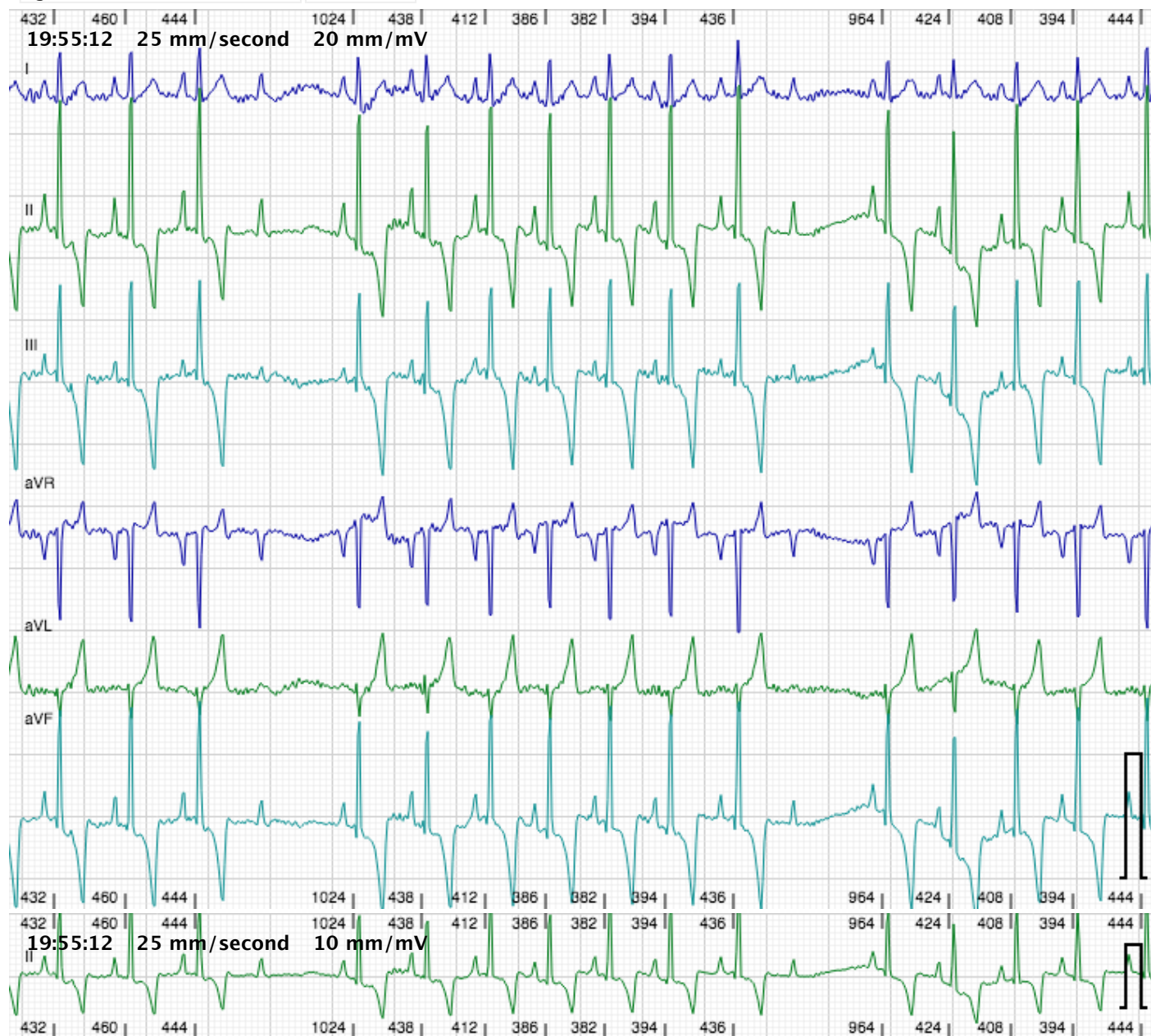


Type: Rest ECG **Date:** 20/01/2019 19:54:25 **Duration:** 00:01:45

Patient name:		Weight:	7.5 kg	Species:	Dog
ID:	112995	History		Breed:	
Email:		Medications:		Owner:	
Phone Number:		Code-procedure		Spayed/Neutered	No
Sex:	M				
Age:	6				



Report / Conclusion:

A detailed analysis of 6 different leads was performed.

Heart rate and rhythm, measurable intervals and amplitudes, and deflection morphology were all examined and revealed the following data:

HR=115-143bpm

PR=95-160ms

QRS=45ms

R=1.2mV

QT=205ms

The heart rhythm is sinus rhythm, sinus arrhythmia and second degree Mobitz type 1 AV block.

Conclusions and recommendations:

rule out any intoxication caused by cardiac medications of the owners (digoxin/ beta blocker etc)

This ECG by itself should not cause weakness.

The conduction disturbance may be transient or may be the beginning of a degenerative AV node problem. with higher degree of AV block (type 2 or third degree) we do expect clinical signs of weakness / syncope.

At this stage- if no other problem co-exists, repeat ECG in a few days, for a longer period of time to see if there is truly worse AV block occasionally or not. If there is a higher AVB occasionally - a full cardiac evaluation is recommended.

If ECG is the same - try to elevate HR with theophylline for 1 week and recheck HR and clinical signs

Dr Yael Golani ACVIM residency trained – cardiology

Aug 13, 2019