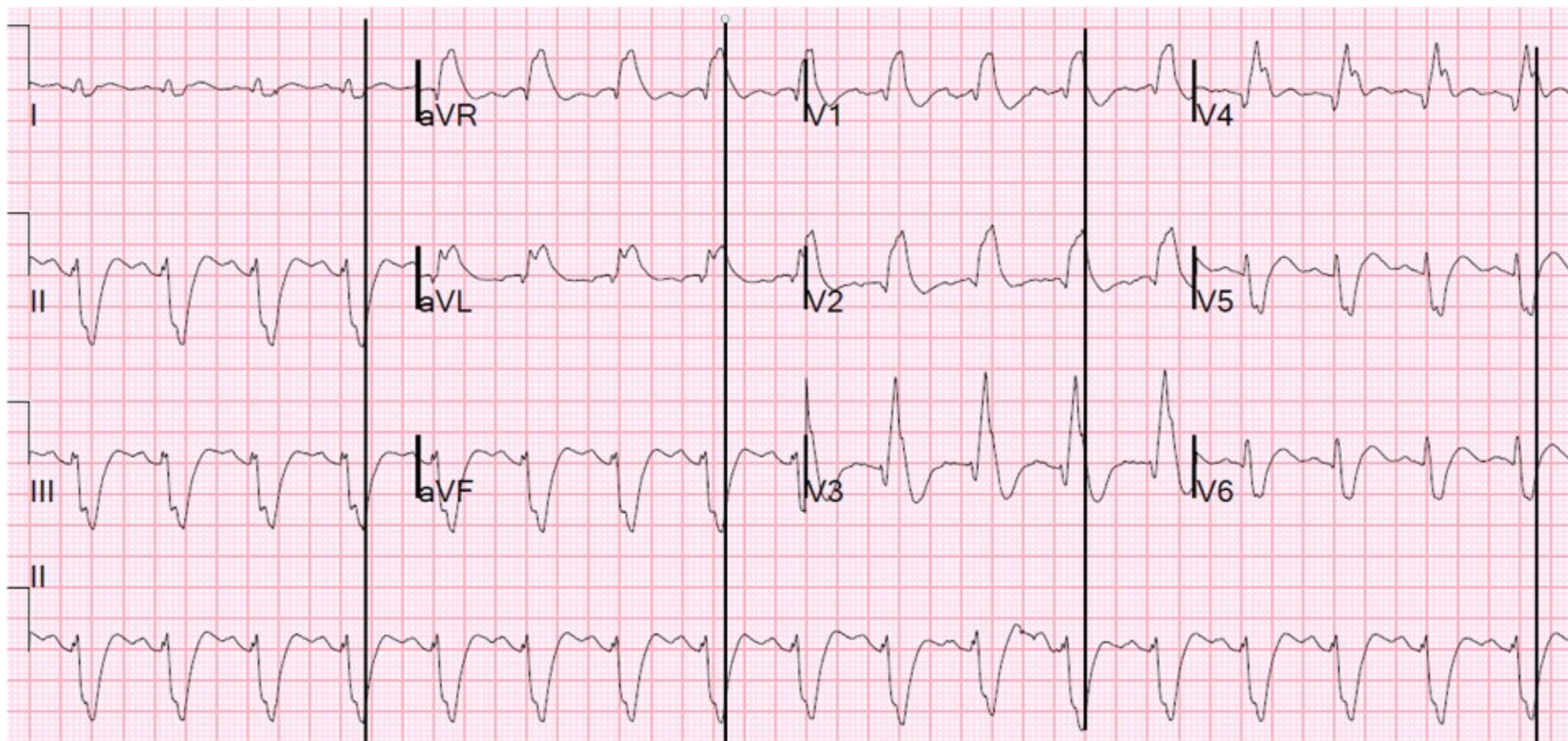
What is the appropriate emergency management of this patient's condition?

How would you address this patient's hypotension?

Should synchronized cardioversion be attempted?

How would you manage this patient in the event of cardiac arrest?

Triage EKG



Courtesy of Steve Smith of [Dr. Smith's ECG Blog](#)