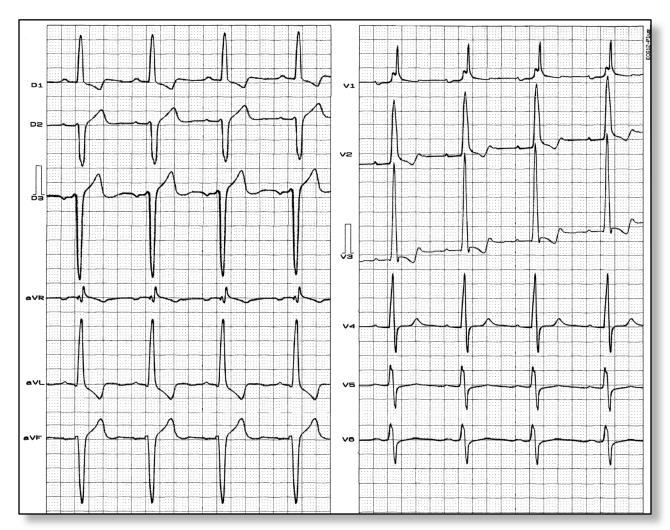
NAME:
 L. R. J.
 DATE:
 11/12/2001
 AGE:
 44 Y.
 NUMBER:
 617

 SEX:
 F.
 RACE:
 W.
 WEIGHT:
 65 Kg .
 HEIGHT:
 1.60 m.
 BIOTYPE:
 ATHLETIC

 MEDICATION IN USE:
 NOTHING STATED.
 Image:
 617
 617



Clinical diagnosis: Chagas cardiomyopathy.

ECG diagnosis: SR; HR: 60 bpm; P wave: voltage: 1 mm; duration: 80 ms; SAP: +45<sup>o</sup> and to the front; PR interval: 230 ms; QRSD: 115 ms; SAQRS: -65<sup>o</sup>; morphology: DI: R and aVL: qR; DII, DIII and aVF: rS.  $V_1$ ,  $V_2$ : R;  $V_3$ : Rs  $V_5$  and  $V_6$ : RS. Absence of q wave in  $V_5$  and  $V_6$ , (by absence of vector 1AM).

CONCLUSION: LVE + 1st degree AV block + LAFB + LSFB = INCOMPLETE TRIFASCICULAR BLOCK?

 NAME:
 L. R. J.
 DATE:
 12/12/2001

 SEX:
 F.
 RACE:
 W.
 WEIGHT:
 65 Kg .

 MEDICATION IN USE:
 NOTHING STATED.
 Contraction
 Contreaction
 Contraction
 <t

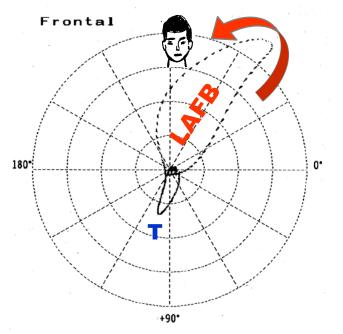
#### **AGE:** 44 Y. **HEIGHT:** 1.60 m.

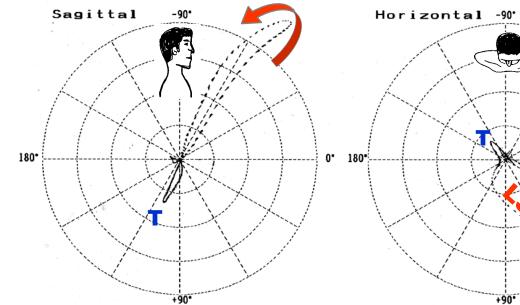
NUMBER: 617 BIOTYPE: ATHLETIC

0\*

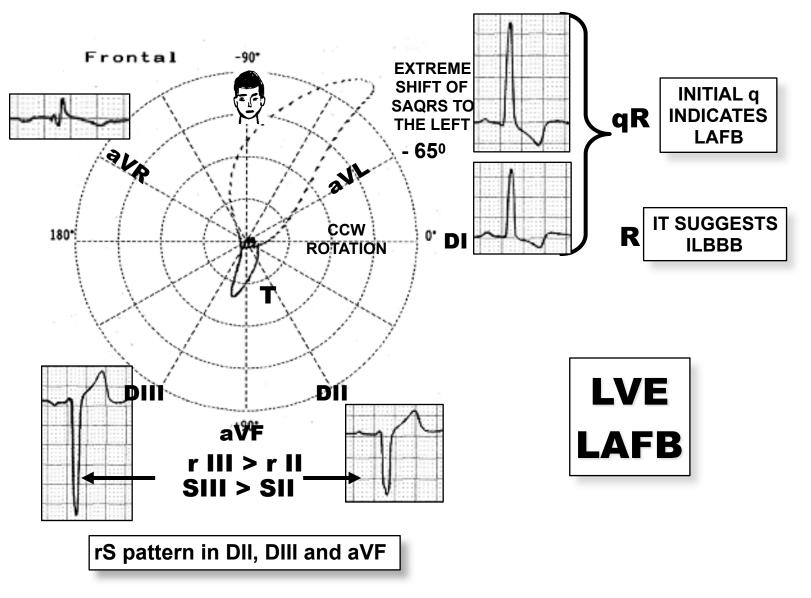
Sensi.	2
Timer	2 msec
Loop	All Loop
Sagittal	Right
Z Axis	Back
Filter	Hum
	Muscle
	Drift



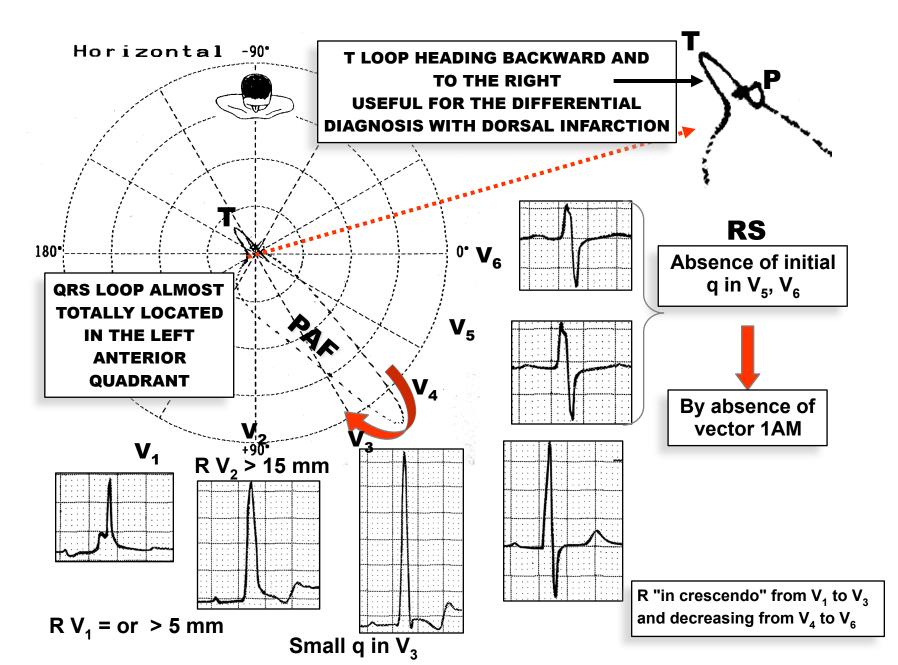




#### ECG/VCG CORRELATION FRONTAL PLANE CHARACTERISTICS OF ECG/VCG TYPICAL OF LAFB TYPE IV OF ROSENBAUM: LAFB ASSOCIATED TO LVE



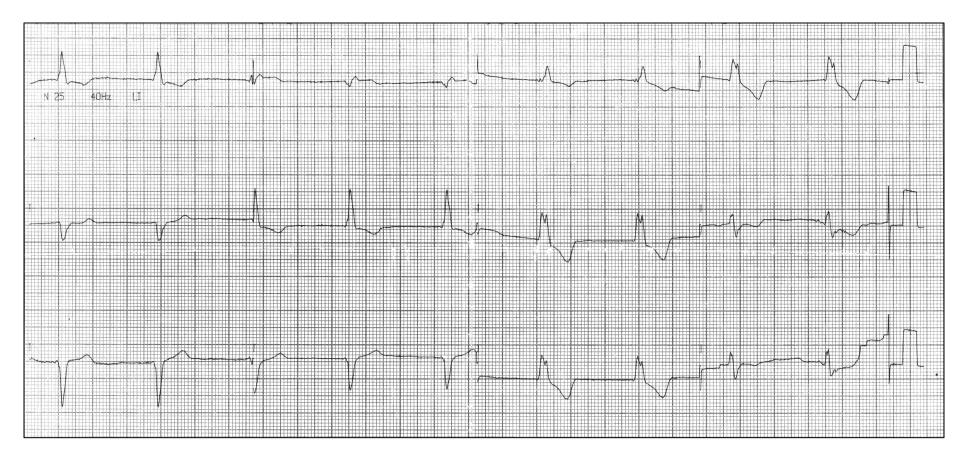
### **ECG/VCG CORRELATION HORIZONTAL PLANE**



# LAFB ASSOCIATED TO CRBBB AND LSFB

# TRIFASCICULAR BLOCK STILL NOT DESCRIBED IN LITERATURE

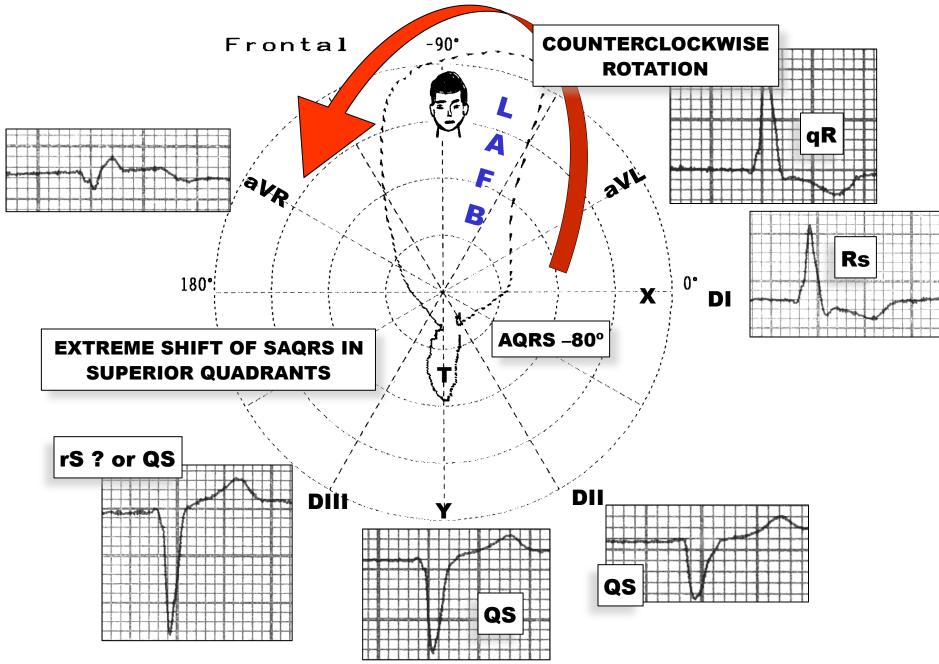
Name: JFM; Sex: Male; Age: 73 y; Race: White; Weight: 62 Kg; Height: 1.52 m; Biotype: Athletic; Date: 09/03/1995.

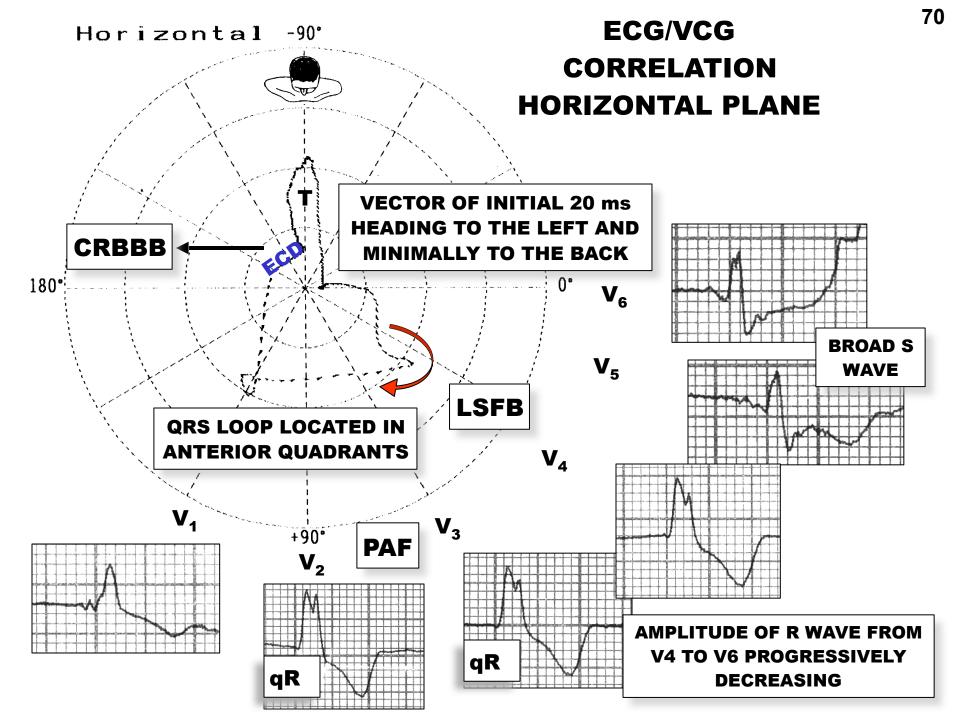


Clinical diagnosis: chronic chagasic cardiomyopathy, mixed form with CHF and dromotropic.

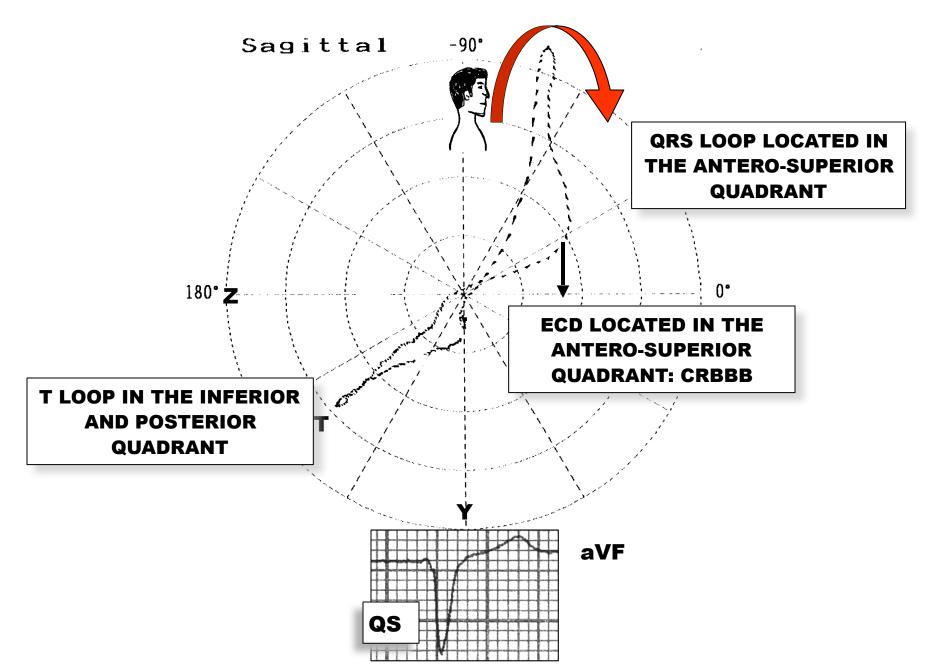
ECG diagnosis: CRBBB + LAFB + PAF: LSFB: Trifascicular block. DI and aVL R pattern: CRBBB "masked standard". Due to the high degree of LAFB, the S wave disappears in DI and aVL, resembling a CLBBB.

## **ECG/VCG CORRELATION FRONTAL PLANE**





## **ECG/VCG CORRELATION RIGHT SAGITTAL PLANE**



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