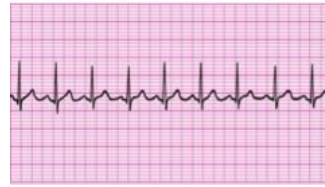


1. **normal sinus rhythm** heart rhythm originating in the sinoatrial node with a rate in patients at rest of 60 to 100 beats per minute



2. **Sinus Arrhythmia** Appearance is ALMOST NORMAL: Respiratory - Circulatory interaction Rate INCREASES with INSPIRATION (IN=IN)



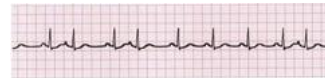
3. **Sinus Bradycardia** <60 normal sinus rhythm



4. **Sinus Tachycardia** >100 (100-150) normal sinus rhythm



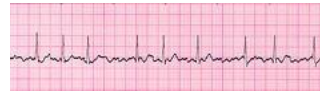
5. **Premature Atrial Contraction (PAC)** Heart Rate: Depends on underlying rhythm
Regularity: Interrupts the regularity of underlying rhythm
P-Wave: can be flattened, notched, or unusual. May be hidden within the T wave
PRI: measures between .12-.20 seconds and can be prolonged; can be different from other complexes
QRS: <.12 seconds



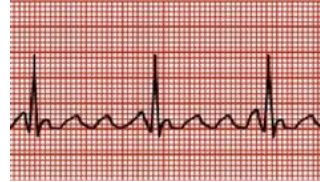
6. **Sinus Arrest/Pause** - SA node doesn't fire
- notice absence of P-wave for a complete cycle (a missed cycle)
length of pause ` multiple of normal rate (block)



7. **Atrial Fibrillation (A-Fib)** an irregular and often very fast heart rate originating from abnormal conduction in the atria



8. **Atrial Flutter** irregular beating of the atria; often described as "a-flutter with 2 to 1 block or 3 to 1 block"



9. **Junctional Rhythm** 40-60 Regular!
- impulse from AV node w/ retro/antegrade transmission
- P wave often inverted/buried/follow QRS
- slow rate
- narrow QRS (not wide like ventricular)



10. **Junctional Tachycardia** >60 bpm (ms. K: 150-250)
- KEY: will be regular (consistent)
- AV junction produces a rapid sequence of QRS-T cycles
- p-wave often inverted/buried/follow QRS



11. **Premature Junctional Contraction** Inverted p wave or hidden p wave
PRI < 0.12 or none
Normal QRS



12. **Supraventricular Tachycardia (SVT)** an abnormal heart rhythm arising from aberrant electrical activity in the heart; originates at or above the AV node

