

ECG top tips



Wiring

Whilst connecting an ECG to a patient, trace each individual lead wire from the cable block connector to check that it is in the correct location on the patient.

Electrode shelf life

Check the manufacturer's recommendations on shelf life and storage period of open packs. If in any doubt, open another packet.

Electrode types

Use the correct electrode for the purpose of monitoring, contact time and patient. ECG electrodes are designed for different applications.

Lead electrode position

When carrying out diagnostic 12-lead ECGs, the chest leads need to be carefully placed according to the agreed international standard.

If an ECG is unexpectedly abnormal it should be repeated.

Filters and automatic mode

Filters and automatic mode should be switched off for diagnosis where possible. Filters can improve the cosmetic appearance of the tracing but clinical information may be lost, affecting diagnosis. Automatic mode is not 100% accurate.

Sticking

To prevent tissue damage, avoid attaching the electrodes to fragile or broken skin. The electrodes should be removed in accordance with the manufacturer's instructions.

Bandwidth

Different bandwidths can artificially affect the ST segment of the ECG complex, leading to inappropriate treatment. Only use a minimum bandwidth of 0.05–100Hz.

Patient identity

Wherever possible enter the patient's identity details in the machine immediately prior to making the recording to ensure the tracing is automatically printed with the patient's ID.

Further information

The Society for Cardiological Science and Technology. Clinical Guidelines by Consensus. Recording a standard 12-lead electrocardiogram. An Approved Methodology. October 2006. www.scst.org.uk

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