



SNS COLLEGE OF ALLIED HEALTH SCIENCE, COIMBATORE -35.

(Affiliated to The Tamil Nadu Dr. M.G.R. Medical University, Chennai)

DEPARTMENT OF CARDIAC TECHNOLOGY



PUZZLES FOR THE SUBJECT OF ADVANCED ECG , TMT AND 24 HRS AMBULATORY HOLTER AND BP RECORDINGS

Unit-3

1. What is the most common cause of ventricular premature beats (VPBs)?

- a) Electrolyte imbalances**
- b) Atrial flutter**
- c) Complete heart block**
- d) Pulmonary embolism**

2. Which ECG finding is characteristic of ventricular premature beats?

- a) Narrow QRS complex**
- b) Wide QRS complex with abnormal morphology**
- c) Sawtooth P waves**
- d) Regular PR interval**

3. What is a hallmark feature of supraventricular tachycardia (SVT) on an ECG?

- a) Wide QRS complex**
- b) Narrow QRS complex**
- c) Absent P waves**
- d) Irregular ventricular rate**



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4. Which arrhythmia is characterized by a “sawtooth” pattern on ECG?

- a) Atrial fibrillation**
- b) Atrial flutter**
- c) Ventricular tachycardia**
- d) Sinus tachycardia**

5. What is a common clinical symptom associated with atrial fibrillation?

- a) Regular pulse**
- b) Palpitations**
- c) Bradycardia**
- d) Fixed heart rate**

6. Which of the following is a typical ECG feature of ventricular tachycardia (VT)?

- a) Narrow QRS complex**
- b) Monomorphic wide QRS complex**
- c) Irregularly irregular rhythm**
- d) Prominent U waves**



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7. What is the primary treatment for unstable ventricular fibrillation?

- a) Beta-blockers**
- b) Immediate defibrillation**
- c) Calcium channel blockers**
- d) Anticoagulation therapy**

8. Which of the following is most likely to precipitate supraventricular tachycardia?

- a) Hypothyroidism**
- b) Hyperthyroidism**
- c) Hypokalemia**
- d) Hypernatremia**

9. In atrial flutter, what is the typical atrial rate?

- a) 60–100 beats per minute**
- b) 150–200 beats per minute**
- c) 250–350 beats per minute**
- d) 400–500 beats per minute**



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10. Which ECG finding differentiates ventricular tachycardia from supraventricular tachycardia with aberrancy?

- a) Presence of P waves**
- b) AV dissociation**
- c) Narrow QRS complex**
- d) Regular rhythm**

11. What is a common trigger for ventricular premature beats?

- a) Caffeine consumption**
- b) Hypoglycemia**
- c) Atrial hypertrophy**
- d) Chronic renal failure**

12. Which arrhythmia is associated with an irregularly irregular rhythm on ECG?

- a) Atrial flutter**
- b) Atrial fibrillation**
- c) Ventricular tachycardia**
- d) Sinus arrhythmia**



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13. What is the most serious complication of untreated ventricular tachycardia?

- a) Atrial fibrillation**
- b) Ventricular fibrillation**
- c) First-degree AV block**
- d) Sinus bradycardia**

14. Which medication is commonly used to terminate supraventricular tachycardia?

- a) Amiodarone**
- b) Adenosine**
- c) Lidocaine**
- d) Digoxin**

15. What is a key ECG feature of atrial fibrillation?

- a) Regular QRS complexes**
- b) Absent or fibrillatory P waves**
- c) Sawtooth flutter waves**
- d) Wide QRS complexes**



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16. Which of the following is a risk factor for developing atrial flutter?

- a) Mitral valve prolapse**
- b) Pulmonary hypertension**
- c) Hypocalcemia**
- d) Aortic dissection**

17. What is the primary difference between ventricular tachycardia and ventricular fibrillation?

- a) VT is irregular, while VF is regular**
- b) VT is organized, while VF is chaotic**
- c) VT has narrow QRS, while VF has wide QRS**
- d) VT is benign, while VF is malignant**

18. Which ECG lead is most useful for diagnosing atrial flutter?

- a) Lead V1**
- b) Lead II**
- c) Lead aVR**
- d) Lead V6**



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19. What is a common cause of ventricular tachycardia in patients with structural heart disease?

- a) Myocardial infarction**
- b) Hyperkalemia**
- c) Atrial septal defect**
- d) Hypothyroidism**

20. Which of the following is NOT a typical feature of supraventricular tachycardia?

- a) Rapid heart rate**
- b) Narrow QRS complex**
- c) Wide QRS complex**
- d) Sudden onset and termination**

21. What is the typical ventricular rate in untreated atrial fibrillation?

- a) 60–100 beats per minute**
- b) 100–160 beats per minute**
- c) 200–250 beats per minute**
- d) 300–400 beats per minute**



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22. Which condition is most likely to cause polymorphic ventricular tachycardia?

- a) Long QT syndrome**
- b) Atrial flutter**
- c) Mitral stenosis**
- d) Hyperthyroidism**

23. What is the immediate management for a patient with symptomatic ventricular premature beats?

- a) Electrical cardioversion**
- b) Beta-blocker therapy**
- c) Pacemaker implantation**
- d) Anticoagulation**

24. Which of the following is a characteristic of atrial flutter on ECG?

- a) Irregularly irregular rhythm**
- b) Regular atrial activity with fixed AV conduction ratio**
- c) Wide QRS complexes**
- d) Absent QRS complexes**



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25. What is a potential complication of atrial fibrillation?

- a) Stroke due to thromboembolism**
- b) Ventricular hypertrophy**
- c) Complete heart block**
- d) Sinus tachycardia**

26. Which arrhythmia is most likely to be associated with a “chaotic” baseline on ECG?

- a) Ventricular tachycardia**
- b) Ventricular fibrillation**
- c) Atrial flutter**
- d) Supraventricular tachycardia**

27. What is a common underlying cause of ventricular premature beats in otherwise healthy individuals?

- a) Coronary artery disease**
- b) Idiopathic causes**
- c) Aortic regurgitation**
- d) Pulmonary edema**



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28. Which of the following is a key diagnostic criterion for ventricular tachycardia?

- a) Heart rate less than 100 beats per minute**
- b) Sustained wide QRS complex rhythm**
- c) Presence of flutter waves**
- d) Regular P waves**

29. What is the role of anticoagulation in the management of atrial fibrillation?

- a) To terminate the arrhythmia**
- b) To prevent thromboembolism**
- c) To slow ventricular rate**
- d) To stabilize QRS complexes**

30. Which maneuver is commonly used to terminate supraventricular tachycardia?

- a) Carotid sinus massage**
- b) Defibrillation**
- c) Pacemaker implantation**
- d) Deep breathing exercises**