

INSTRUCTIONS: Information contained on this form will be considered SOURCE documentation. Must be stored in study files.

Section A: KEY IDENTIFYING INFORMATION

- A1. Study Identification Number _____ - _____ - _____ - _____ - _____
- A2. Acrostic Identifier _____
- A3. Date of 12 Lead Electrocardiogram
 _____ / _____ / _____
 M M D D Y Y Y Y
- A4. Date of form completion
 _____ / _____ / _____
 M M D D Y Y Y Y

Section B: CARDIAC RHYTHM ASSESSMENT

- B1. Predominant rhythm (Circle only **one**)

- NORMAL SINUS RHYTHM 1
- ATRIAL ESCAPE 2
- JUNCTIONAL ESCAPE..... 3
- VENTRICULAR ESCAPE 4
- PACED 5
- a. If PACED, specify mode:
- DDD 1
- AAI 2
- VVI 3
- OTHER 99
- a.1. If Other, specify: _____
- CANNOT DETERMINE -8
- ECTOPIC ATRIAL 6
- SINUS BRADYCARDIA 7
- OTHER..... 99

- b. If Other, specify: _____

B2. Other rhythms

- a. Sinus arrhythmia (> 100 msec difference between PP intervals) YES.....1 NO.....2
- b. Junctional escape beats YES.....1 NO 2
- c. Other YES.....1 NO 2 (C1)

c1. If Other=YES, specify: _____

Section C: ECTOPY

- C1. Atrial ectopy YES..... 1 NO.....2 (C2)
- a. Isolated YES1 NO.....2
- b. Couplets YES1 NO.....2
- c. Non-sustained tachyarrhythmia (< full recording) YES.....1 NO.....2 (C1d.)
- c1. If Yes, specify type:
- ATRIAL FLUTTER.....1
- ATRIAL FIBRILLATION.....2
- ECTOPIC ATRIAL.....3
- AV RECIPROCATING.....4
- UNKNOWN.....-8
- d. Sustained tachyarrhythmia (full recording) YES.....1 NO.....2 (C2)
- d1. If Yes, specify type:
- ATRIAL FLUTTER.....1
- ATRIAL FIBRILLATION.....2
- ECTOPIC ATRIAL.....3
- AV RECIPROCATING.....4
- UNKNOWN.....-8
- C2. Ventricular ectopy YES.....1 NO 2 (D1)
- a. Isolated YES1 NO.....2
- b. Couplets YES1 NO.....2

- c. Non-sustained tachyarrhythmia (< full recording) YES1 NO.....2
- d. Sustained tachyarrhythmia (full recording) YES1 NO.....2

Section D: RATES/INTERVALS/AXES

- D1. Ventricular rate _____ beats/minute
- D2. PR interval _____ msec
- D3. QRS duration _____ msec
- D4. QT interval _____ msec
- D5. QTc interval _____ msec

- | | Sign
(+ or -) | Axis | |
|------------|------------------|------|---------------|
| D6. P axis | — | | _____ degrees |
| D7. R axis | — | | _____ degrees |
| D8. T axis | — | | _____ degrees |

Section E: FINDINGS

- E1. Right bundle branch block (RBBB) YES.....1 NO.....2
- E2. Left bundle branch block (LBBB) YES.....1 NO.....2
- E3. Right atrial enlargement (RAE) YES.....1 NO.....2
- E4. Left atrial enlargement (LAE) YES.....1 NO.....2
- E5. Right ventricular hypertrophy (RVH) YES.....1 NO.....2
- E6. Left ventricular hypertrophy (LVH) YES.....1 NO.....2
- E7. Non-specific ventricular hypertrophy (VH) YES.....1 NO.....2
- E8. ST elevation (strain) YES.....1 NO.....2 (E9)
- | | | |
|-------------|-------------|------------|
| a. Inferior | YES 1 | NO 2 |
| b. Anterior | YES 1 | NO 2 |
| c. Lateral | YES..... 1 | NO 2 |
- E9. ST depression (ischemia) YES.....1 NO 2 (E10)
- | | | |
|-------------|-------------|------------|
| a. Inferior | YES 1 | NO 2 |
|-------------|-------------|------------|

- b. Anterior YES 1 NO 2
- c. Lateral YES..... 1 NO 2
- E10. T wave inversion YES.....1 NO 2 (**E11**)
- a. Inferior YES 1 NO 2
- b. Anterior YES 1 NO 2
- c. Lateral YES..... 1 NO 2
- E11. Non-specific ST-T changes YES.....1 NO 2 (**END**)

END OF FORM