# Main tools for ECGLab

Made by: Carol wen



# Basic edit tools

01

## 1.Template classification--- auto classification and manual classification



First classification

Secondary classification

The software classify QRS into different folder according to the shape and you can check them from vertical and horizontal direction at the same time, also you can double click and edit in the secondary classified folder if there are too many numbers.

classify the same shape and make batch audit

Principle: mark every beat as a point on a graph follow rule bellow, X(n)= interval (n-1 to n) Y(n)= interval (n to n+1)

it will form certain shapes due to different arrhythmias.





X= RR interval before Point

Typical ECG in Lorenz Plot



Sinus rhythm in Lorenz Plot



#### **Different forms of Sinus rhythm in Lorenz Plot**

All scatter plots are located on a 45  $^\circ$   $\,$  straight line and symmetrically distributed.

- **A** Normal sinus rhythm
- **B** Sinus rhythm with Supraventricular premature beats
- **C** Sinus rhythm with ventricular premature beats
- **D** Sinus rhythm with supraventricular premature beats with intraventricular aberrant conduction
- **E** Sinus rhythm with trigeminy of ventricular prematurebeat
- **F** continuous bigeminy of ventricular prematurebeat
- **G** Persistent Atrial Fibrillation
- H Persistent Atrial Flutter
- I Atrial Fibrillation with Ventricular premature beat
- J four quadrant pattern, Atrial Fibrillation with aberrant ventricular conduction
- K Atrial Fibrillation with Atrial Flutter
- L Sinus rhythm with second degree sinoauricular block





#### Typical sinus rhythm with SVE in lorenz Plot



A ~ E---Sinus rhythm with SVE
A --- Fast sinus rhythm with SVE bigeminy
B ---Slow sinus rhythm with SVE bigeminy
F, G, H --- Sinus rhythm with frequent SVE, SVE bigeminy.



#### Typical sinus rhythm with VE in lorenz Plot

A, B, C, E, F, G --- sinus rhythm with frequent VE or ventricular bigeminy;
 G ---Sinus rhythm with VE and SVE;
 H---sinus rhythm with ventricular bigeminy;
 J---Ventricular bigeminy



#### Typical A-fib in lorenz Plot

 $\square$ 

Different forms of Sinus rhythm in Lorenz Plot, looks like a fan

#### **3.Histogram---** Check all kinds of interval according to demand, find artifacts and missed mark



All kinds of histogram according to different statistical methods



RR interval distribution

#### 4. Focus Tool--- Pick out the unusual waveform quickly



Principle: overlap all waveform according to the order of P-QRS-T , so you can pick out the unusual waveform from large amount of beats easily.

#### 5.ST measument--- analysis ST segment



ST-segment changes (elevation and depression)

#### 6.A-Fib/Flut analysis---- check if the patient have A-fib/Flut



# 









#### Principle:

The Horizontal axis represents time and the vertical axis is RR interval value, make all RR interval value as a point and overlap every 5 mins' RR interva in the same vertical value. The distribution density from high to low are expressed with color from red-orange-yellow-green-blue. If there's red line from begin to end, there can be no A-Fib/Flut.

Quick judgement weather the patient have A-Fib/Flut by overview, once confirmed.use the 2 additional tools to pick out short A-Fib/Flut period



# How to use the edit tools

# 1.Check out Artifact



#### Feature

RR interval especially short if it's artifact, check out and delete them.

#### Useful tool 1---- Histogram

R-R interval < 400ms V-N interval < 600ms the V mostly is Artifact S-N interval < 600ms the S mostly is Artifact



#### Useful tool 2----Lorenz Plot

Check the points in the bellow area X&Y<400ms X<600ms & X > Y Y<600ms & Y<X



# 2.Check out mark missing



#### Feature

RR interval especially short if there is mark missing, check out and add the mark

#### Useful tool 1. Histogram & Timing diagram

Check R-R interval from the longest RR period, there can be mark missing.



Histogram



Timing diagram in Lorenz plot tool



# Additional auxiliary tools

# Heart rate turbulance(HRT)



#### Obstructive sleep apnea(OSA)



# Heart rate variability(HRV)



Lorinz plot

Time Domain plots

#### **Circadian Plots**



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23/05 08:10	94	79	81	85 2	5.22	17.74	851 3	37	Time	VLF(ms2)	LF(ms2)	HF(ms2)	TP(ms2)	Ratio S/P	LF(n.u)	HF(n.u)	Normal Beats	Cprraton
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5 08:20	71	67	67	143 4	6.13	17.22	972 3	10	23/05 08:15	1148.58	840.45	1347.62	3383.63	1.48	37.60	60.30	100.000	
18:25	125	51	59	63 1	9.09	23.57	861 3	30	23/05 08:20	1111.30	839.59	1257.72	3214.78	1.55	39.91	59.79	100.000	
16:30	142	54	60	72 2	20.40	27.15	838 3	53	23/05 08:25	2593.21	1135.55	393.97	4122.74	9.46	74.24	25.76	100.000	1/(ms2): 4196.4 UL-(ms2)(0.0001-0.003): 75.6 VLF(ms2)(0.002-0.040): 1946.5 LF(ms2)(0.161-0.150): 1066.3 HF(ms2)(0.151-0.400): 1106.0 HF(ms2)(0.151-0.400): 1106.0
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RR table

Spectral table

24 hour plt

# Vectorcardiogram(VCG)



# T-wave Alternans(TWA)

TWA is a marker for ventricular tachycardia and ventricular fibrillation in ischemic cardiac muscle, TWA is also an indicator of predicting the malignant arrhymia and sudden death.



#### Late potentials(SAECG)



#### Deceleration Capacity of Heart Rate



# THANKS

HPRA Wholesalers authorisation No. W00426/00001 Tel: +353 (0) 1 835 2411 Email: sales@medguard.ie Unit 28B Ashbourne Business Centre, Ashbourne, Co Meath, A84 WA49

