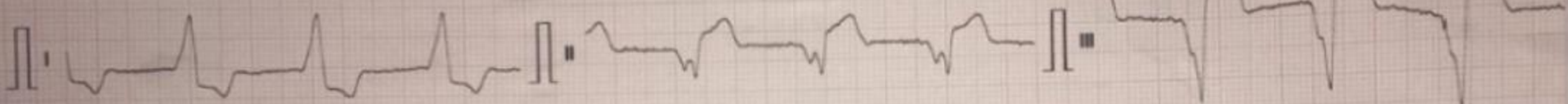


Cardio Técnica

25mm/seg 1mV/cm 0.25Hz-35Hz + AC50Hz



avR

avL

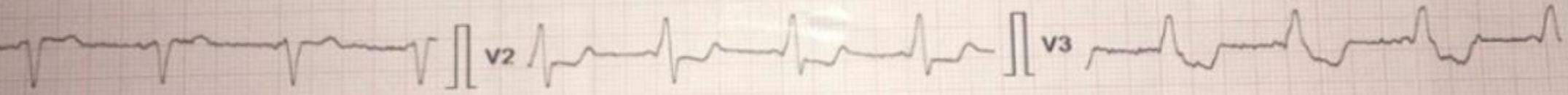
avF



V1

V2

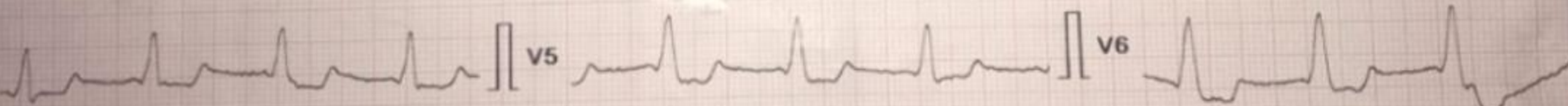
V3



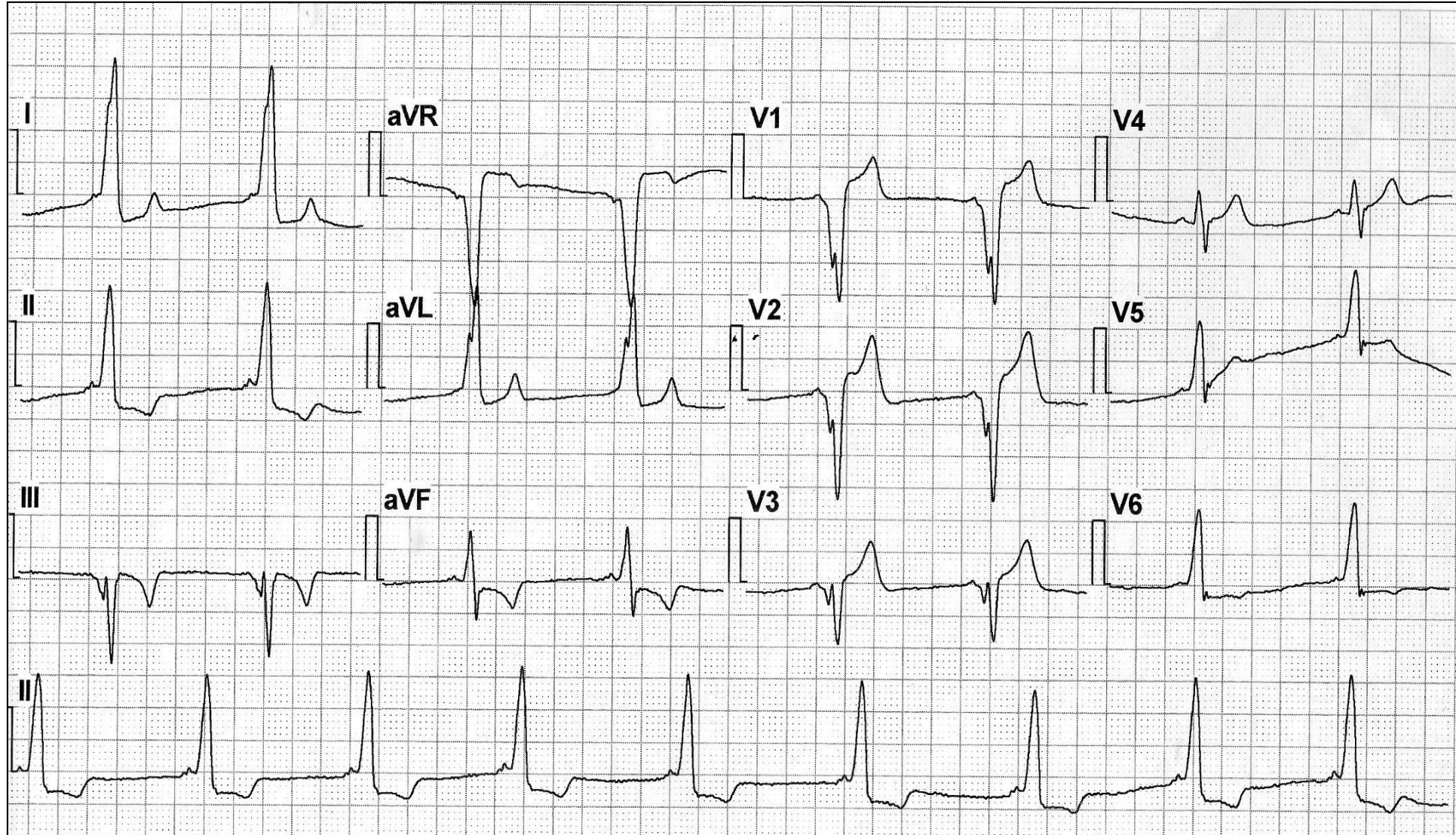
V4

V5

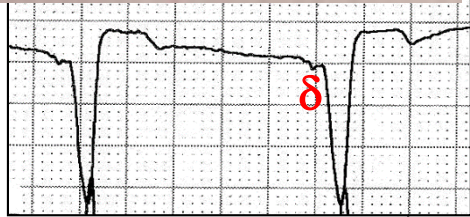
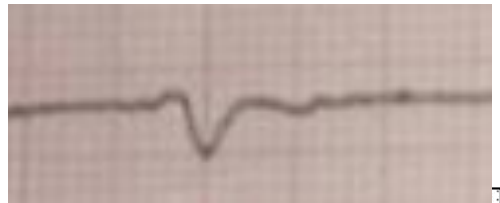
V6



Young athlete man 28yo, with normal structural heart. He complain of frequent random palpitations. Which is probable complete diagnosis? And Why?

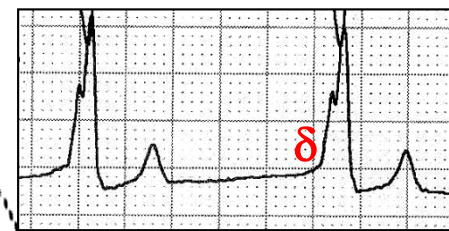
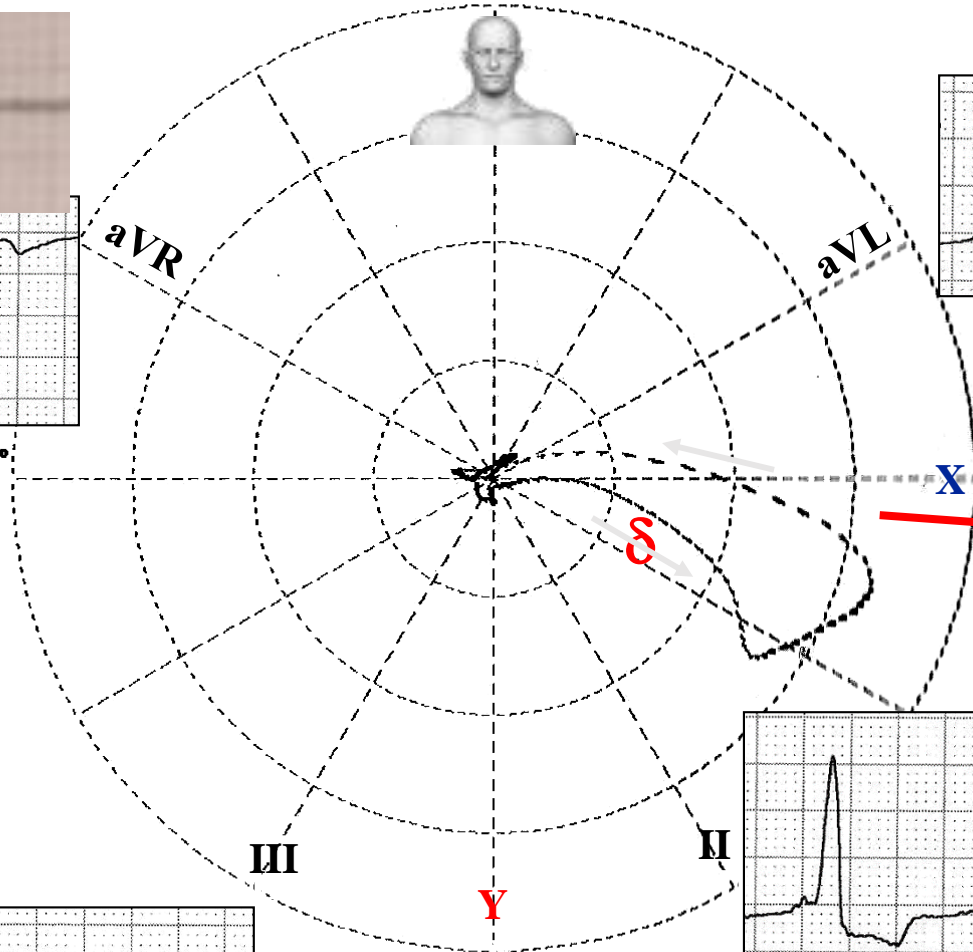


Frontal -90°



aVR

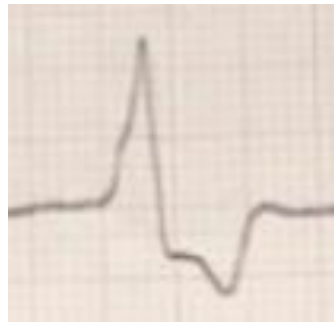
180°



aVL

I

QRS axis + 10°

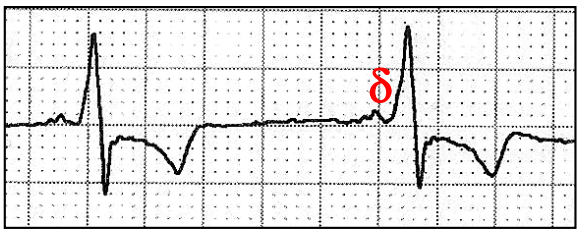
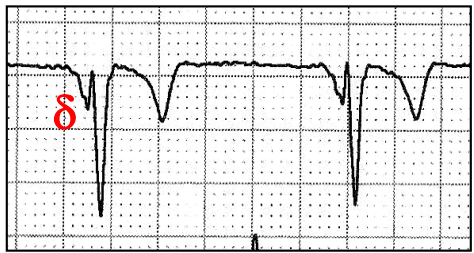
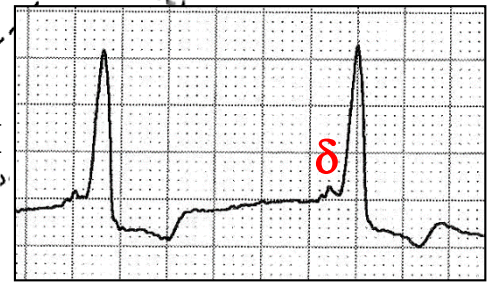


III

+90°

aVF

II



δ

δ

δ

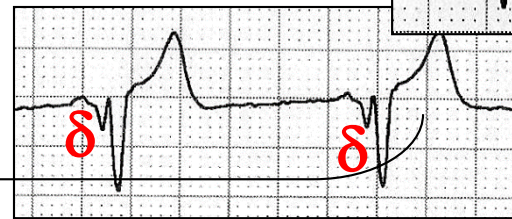
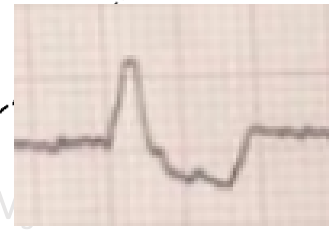
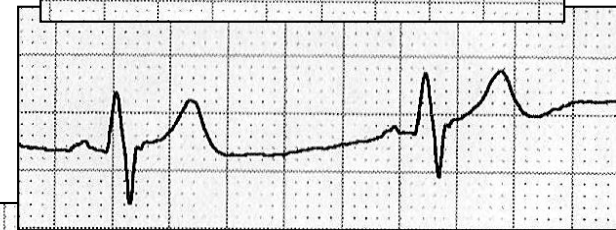
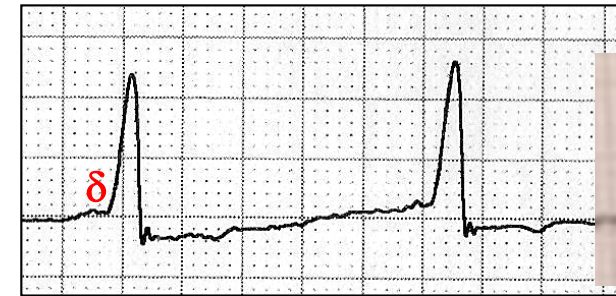
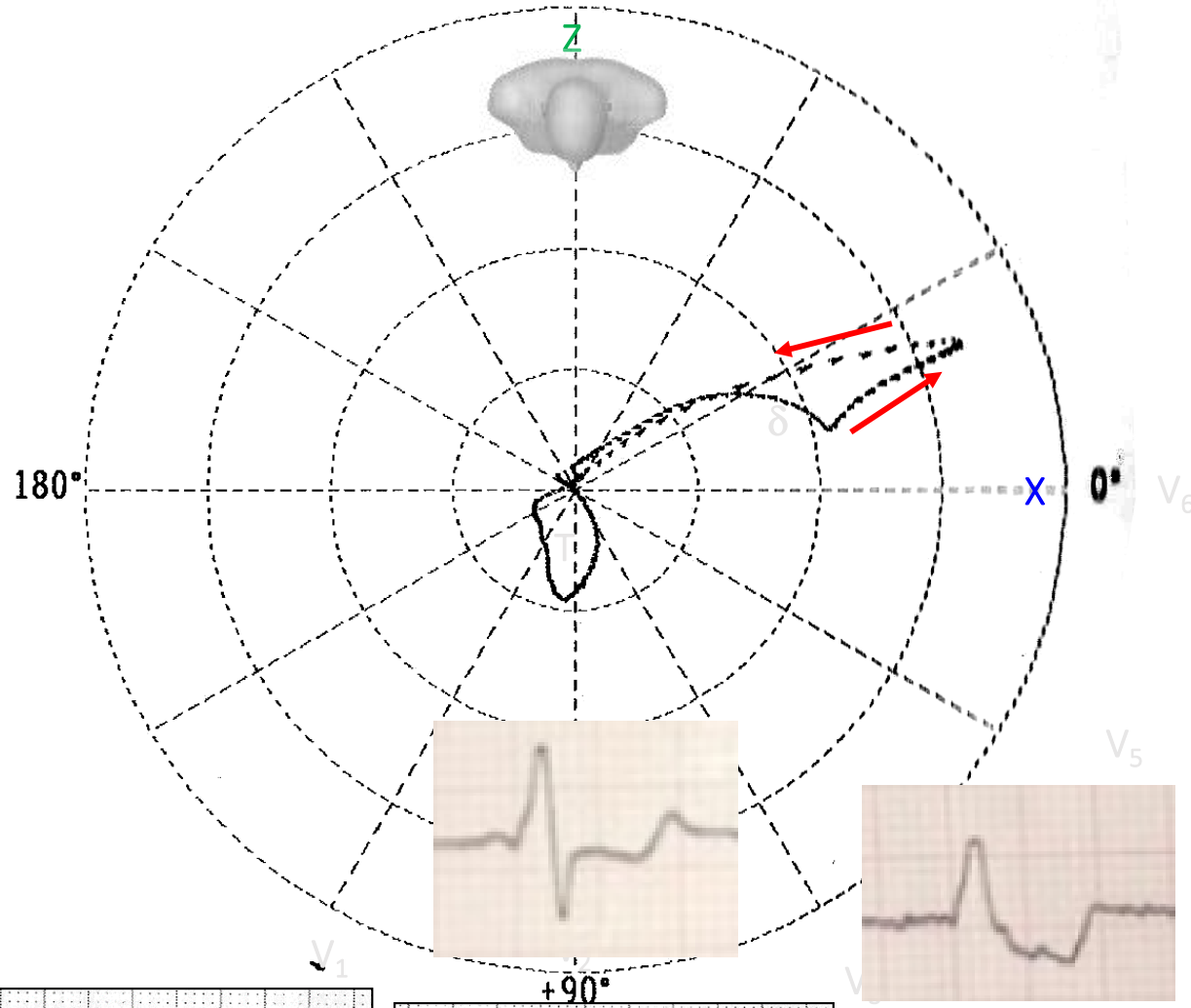
δ

δ

δ

Horizontal -90°

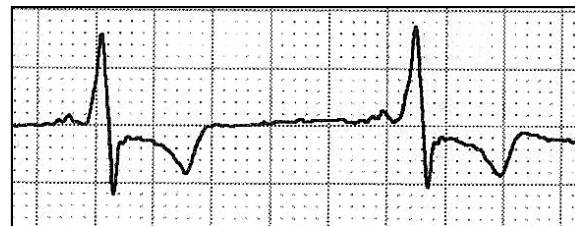
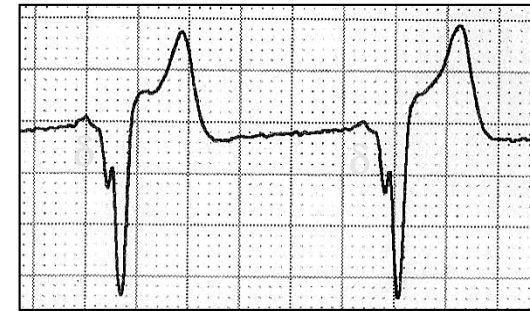
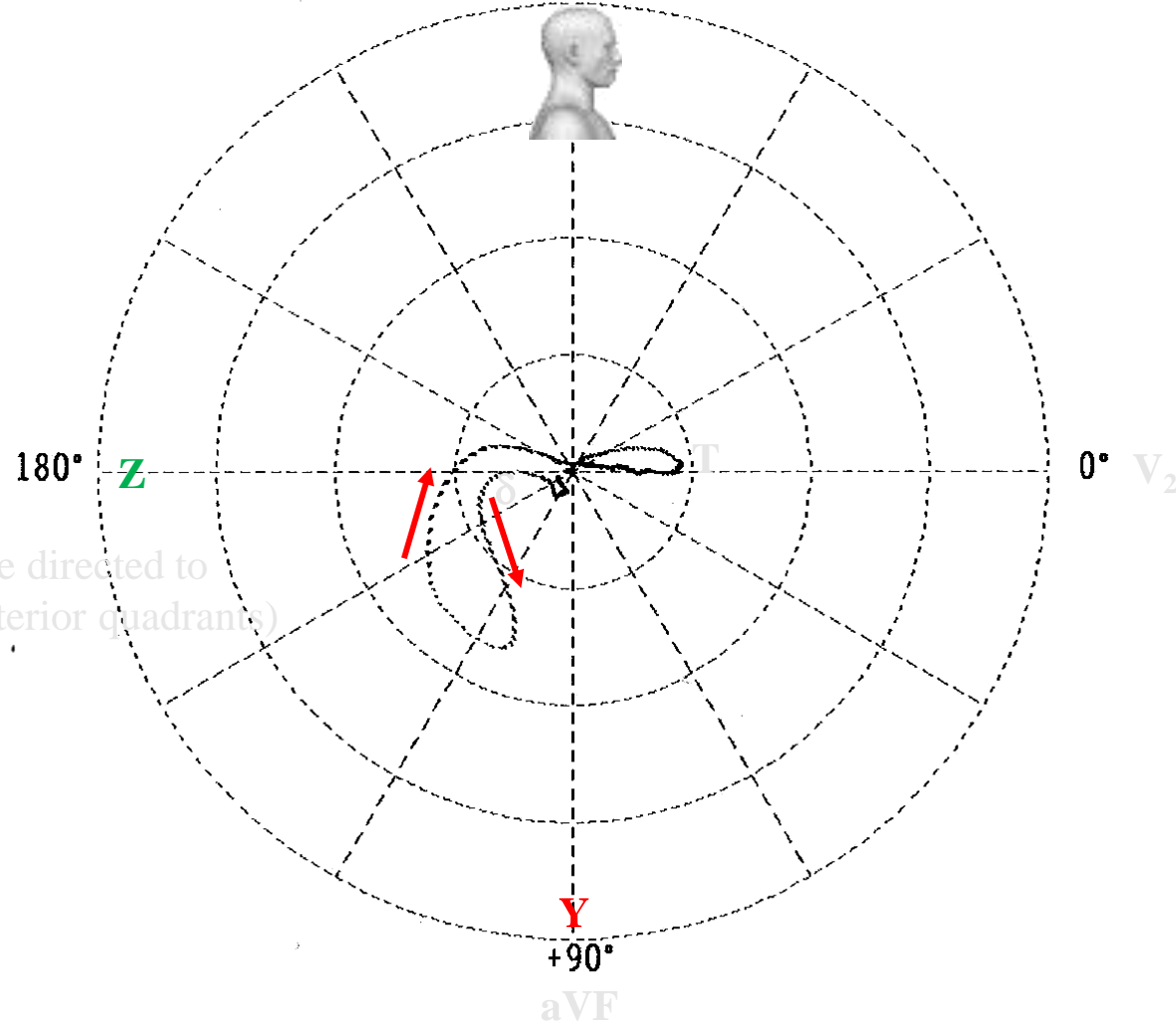
ECG/VCG correlation on Horizontal Plane



WPW with right lateral pathway pre-excitation pattern. The only curious thing is the negative delta waves in V1-V3 which usually can only be seen in parahisian accessory pathways.

ECG/VCG correlation on Right Sagittal Plane

Sagittal -90°



Current Nomenclature and Proposed Terminology

Current
(Attitudinally Incorrect)

Proposed
(Attitudinally Correct)

Right

anterior

superior

antero-lateral

supero-anterior

lateral

anterior

postero-lateral

infero-anterior

posterior

inferior

Left

anterior

superior

antero-lateral

supero-posterior

lateral

posterior

postero-lateral

infero-posterior

posterior

inferior

Septal paraseptal

anteroseptal

superoparaseptal

posteroseptal

inferoparaseptal

midseptal

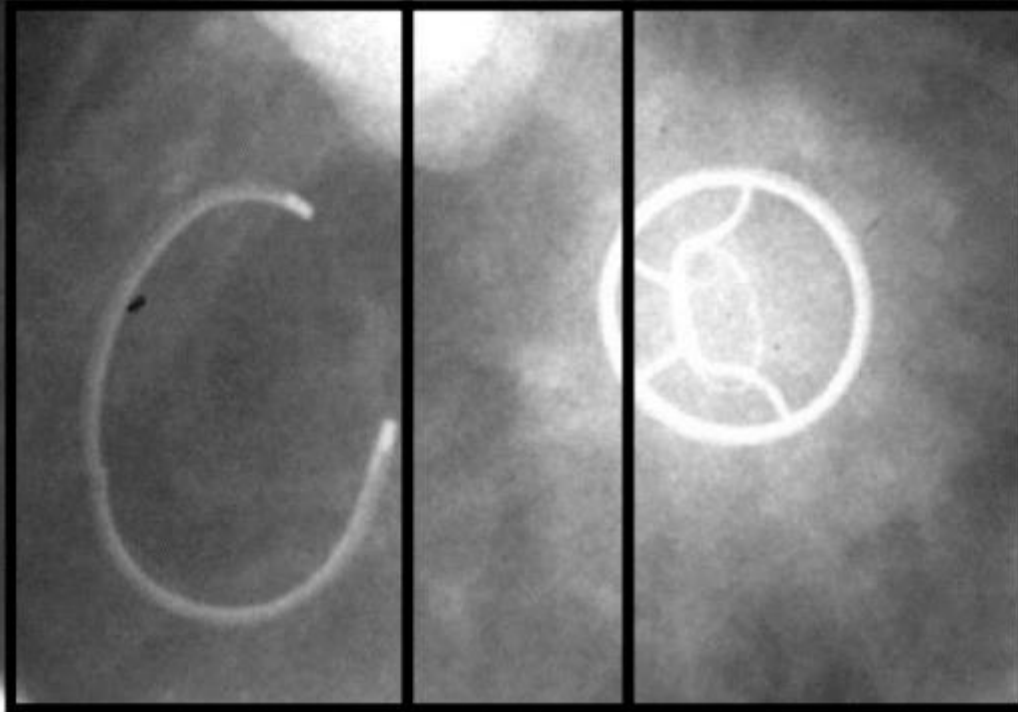
septal

Proposed terminology is based on anatomic positions.

First step: QRS with Δ wave and wide?

**1. Sufficient
pre-excitation?**

(Δ QRS 120 ms)



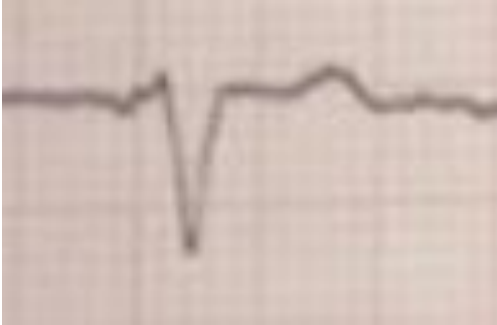

Answer: sufficient for pre-excitation criteria: short PR interval, Δ at the beginning of QRS, prolonged QRS.

Second step: right side or left side?

2. Right-sided or left-sided?

Right side Left side

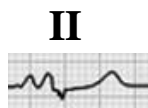
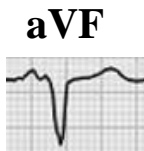
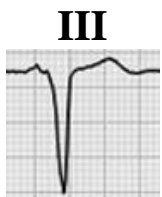
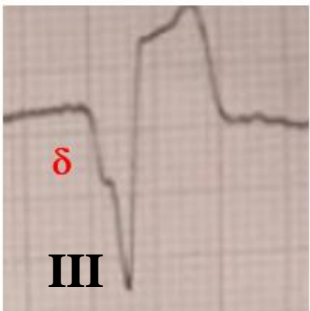
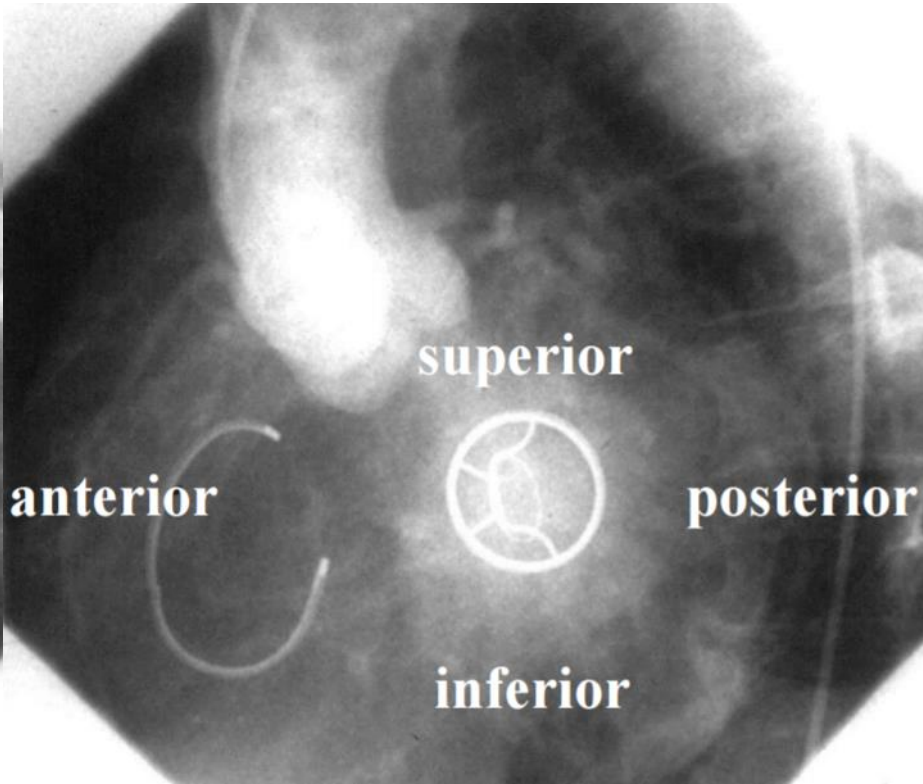
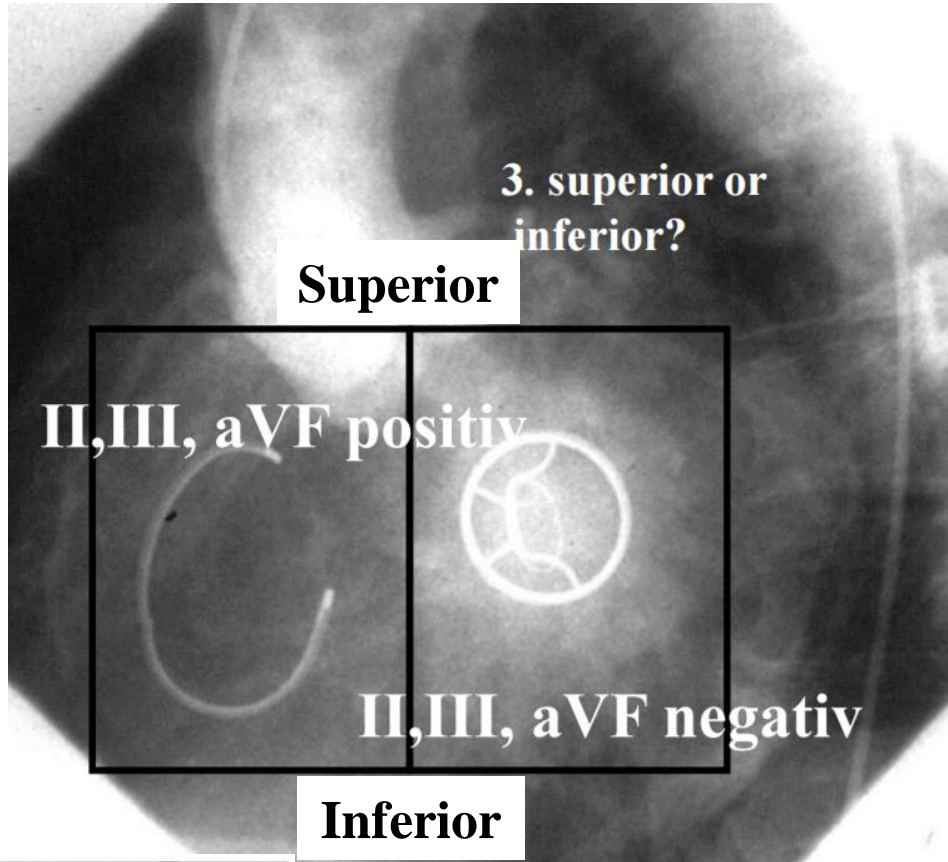
V1: $S > R$ V1: $R > S$



Answer: right side, because $S > R$ in V1.

The image displays a chest X-ray with a central box divided into two panels. The left panel shows a right-sided view of the heart with the text 'V1: S > R' and a diagram of a C-shaped catheter. The right panel shows a left-sided view with the text 'V1: R > S' and a diagram of a circular catheter. Above the box are labels 'Right side' and 'Left side'. To the left and right of the box are ECG tracings. The left tracing shows a deep S wave and a small R wave, while the right tracing shows a small S wave and a tall R wave. Below the right tracing is the text 'Answer: right side, because S > R in V1.'

Third step: superior or inferior?



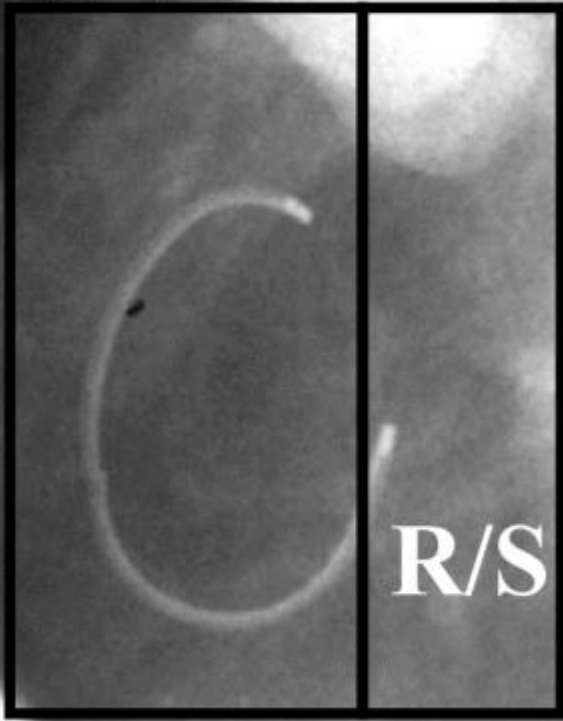
Answer: inferior, because inferior leads are predominantly negative

4. Right free wall
or septal/paraseptal?

Right
free wall

Septal/
paraseptal

$R/S \geq V3$

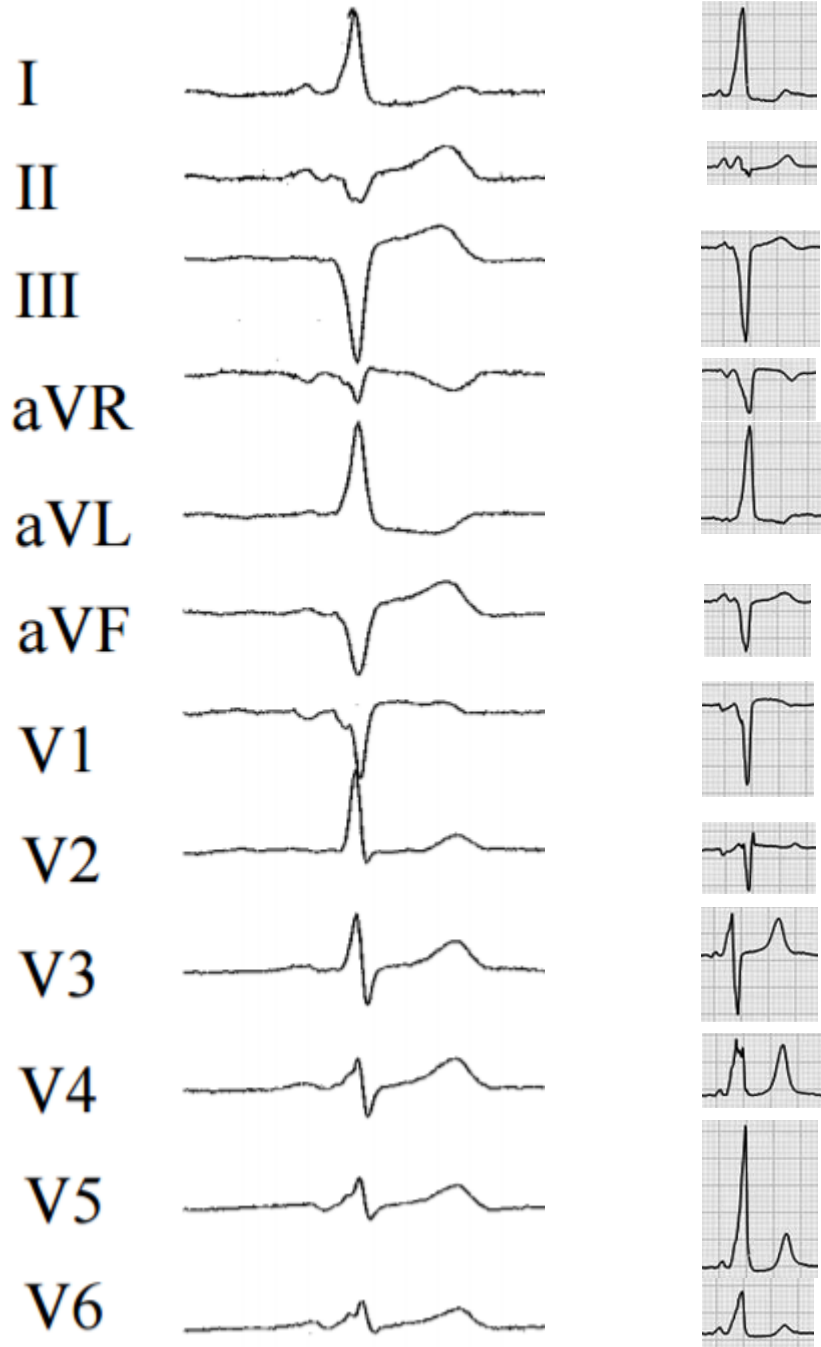


$R/S \leq V3$

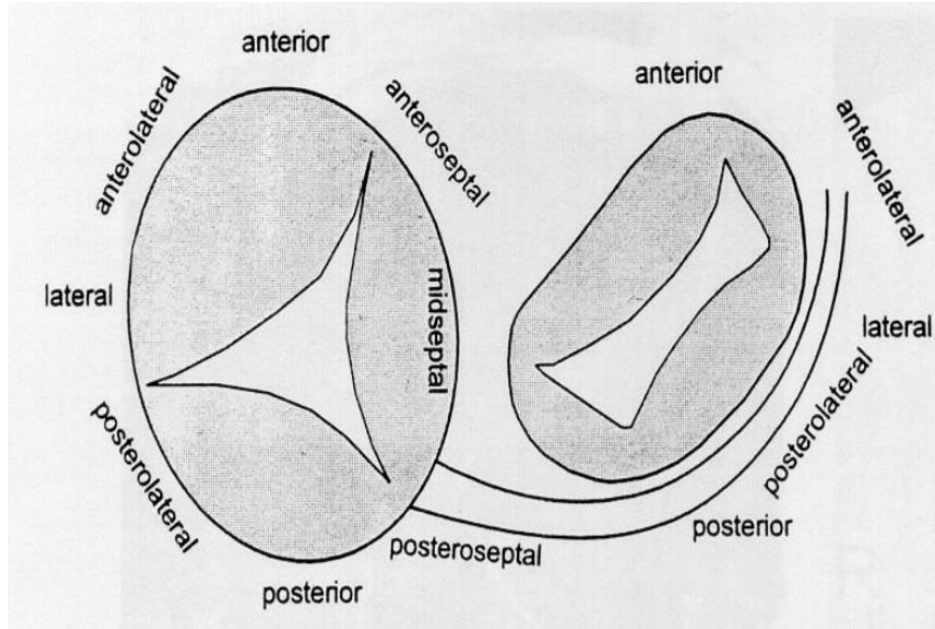


Right side accessory pathway

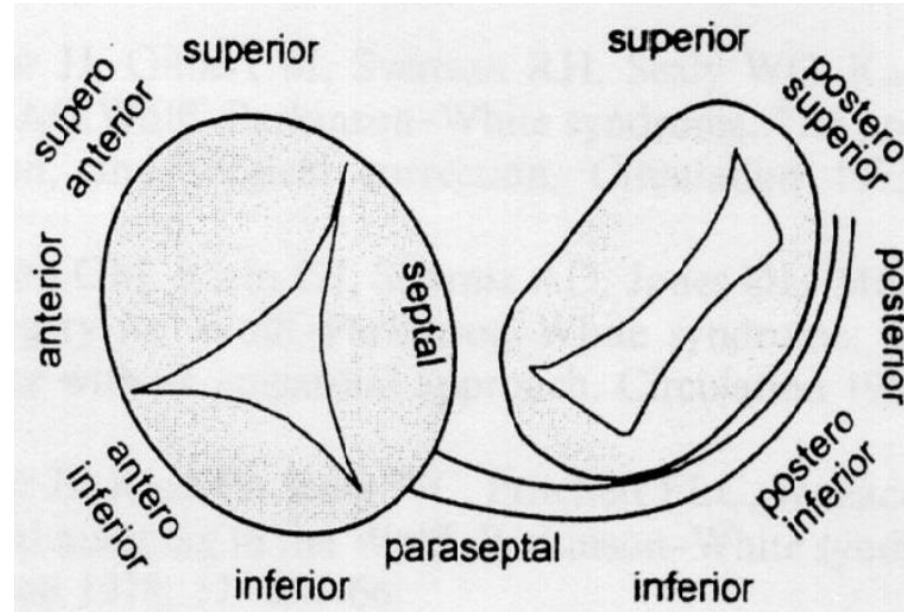
The present case



Old nomenclature for Accessory pathways location



New nomenclature for Accessory pathways location



New nomenclature for Accessory pathways location

