

## Ambulatory ECG Monitoring

EZecg

Patient Name	Patient ID	Date of birth	Gender	Primary Indication
Texas9, 077		06-14-1971 (46)	Female	---

Prescribing Clinician	Location	Start Date	End Date
Dr. Smith	Eastlake	11/13/2017 10:00:00	11/20/2017 09:55:06

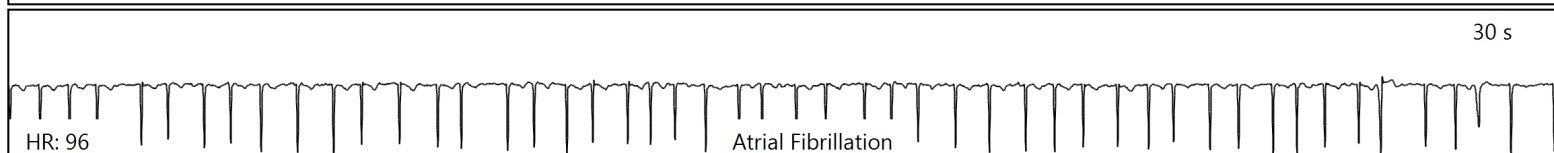
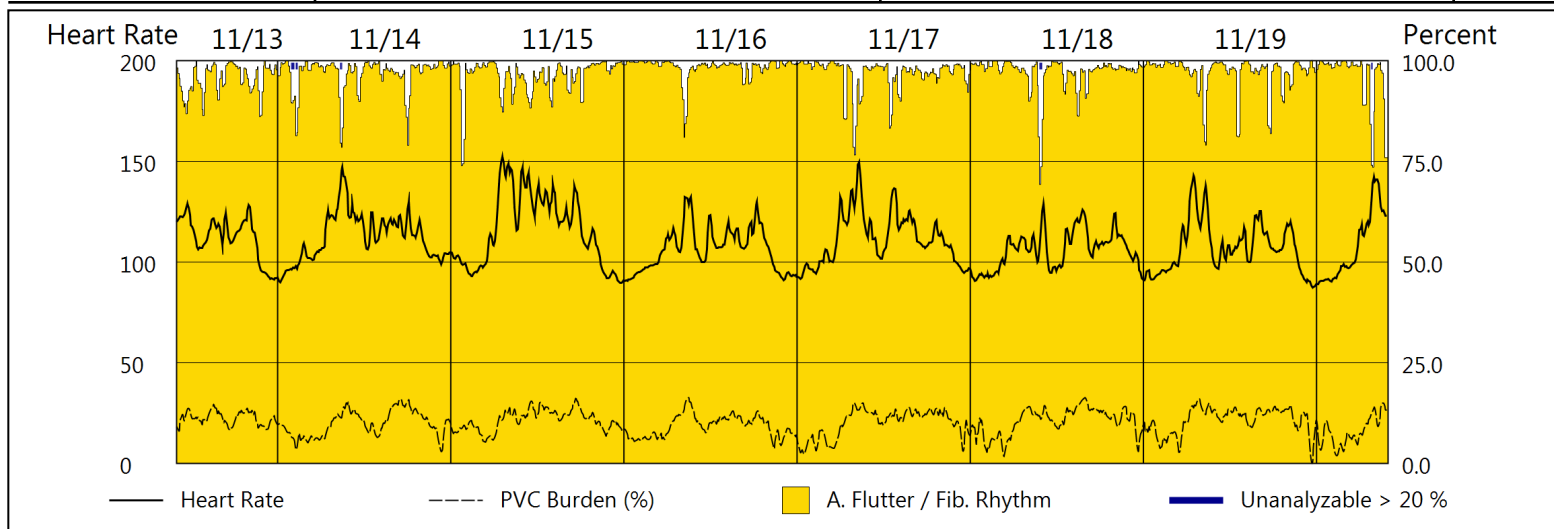
Wear Time: 6d 23h 55m    Percent Analyzable: 96.1%    Patient Triggered Events: 1

Sinus Rhythm: <0.1%			Awake (108h 35m)			Sleep (52h 48m) [23:0 - 7:0]			Total
Avg HR	Range		HR<50 (%)	HR>100 (%)	PVC (%)	HR<50 (%)	HR>100 (%)	PVC (%)	PAC
Total	112	81 - 191	-	3	0	-	1	0	0.2%
Awake	112	96 - 191	PAC (%)	VBi/Trigem (%)	Pause (# - Max)	PAC (%)	VBi/Trigem (%)	Pause (# - Max)	PVC
Sleep	109	81 - 153	0	0	-	0	-	-	0.2%

Runs (>3 Beats)			Count	Avg HR	Avg Dur(sec)	Count	Avg HR	Avg Dur(sec)	
Supraventricular:			27	169	2	1	186	1	0.0%
Ventricular:			17	141	2	3	127	2	0.0%

Atrial Flutter / Fibrillation: 100.0% (6d 18h 29m)

	Avg HR	Range	HR<50 (%)	HR>100 (%)	PVC (%)	HR<50 (%)	HR>100 (%)	PVC (%)	PVC
Total	106	75 - 183	-	85	12	-	40	8	10.7%
Awake	110	75 - 183	Pause (# - Max)			Pause (# - Max)			
Sleep	98	75 - 130	-			-			



Patient Name: Texas9, 077

Start Date: 11/13/2017 10:00:00, Review date: 02/16/2018, Wear Time: 6d 23h 55m

Primary Indication: ---

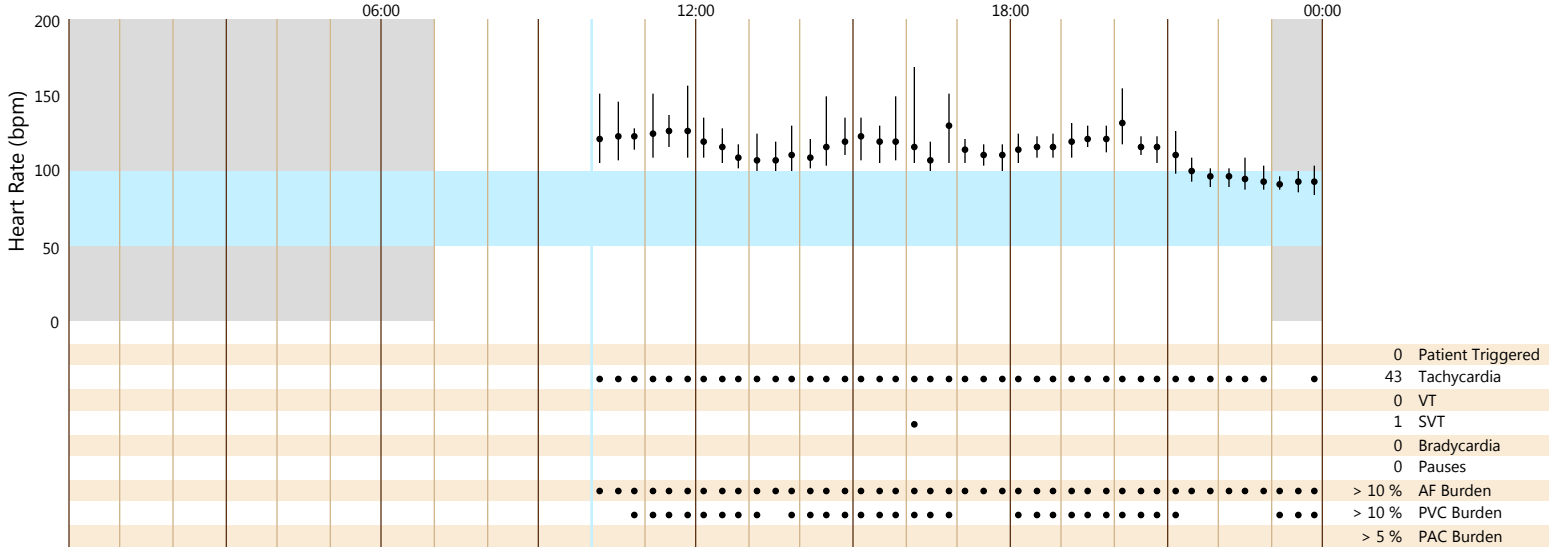
Findings: During Atrial Fibrillation the patient had a min HR of 75, a max HR of 183 and an avg HR of 106. Predominant underlying rhythm was Atrial Fibrillation. 245 Tachycardia runs occurred, the run with the fastest interval lasting 160 beats with a max rate of 191 bpm, the longest lasting 343 beats with an avg rate of 145 bpm. 20 Ventricular Tachycardia runs occurred, the run with the fastest interval lasting 12 beats with a max rate of 166 bpm. 1680 Atrial Fibrillation episodes occurred (100.0 % burden). 28 Supraventricular Tachycardia runs occurred, the run with the fastest interval lasting 5 beats with a max rate of 195 bpm, the longest lasting 11 beats with an avg rate of 185 bpm. Isolated PACs, Couplets, and Triplets were rare (0 to <0.1%). Isolated PVCs were frequent (9.0 %, 73514), Couplets were rare (0.7 %, 5445), and Triplets were rare (< 0.1 %, 324). Bi/Trigeminy occurred (<0.1%). No Bradycardia runs occurred. No pauses occurred. ECG recording and analysis using Cardea SOLO System.

Recommend review of the ECG recording to confirm observations are not due to noise artifacts or automated interpretive errors. If confirmed, consider further testing and consultation with a general Cardiologist or an Electrophysiologist.

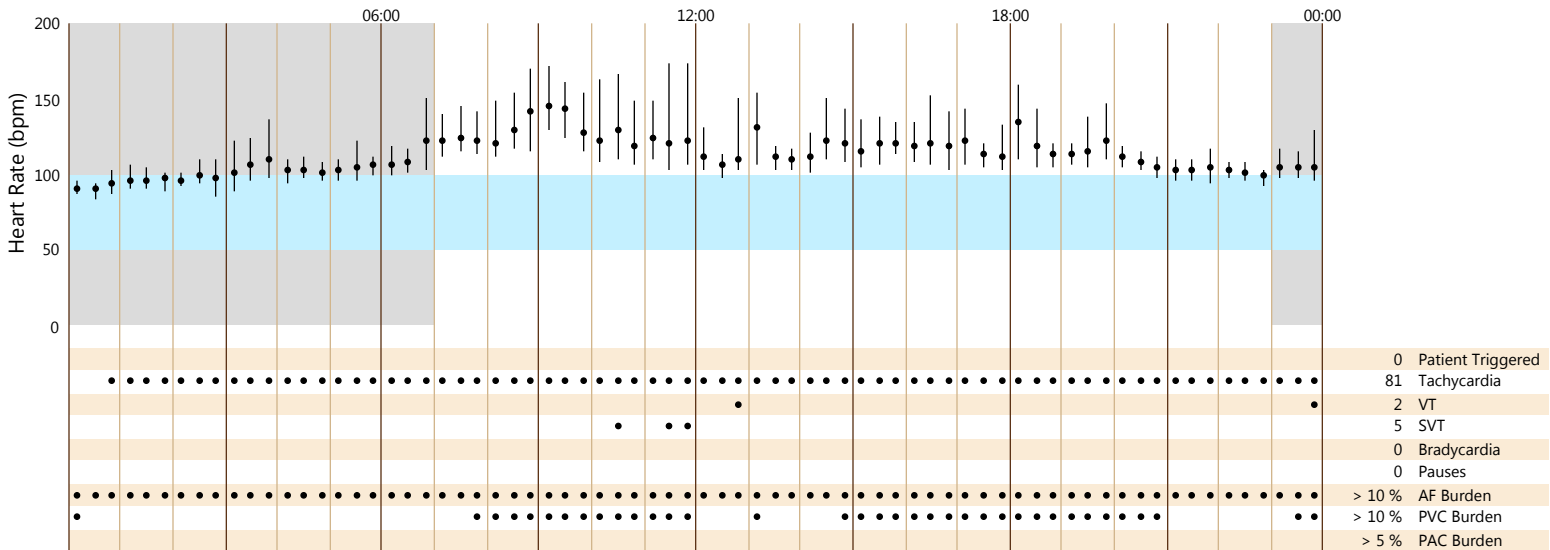
Clinician Signature

Overview

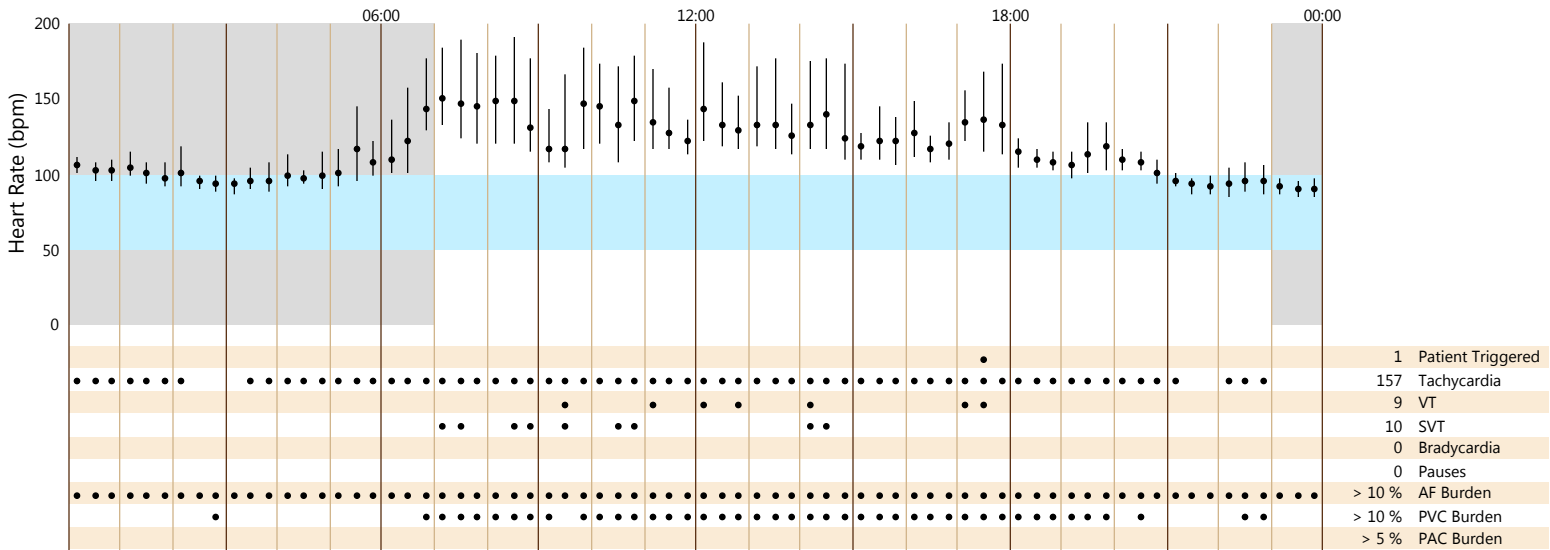
Day: 1 11/13



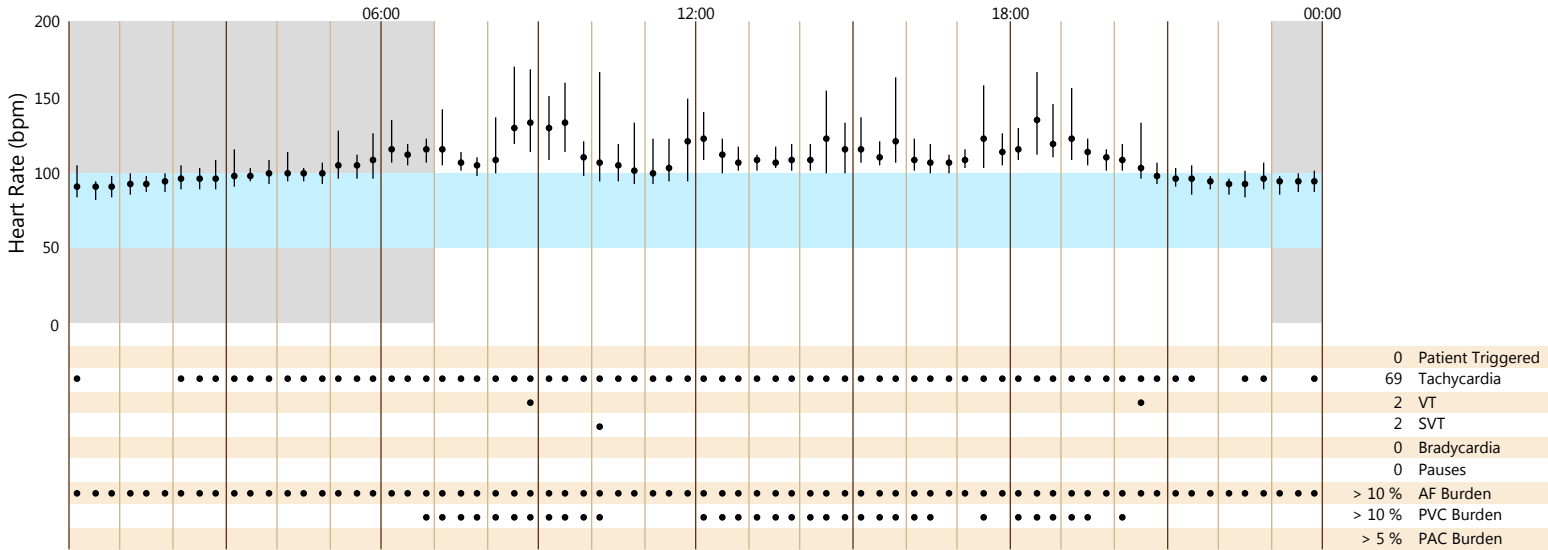
Day: 2 11/14



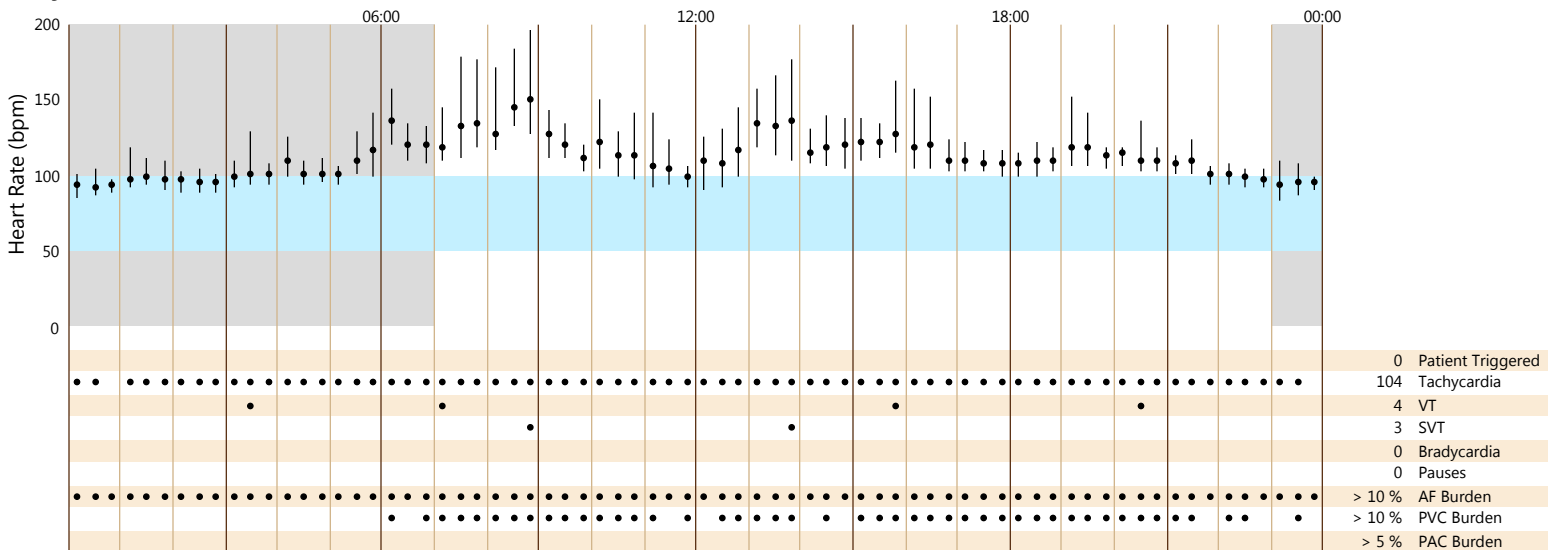
Day: 3 11/15



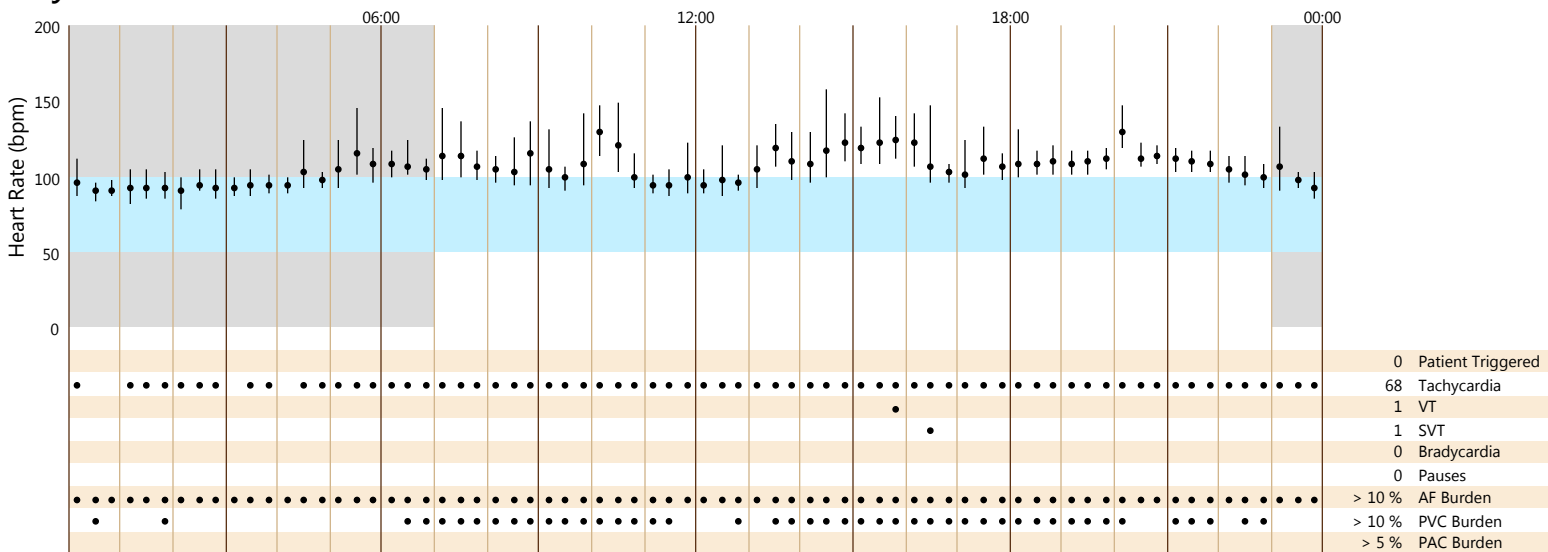
Day: 4 11/16



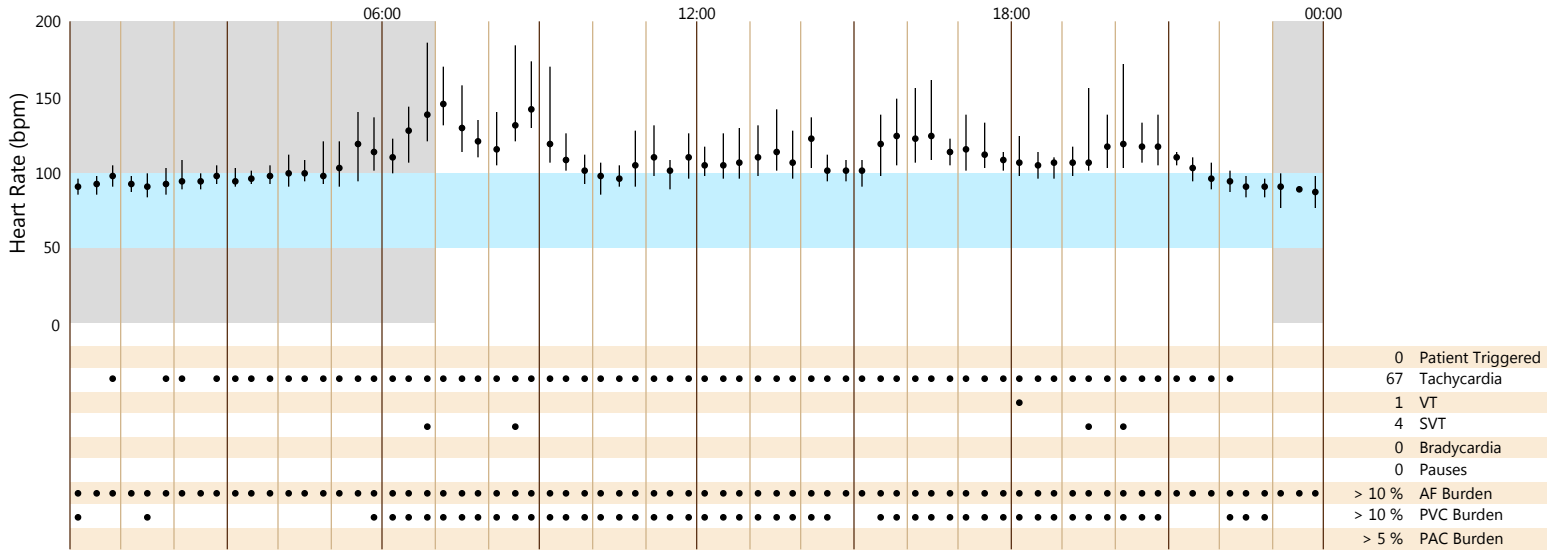
Day: 5 11/17



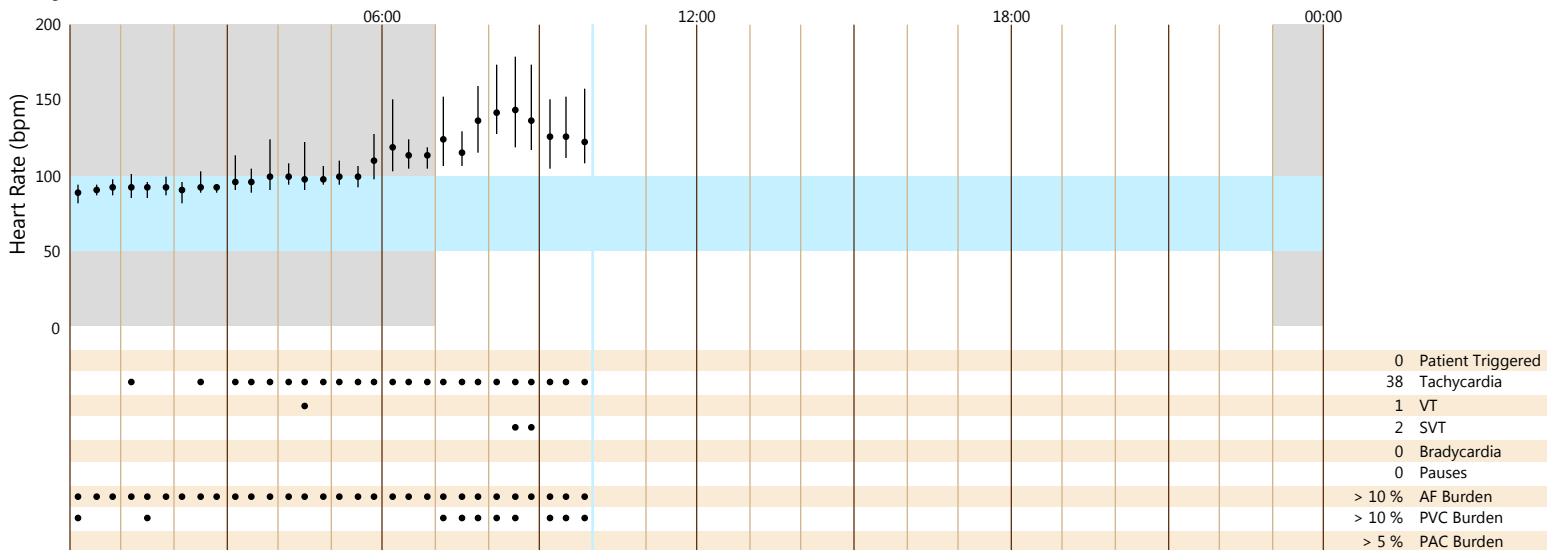
Day: 6 11/18



Day: 7 11/19

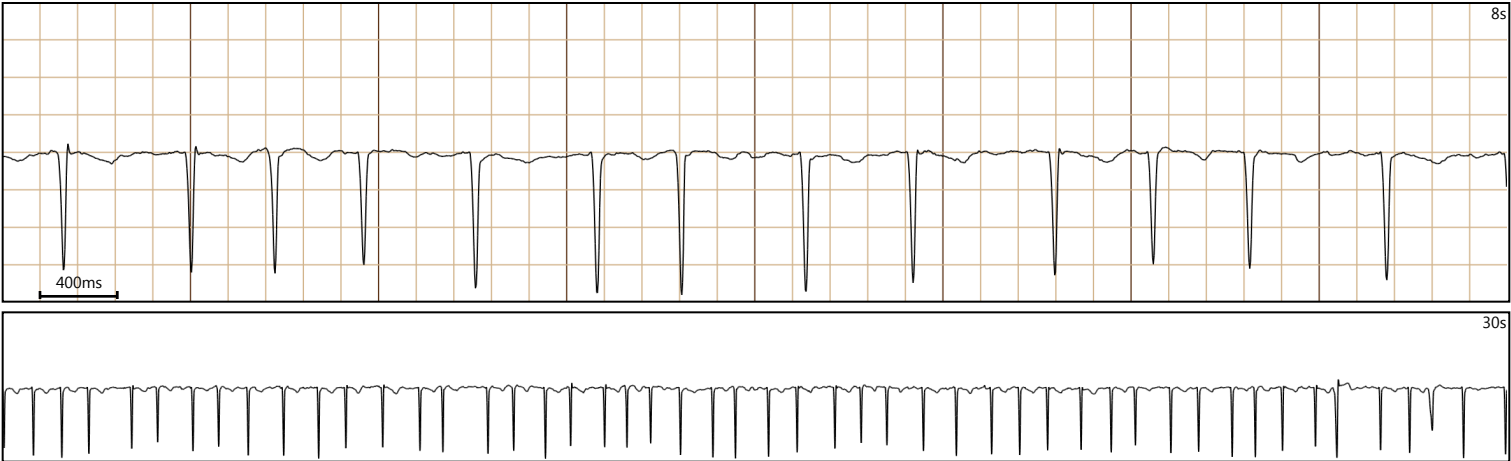


Day: 8 11/20

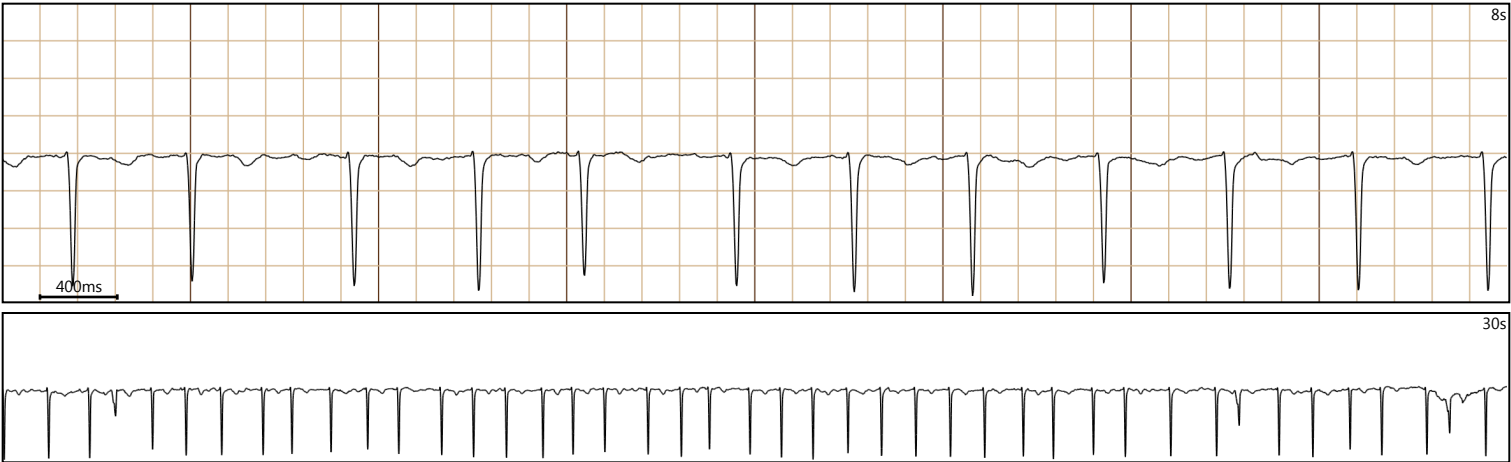


AF Burden

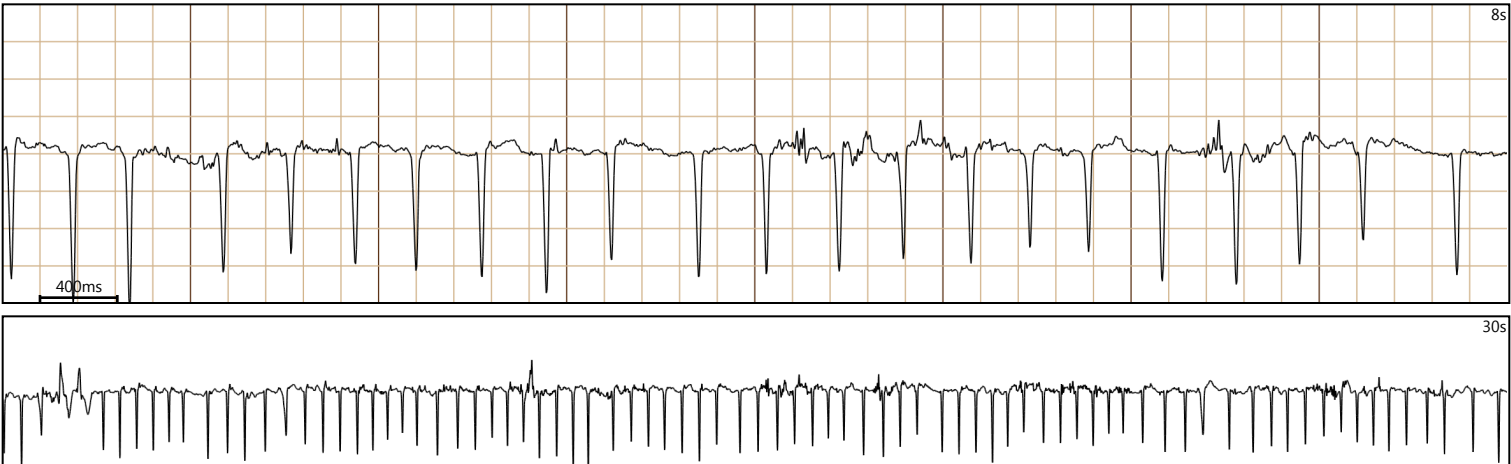
Longest AF Episode	# Beats	Duration	Episode Average	Range	Pt Trig?
11/16/2017 20:31:28	7138	1h 15m 51s	96 bpm	76-130 bpm	NO



AF With Slowest Average Heart Rate	# Beats	Duration	Episode Average	Range	Pt Trig?
11/19/2017 23:29:50	3580	46m 48s	85 bpm	75-102 bpm	NO

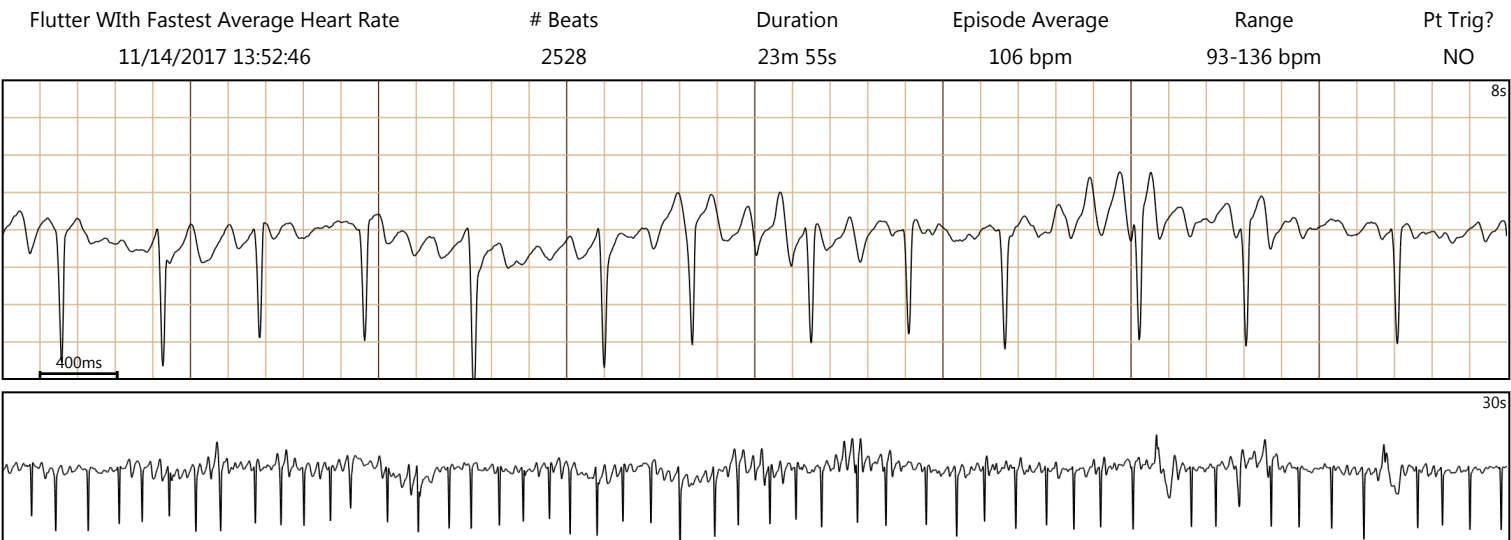
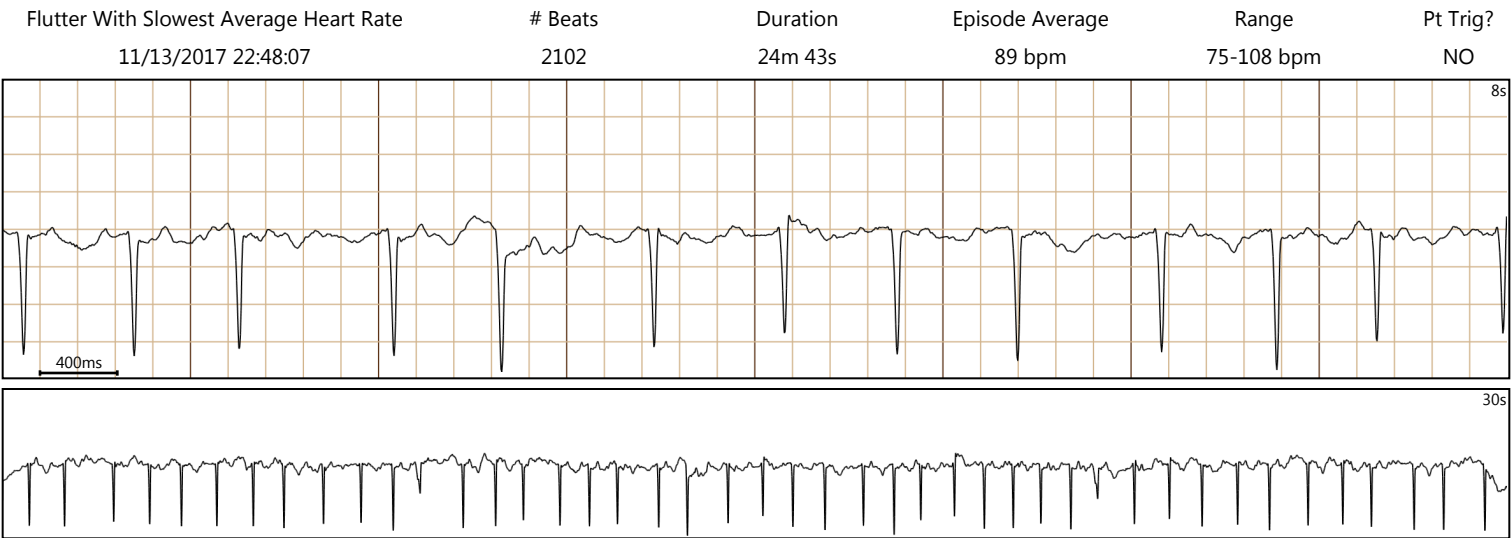
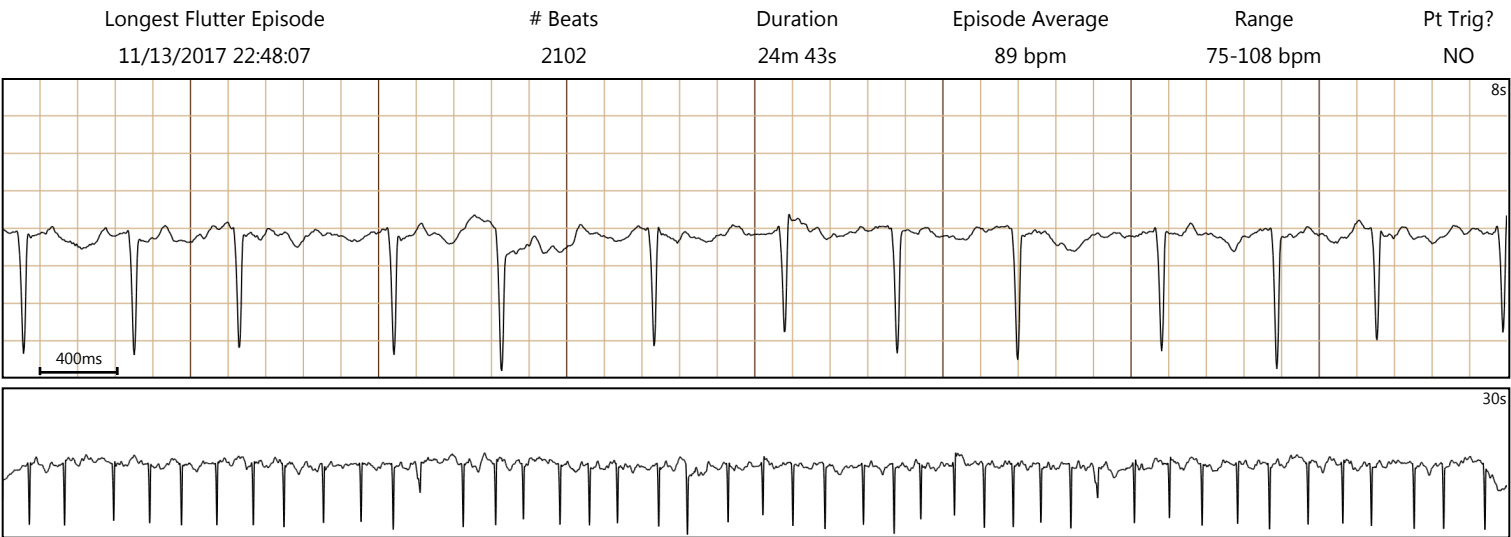


AF With Fastest Average Heart Rate	# Beats	Duration	Episode Average	Range	Pt Trig?
11/15/2017 08:37:47	115	43s	162 bpm	145-183 bpm	NO



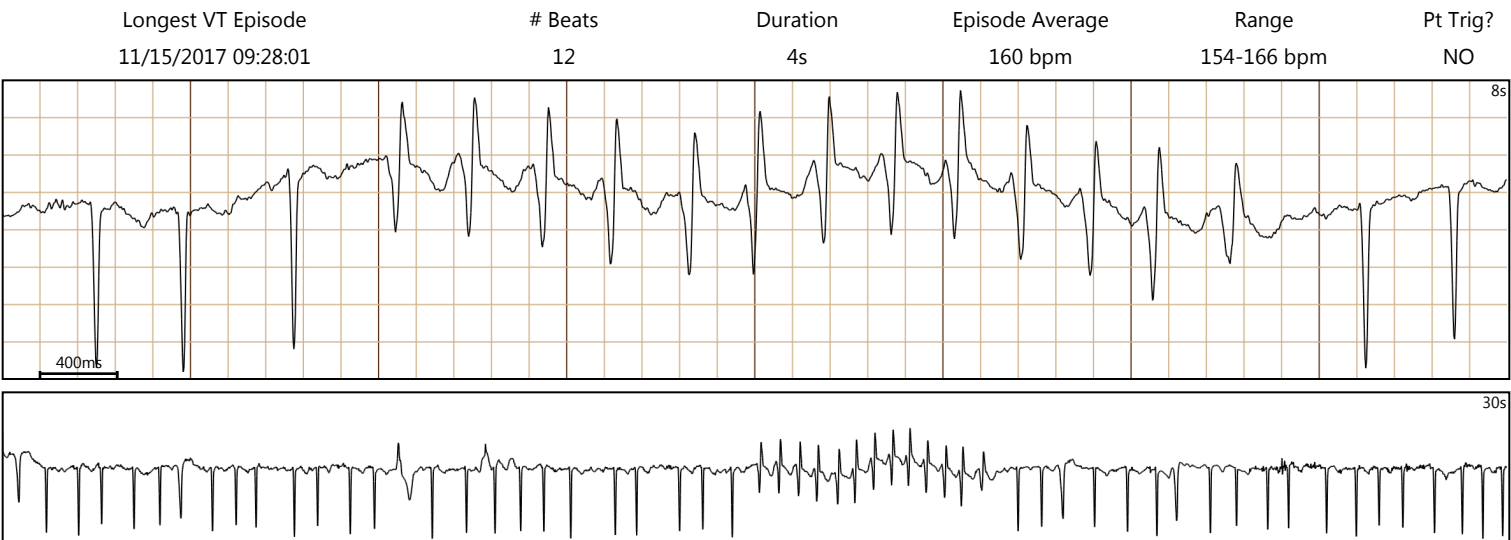
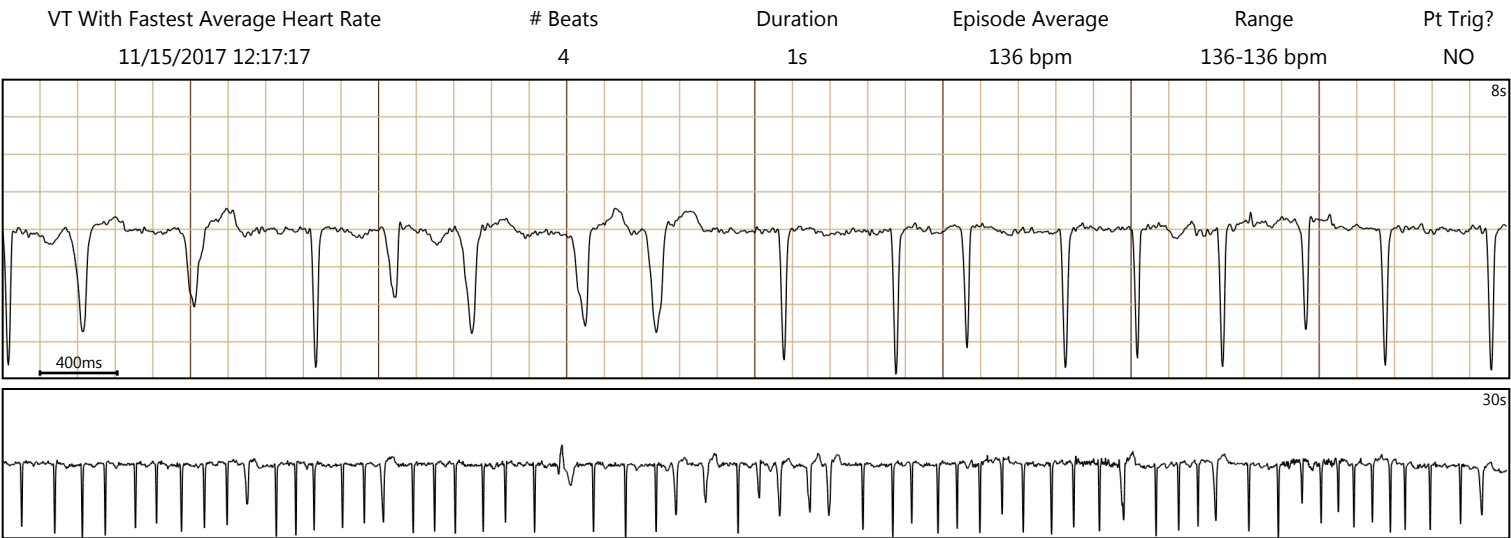
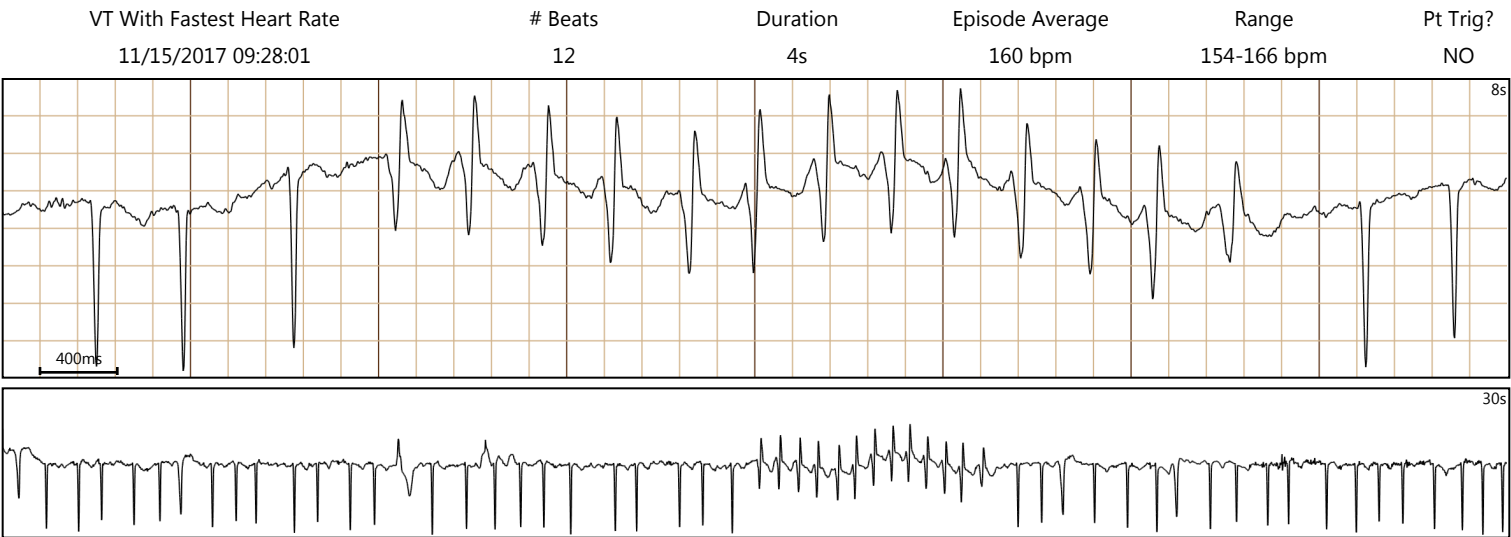
If P waves are seen on these strips, a complex atrial rhythm could be falsely identified as Atrial Fibrillation (AF). If fibrillation is present on some of the strips and P waves seen on others the AF burden could be less than reported. In either case, the ECG data should be carefully reviewed in Trace Viewer. Complex atrial rhythms can be precursors to AF.

# Atrial Flutter Burden



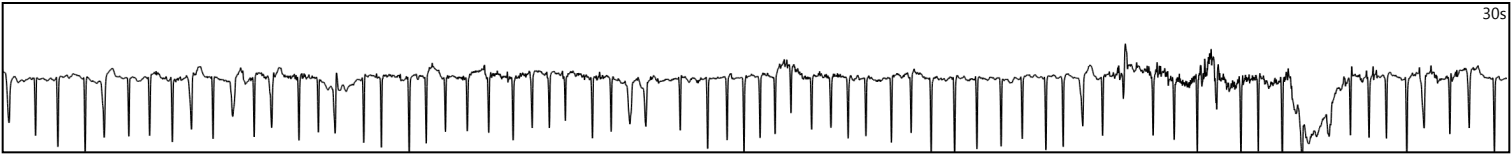
If atrial flutter waves are NOT seen on these strips, a complex atrial rhythm could be falsely identified as Atrial Flutter. If flutter is present on some of the strips and not on others the burden could be less than reported. In either case, the ECG data should be carefully reviewed in Trace Viewer. Complex atrial rhythms can be precursors to Atrial Fibrillation.

# VT Episodes



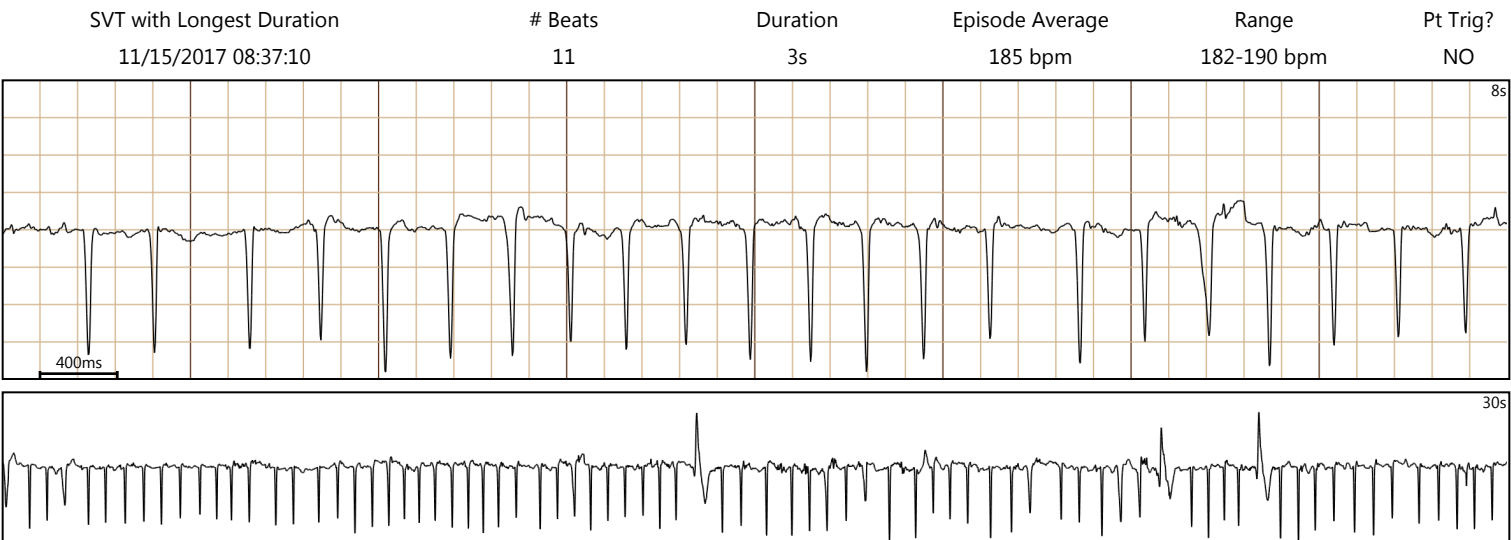
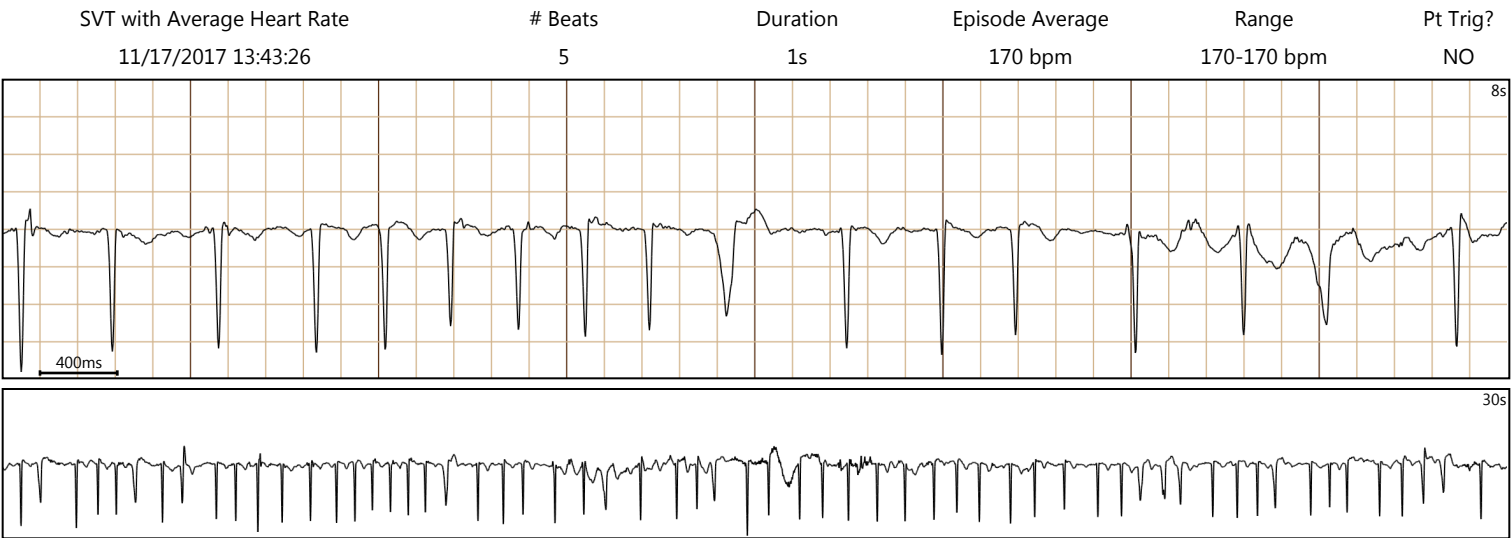
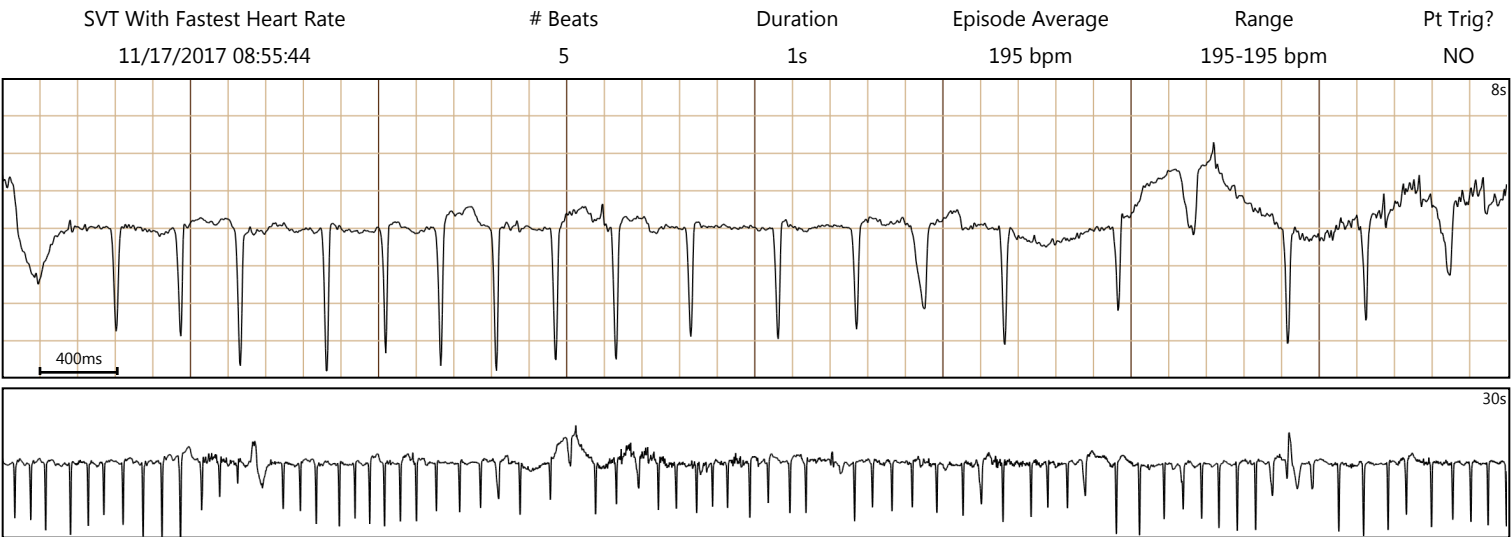
# Patient Triggered Events

Patient Triggered #0	Heart Rate	Finding
11/15/2017 17:26:09	137.2	YES





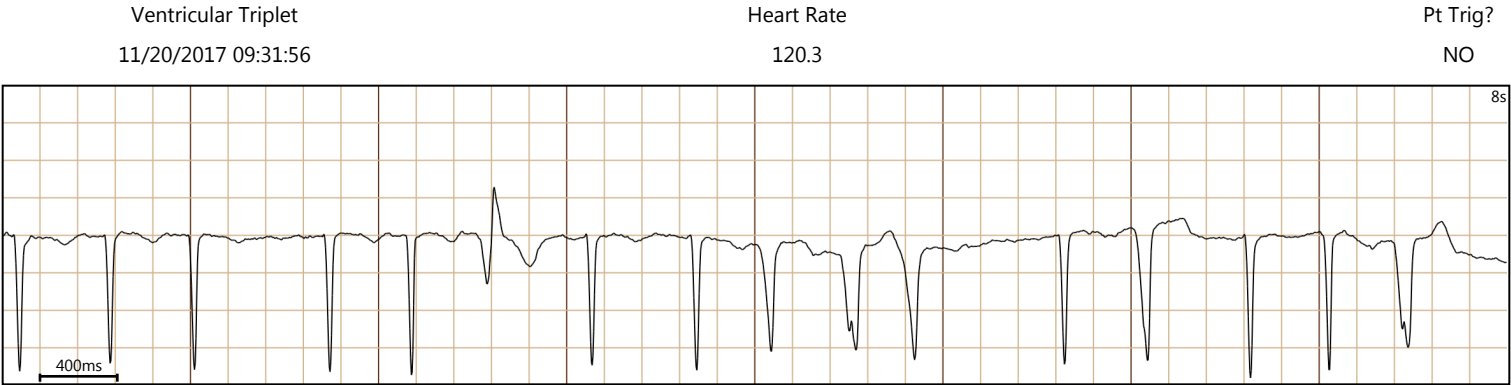
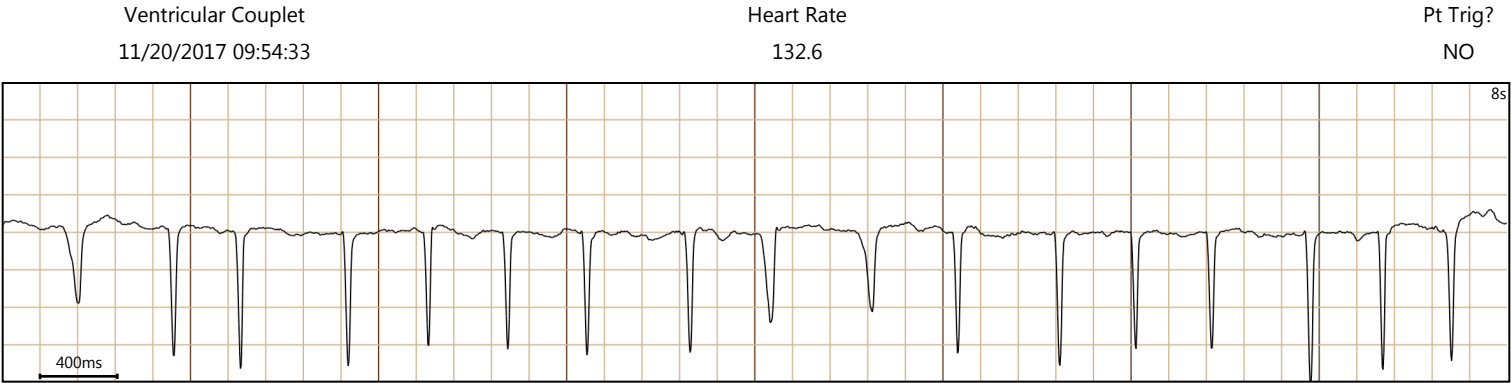
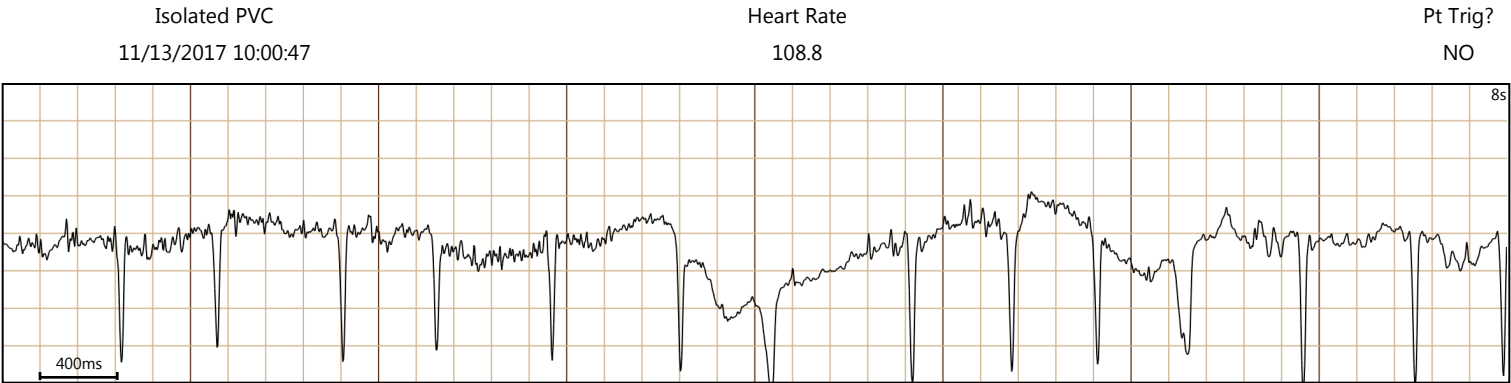
# Supraventricular Tachycardia Episodes



# PVCs Couplets Triplets

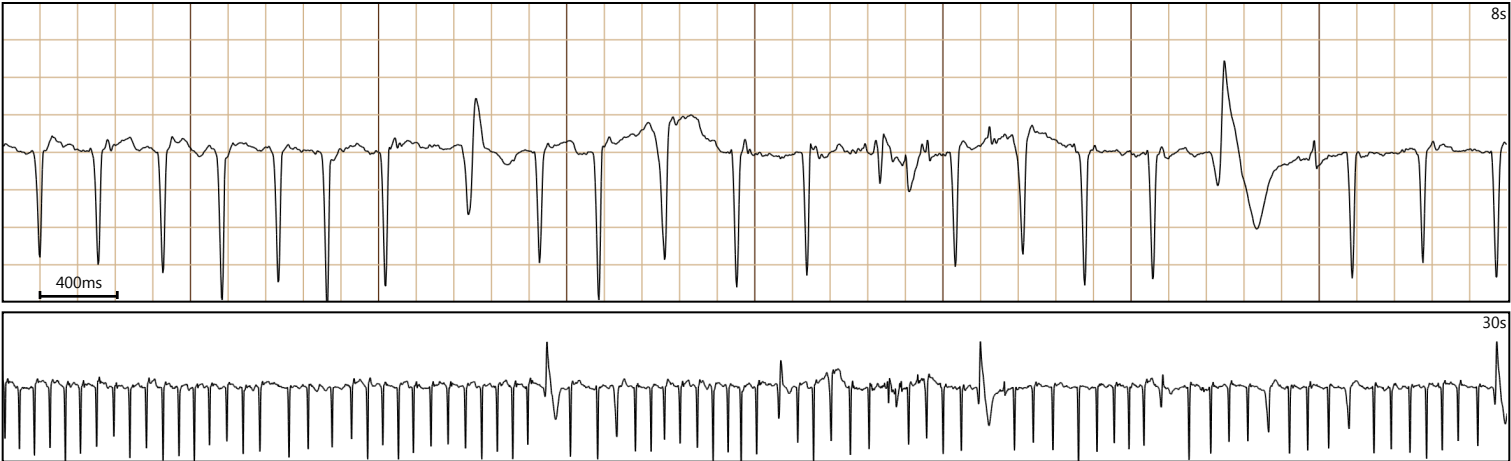
## Ventricular Ectopics

Isolated Ectopics	Couplets	Triplets/Runs
9.0 %	0.7 %	< 0.1 %
73514, Frequent	5445, Rare	324, Rare

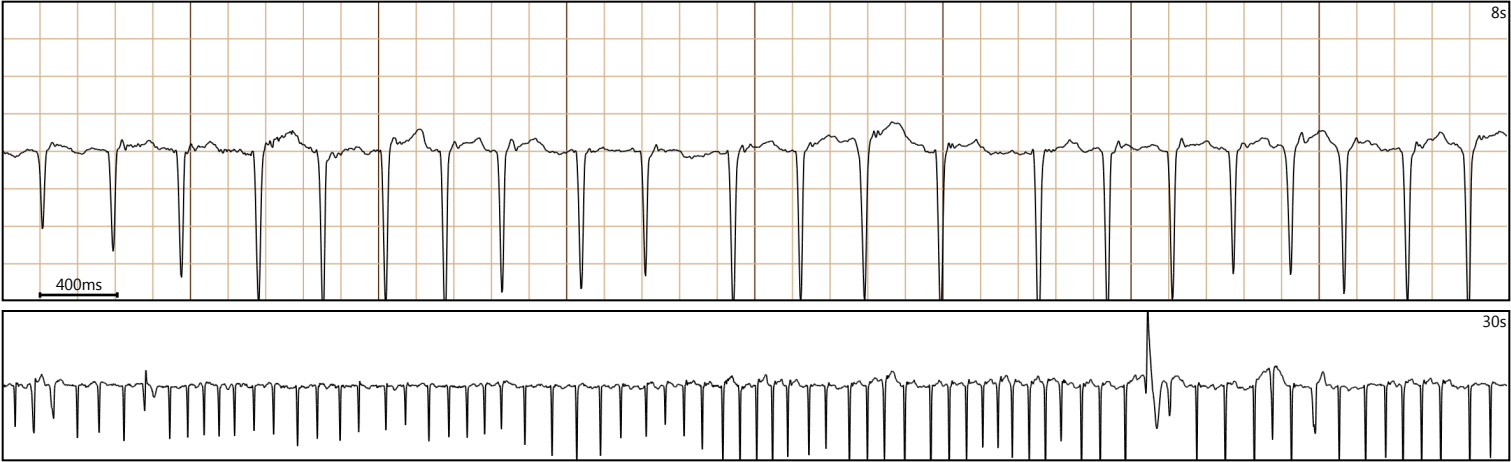


# Tachycardia Episodes

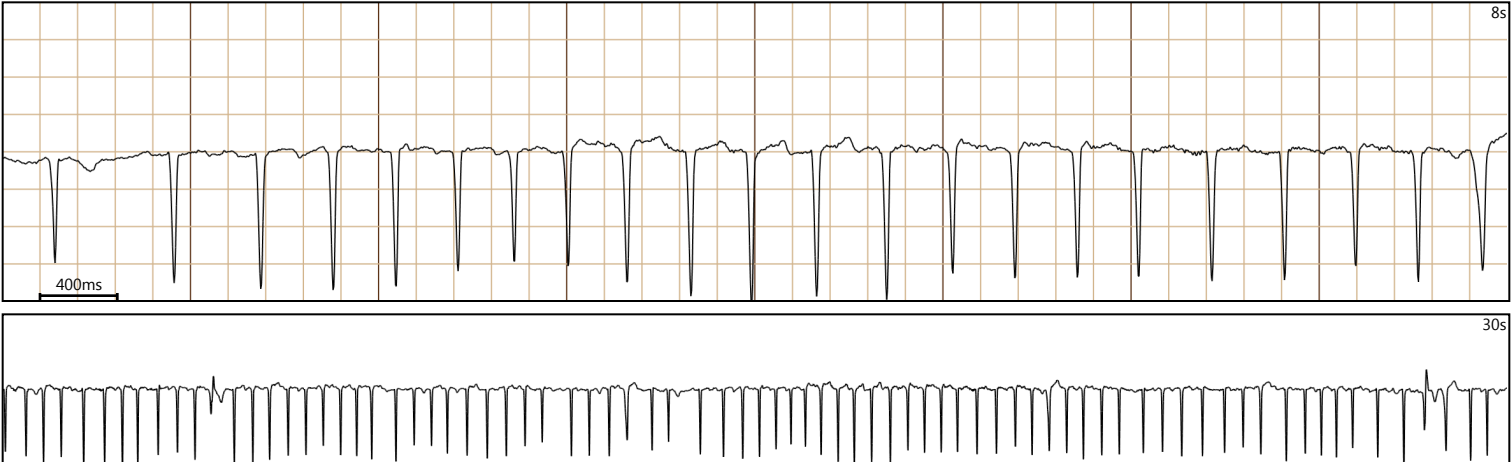
Tachycardia With Fastest Heart Rate	# Beats	Duration	Episode Average	Range	Pt Trig?
11/15/2017 08:39:47	160	1m 0s	157 bpm	147-191 bpm	NO



Tachycardia With Fastest Average Heart Rate	# Beats	Duration	Episode Average	Range	Pt Trig?
11/17/2017 07:39:45	95	40s	140 bpm	128-179 bpm	NO



Longest Tachycardia Episode	# Beats	Duration	Episode Average	Range	Pt Trig?
11/15/2017 14:23:26	343	2m 21s	145 bpm	126-177 bpm	NO

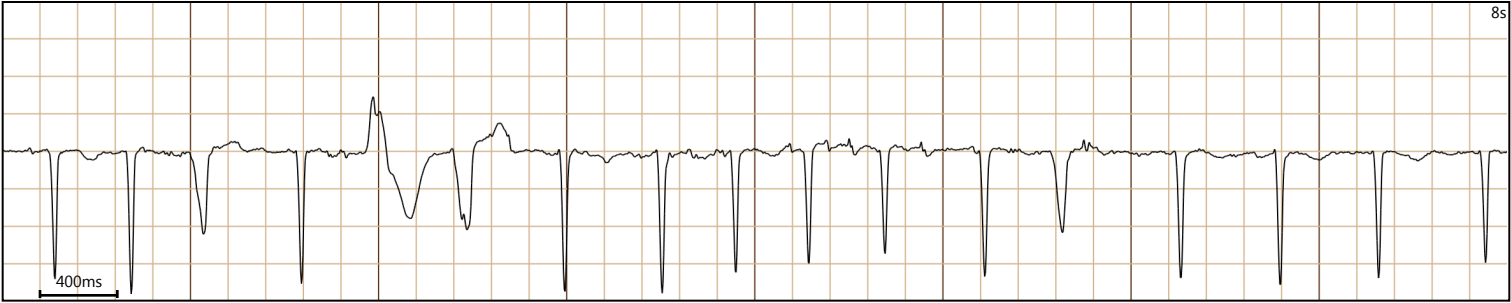


# Sample Rhythm Strip

Sample Rhythm Strip #0  
11/20/2017 09:40:58

Heart Rate  
116.7

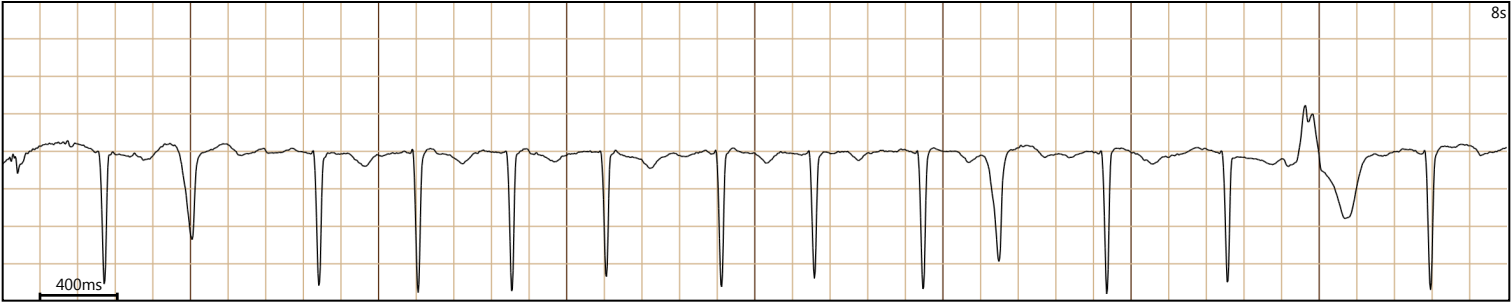
Pt Trig?  
NO



Sample Rhythm Strip #1  
11/19/2017 13:39:41

Heart Rate  
103.0

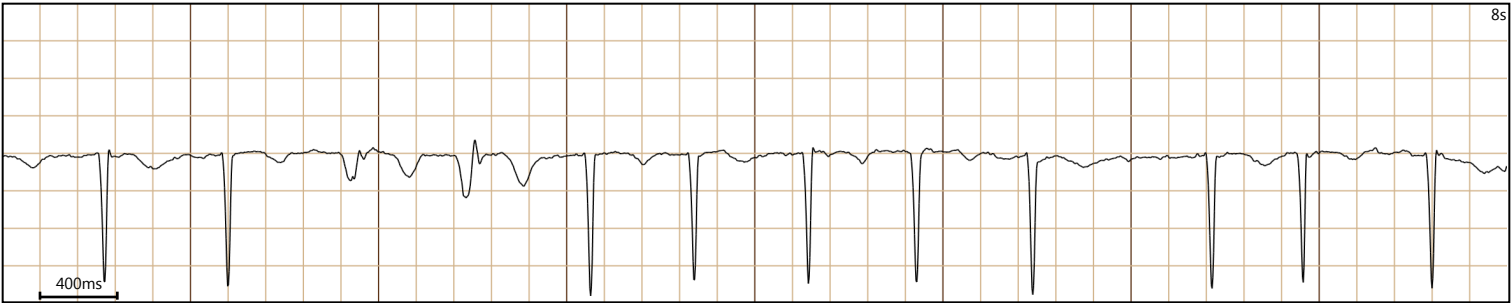
Pt Trig?  
NO



Sample Rhythm Strip #2  
11/14/2017 01:17:53

Heart Rate  
86.8

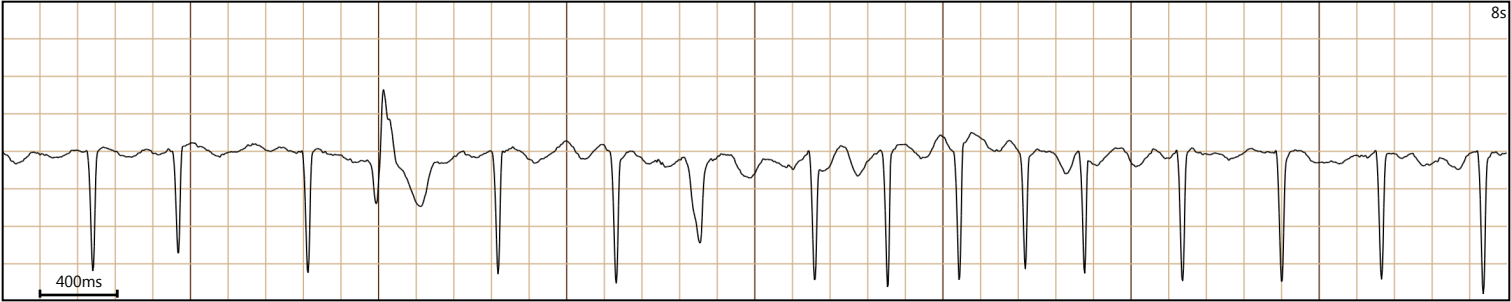
Pt Trig?  
NO



Sample Rhythm Strip #3  
11/13/2017 16:04:01

Heart Rate  
114.2

Pt Trig?  
NO

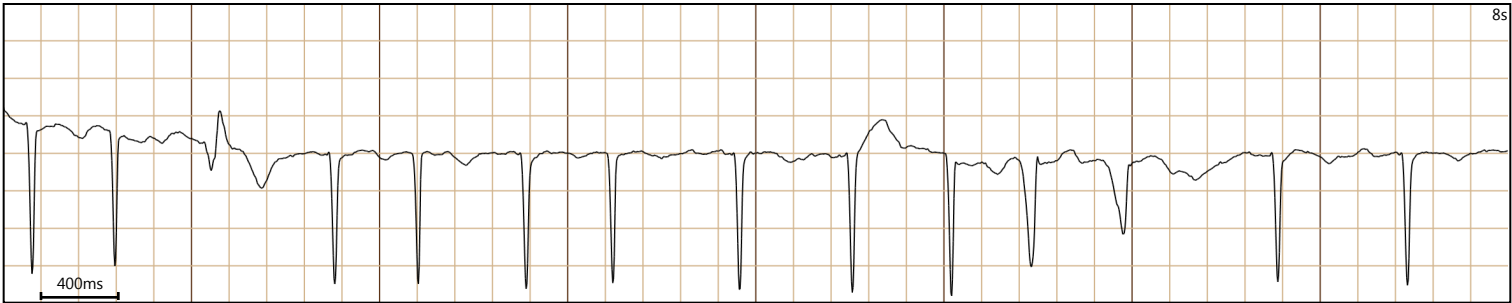


# Sample Rhythm Strip

Sample Rhythm Strip #4  
11/14/2017 06:21:44

Heart Rate  
104.8

Pt Trig?  
NO



Sample Rhythm Strip #5  
11/15/2017 08:39:56

Heart Rate  
158.3

Pt Trig?  
NO

