

SNS COLLEGE OF ALLIED HEALTH SCIENCES

SNS Kalvi Nagar, Coimbatore - 35 Affiliated to Dr MGR Medical University, Chennai



DEPARTMENT OF CARDIAC TECHNOLOGY

PAPER III- BASIC ECG

I YEAR

UNIT II : LEAD PLACEMENTS





LEAD ElectroCardioGram





12 LEAD ElectroCardioGram (ECG)





Aim

To introduce to the student the principles of 12 Lead Electrocardiogram recording and its relationship to the cardiac cycle

12 Lead Machine that gives a 3D perspective. 3 Lead Machine that is used to monitor.





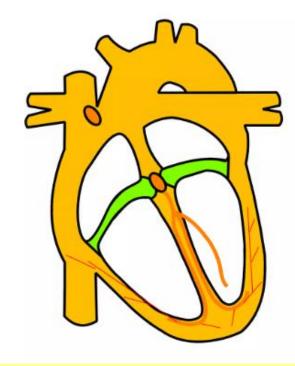
Session Objectives

- To be able to record a 12 lead ECG.
- To be aware of normal ECG values.
- To be able to perform a basic ECG interpretation. (Self Directed Element)





The Heart

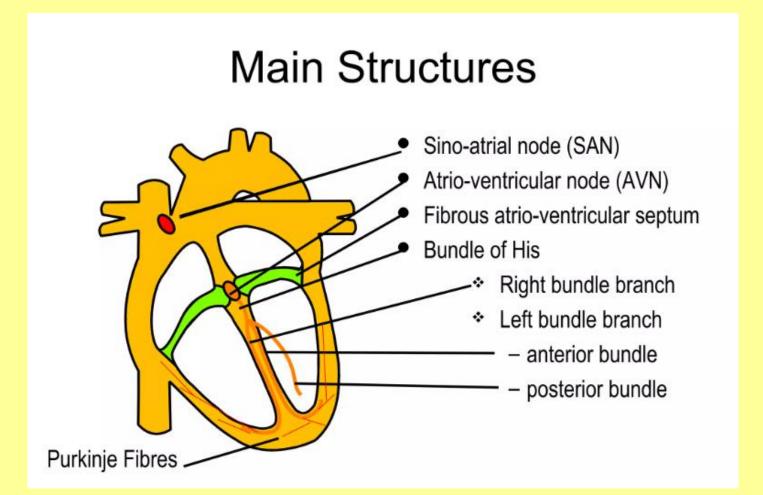


All heart muscle is capable of conducting an electrical impulse and initiating a spontaneous electrical discharge.

The 12 lead ECG is a graphical representation of this activity



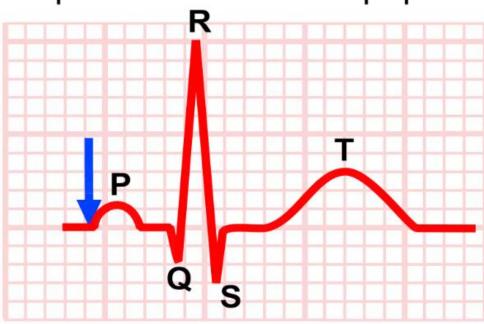








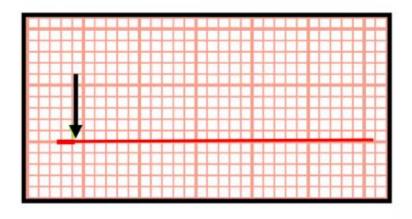
The electrical events of a single cardiac cycle and how it is represented on ECG paper.







The Iso Electrical Line

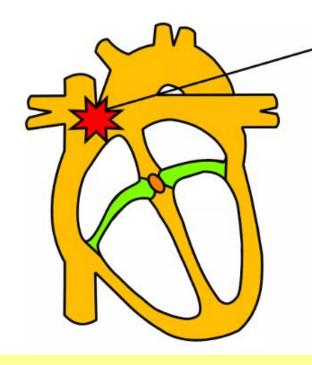


This represents the resting potential of the heart. The electrical events of the cardiac cycle will be represented by deflections away from this line.

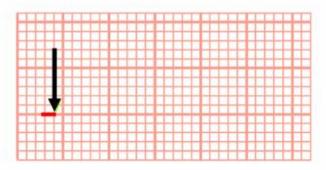




SAN Depolarisation End of Iso Electrical Line



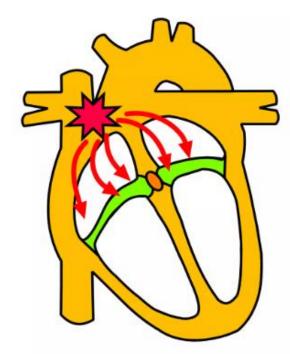
 The events of the cardiac cycle are initiated by depolarisation of the sinoatrial node



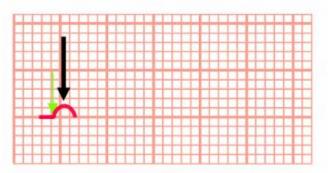




Atrial Depolarsiation (P Wave)



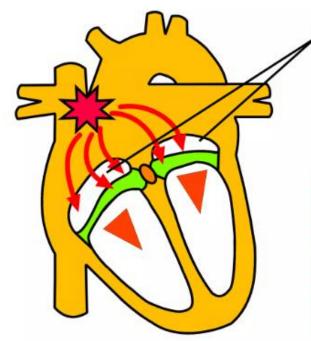
 The wave of electrical depolarisation is conducted through the cardiac muscle of both atria



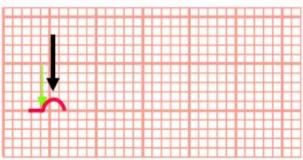




Atrial Contraction (P Wave)



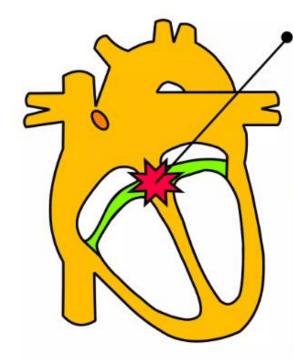
The depolarising wave causes contraction of the atria pushing blood into the ventricles



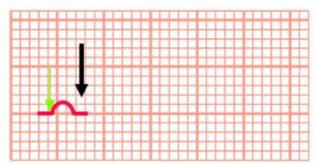




AVN depolarisation (PR Interval)



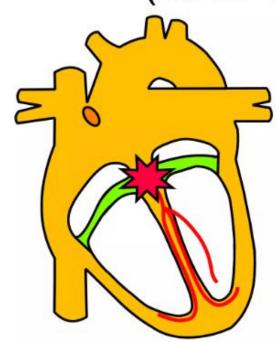
The wave of depolarisation reaches the atrio-venticular node which depolarises and conducts, but slows the wave



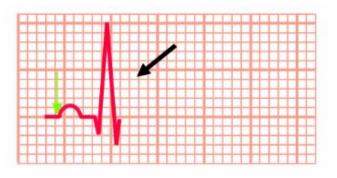




Specialised conducting tissue (QRS Complex)



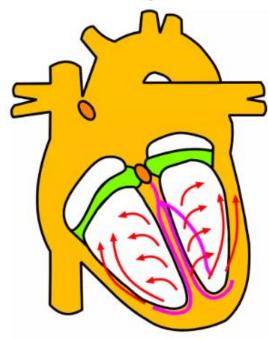
 The AVN conducts the depolarisation to the Bundle of His



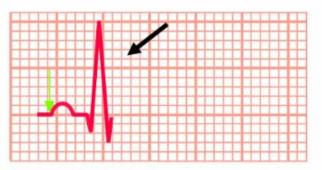




Ventricular depolarisation (QRS Complex)



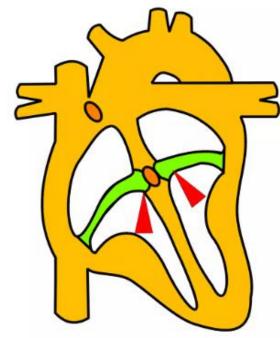
 The wave of depolarisation quickly moves through the specialised conducting tissue



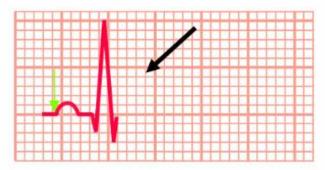




Ventricular contraction (QRS Complex)



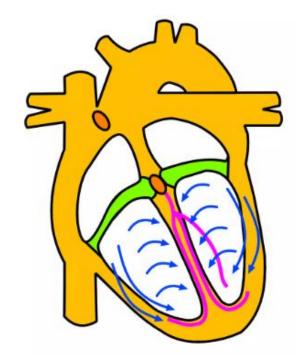
 The co-ordinated, synchronised depolarisation produces an effective contraction of both ventricles



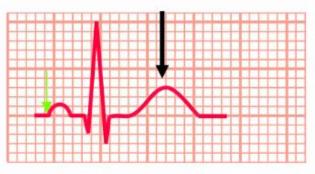




Ventricular Repolarisation (T Wave)



 After depolarisation and contraction the ventricle repolarise, returning to the resting potential.







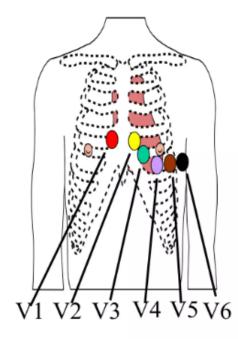
12 Lead ECG

- 12 views of the heart
 - 6 chest leads
 - 6 limb leads
 - Only 10 wires





Lead Position - Chest



- V1 4th ICS RSE
- V2 4th ICS LSE
- V3 midway between V2 & V4
- V4 5th ICS MCL
- V5 Level with V4 AAL
- V6 Level with V4 MAL





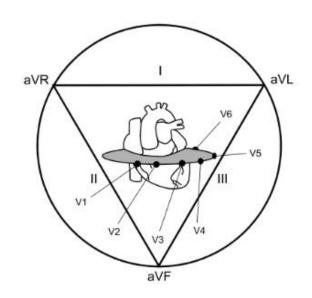
Lead Position - Limb

Positioning the limb leads		 Position of the electrodes for limb leads 	
		 Right wrist 	$\equiv aVR$
RA	LA	 Left wrist 	$\equiv aVL$
Red	Yellow	 Left leg 	$\equiv aVF$
Reu		 Right leg (earth) 	
RL	u		
Black	Green		





Relationship of limb and chest leads



- The chest leads look at the heart across the horizontal plane
- The limb leads look at the heart in a vertical plane
- Leads aVR, aVL and aVF look from three separate directions
- Leads I, II and III are summation of potential differences between limb leads