Ridgeview **MEDICAL CENTER**

ECG RHYTHM STRIP

Purpose and or Principle To provide physicians with a longer tracing of Leads II, AVF and V5. These leads are automatically programmed into the Eclipse Rhythm Function.

Equipment Quinton Eclipse Electrocardiograph
         Disposable Resting EKG Electrodes

Quality Control Perform daily cleaning, restocking and equipment checks per instrument checklist.
Procedure

Step	Action
1	Confirm patient identification with an armband check of name and unique patient identifier **and** a verbal patient response of name and birth date. (See RMC Lab Procedure #346.)
2	In a private location, make the patient comfortable on a chair or bed large enough to support their arms and legs. Arms should rest at sides and legs should lie flat, not touching one another. Use a pillow to support the patient's head. A relaxed patient is the key to a good quality ECG.
3	Limb lead placement can be somewhat arbitrary, but should be on the fleshy parts of the upper arms and calves, refer to diagram. (If limb lead placement varies from the norm due to the patient's anatomy or for other reasons, it should be noted on the ECG so that it can be factored into the interpretation.)

4	Chest lead placement must be precise. Refer to the diagram. Intercostal space refers to rib spaces, do not include the space between the clavicle and the first rib. Keep V1 and V2 close to the sternum. You may need to shave some chest hair to achieve a good connection.
	    a. V1 is the fourth intercostal space, on the right border of the sternum.
	    b. V2 is the fourth intercostal space, on the left margin of the sternum.
	    c. V4 should be placed next. It is in the fifth intercostal space, down from the midclavicular line.
	    d. V3 is located on a diagonal line between V2 and V4.
	    e. V5 is at the horizontal level of V4 at the left anterior axillary (just before the arm pit) line.
	    f. V6 is at the horizontal level of V4 and V5 at the left mid axillary line (center of the arm pit).

5	Lead cables should be positioned to follow patient contours and lay flat, avoid large loops.
6	Turn on the Eclipse Plus by pressing the **on/standby** button, upper right corner. Wait for the reliability checks.
7a	For a STAT rhythm strip, without patient demographics, go to Step 9.

7b	For a rhythm strip with demographics press the **I**, to go to the Edit Id screen.
	    a. If a System Note box appears with the message **"New Patient?"** press **Y**.
	    b. **V3 Placement:** STANDARD
	    c. **Location:** select appropriate department
	    d. **Encounter #:** is entered as the patient's visit ID or billing #.
	    e. **Last name:**
	    f. **First name:** should be entered followed by a space and then middle initial.
	    g. **Room #:** if appropriate
	    h. **DOB:** format is month-date-four digit year. You may use spaces, periods or hyphens to separate.
	    i. **Age:** this fills in if you have entered the DOB

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	j. **Sex:** select appropriate choice k. **MD:** should be entered as the **family** physician, not an ED doctor. l. **Tech:** your initials m. **Comments:** enter any deviations in lead placement or other special circumstances.
8	Press the left arrow directional key in the lower right that will bring up the tracing screen. Lead problems will be highlighted across the bottom of the screen, troubleshoot as necessary.
9	Press **RHYT** button to initiate the Auto Rhythm, this will print a one page/10 second rhythm strip. **OR** If the doctor wants a longer tracing press the **MAN** key. The tracing will continue to run the three rhythm leads until you press the **STOP-ESC** key. Each page is a 10 second interval, six pages/minute.
10	Leave the tracing at the nurse's station.
11	Order the RHY in the LIS to bill for the test
12	Rhythm strips do not go to the Directory or get stored in the Pyramis System.
13	Eclipse carts should be plugged in when not in use.
14	ECG's are taken daily to the CICU Dictating area for dictation.

Procedural Notes We do not bill for rhythm strips and Pyramis does not store them. The Elipse carts require battery recharging. Every 24 hours, one of the carts is taken out of use and allowed to recharge for 24, uninterrupted, hours.

Related Documents/ Backup Procedure RMC maintains three ECG carts, try another cart.
References Burdick Eclipse Electrocardiograph Operating Instructions

Date:	Author:		Date:	Validated by:		Date:	Approved by:	
10-24-07	PK							
E:\LeadFolder\Phlebotomy EKG\2.1.3.07.12 ECG RHYTHM STRIP.doc								
Annual Review								
Date:	4/09	1/29/12						
Initials:	PK	PK						
Date:	**Initials:**	**Revision and Reason**						

Discontinued		
Date:	Reason:	Initials: