

Interpreting stress ECGs

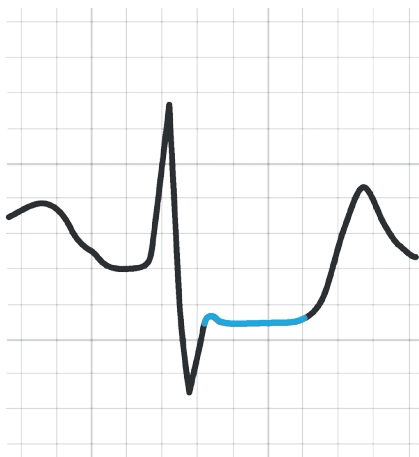
REPORTING ECG RESULTS

We should report stress test results in a succinct, yet informative manner. One very important piece of the report is whether the test is positive or negative for myocardial ischemia. This is often the main reason for doing a stress test. However, this is only a part of the more complete story that should be told.

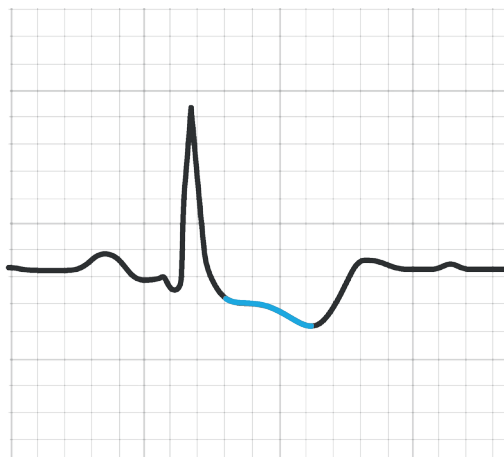
ST segment changes

Did the ST segment change in any leads? If so, how much did the ST segment change? What type of ST depression was observed? Greater than or equal 1 mm (0.1 mV) of horizontal or downsloping ST segment depression is the usual criterion for a positive test. With horizontal ST depression

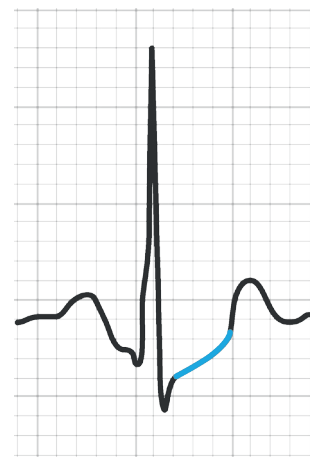
the ST segment is basically flat. Downsloping ST segment depression becomes more depressed over the length of the ST segment while upsloping ST segment depression becomes less negative. Many authorities only consider horizontal or downsloping ST depression indicative of a "positive" test.



Horizontal



Downsloping



Upsloping

Which leads?

It is also important to report where (which leads) the ST changes were. List the leads using "groupings" (lateral, inferior leads, etc.) or simply list the leads (II, III, aVF or I, aVL, V5, V6, etc.).

Were there any arrhythmias?

Describe arrhythmias and when they occurred. For example, "occasional multiform PVCs during recovery", "10 beat run of ventricular tachycardia at max", and so on.