

Module 4: Part A Lab Practice Workbook

Practice Strips - Answers

1. Rate 125 regular P wave: upright, same PR int: 0.12
QRS: 0.08 ST segment: isoelectric T wave: N QT interval: Interpretation:
sinus tachycardia
Significance: consider causes for tachycardia.
2. Rate 60 irregular P wave: upright, same PR int: 0.28 1st 2 beats, then
0.16 QRS: 0.10s ST segment: isoelectric T wave:
QT interval:
Interpretation: NSR with 1 degree HB
3. Rate 10 regular P wave: upright, same PR int: 0.12
QRS: 0.12 ST segment: isoelectric T wave: inverted? QT interval: difficult
to measure
Interpretation: sinus rhythm
Significance: wandering baseline. Consider causes: lead placement, poor electrode
conduction, movement of chest wall during resps.. change lead placement
4. Rate 93 regular P wave: upright, same PR int: 0.12
QRS: 0.10 ST segment: elevated 3mm T wave: upright QT interval: 0.36
Interpretation: sinus rhythm
Significance: ST seg elevation – myocardial injury/ infarction. Client should be on ACS
pathway.
Intervention: ongoing chest pain or symptoms? Treat symptoms/ check troponins/
5. Rate 85 regular P wave: upright, same PR int: 0.16
QRS: 0.10 ST segment: depressed 1mm T wave: flattened QT interval: 0.40
Interpretation: sinus rhythm
Significance: ST seg depression; is it significant? Is it new? Greater than 1mm =
ischemia. Flat T waves = consider causes... check K levels/ digoxin levels if on digoxin
6. Rate 136 regular P wave: upright, encroaching on preceding T wave.
PR int: 0.12 QRS: 0.12 ST segment: iso T wave: upright
QT interval: 0.24
Interpretation: sinus Tachycardia
Significance: consider causes for tachycardia

7. Rate 79 regular P wave: upright PR int: 0.12 QRS: 0.08
ST segment: iso T wave: peaked QT interval: 0.36

Interpretation: sinus rhythm with peaked T waves

Significance: peaked T's may indicate: elevated serum K levels.. check lytes/
infarction/ischemia

8. Rate 143 regular P wave: upright, same PR int: 0.08
QRS: 0.08 ST segment: iso T wave: upright QT interval: 0.28

Interpretation: sinus tachycardia

Significance: consider causes of tachycardia

9. Rate 88 irregular P wave: upright, same PR int: 0.16
QRS: 0.10 ST segment: iso T wave: upright QT interval: 0.40

Interpretation: sinus rhythm with two multifocal PVC's (premature ventricular
contractions)

Significance: consider causes of PVC's – increase in frequency? Multifocal? Consider
causes. Check lytes/ digoxin levels. Often no treatment and likely benign if infrequent

10. Rate 63 regular P wave: upright, same PR int: 0.16
QRS: 0.10 ST segment: iso T wave: upright QT interval: 0.38

Interpretation: sinus rhythm

11. Rate atrial and ventricular 39 regular P wave: upright, same PR int: 0.12
QRS: 0.06 ST segment: iso T wave: upright QT interval: 0.48

Interpretation: sinus bradycardia

Significance: consider causes. Is client symptomatic? Treat only if symptomatic.

12. Rate atrial and ventricular 75 regular P wave: upright, same PR int: 0.18
QRS: 0.08 ST segment: iso T wave: upright QT interval: 0.40

Interpretation: sinus rhythm with one PAC (premature atrial contraction)