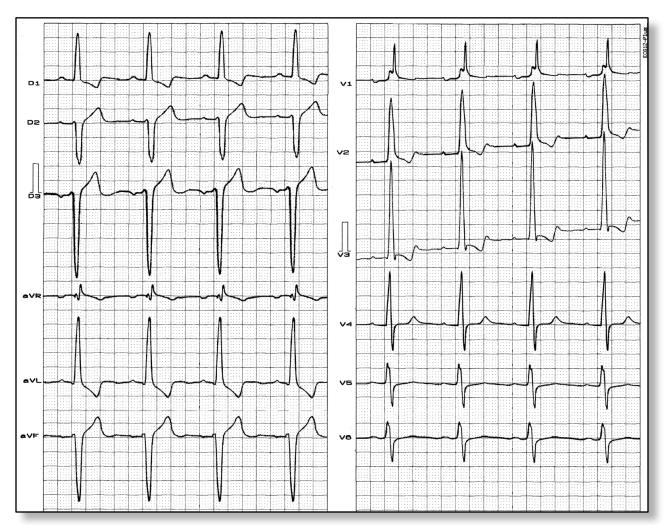
NAME: L. R. J. DATE: 11/12/2001 AGE: 44 Y. NUMBER: 617 63

SEX: F. RACE: W. WEIGHT: 65 Kg. HEIGHT: 1.60 m. BIOTYPE: ATHLETIC

MEDICATION IN USE: NOTHING STATED.



Clinical diagnosis: Chagas cardiomyopathy.

ECG diagnosis: SR; HR: 60 bpm; P wave: voltage: 1 mm; duration: 80 ms; SAP: +450 and to the front; PR interval: 230

ms; QRSD: 115 ms; SAQRS: -65°; morphology: DI: R and aVL: qR; DII, DIII and aVF: rS. V₁, V₂: R; V₃: Rs

 V_5 and V_6 : RS. Absence of q wave in V_5 and V_6 , (by absence of vector 1AM).

CONCLUSION: LVE + 1st degree AV block + LAFB + LSFB = INCOMPLETE TRIFASCICULAR BLOCK?

NAME: L. R. J.

DATE: 12/12/2001 SEX: F. RACE: W. WEIGHT: 65 Kg. **MEDICATION IN USE:** NOTHING STATED.

AGE: 44 Y. **HEIGHT:** 1.60 m. NUMBER: 617 **BIOTYPE:** ATHLETIC

Sensi.

2

Timer

2 msec

Loop

All Loop

Sagittal

Right

Z Axis

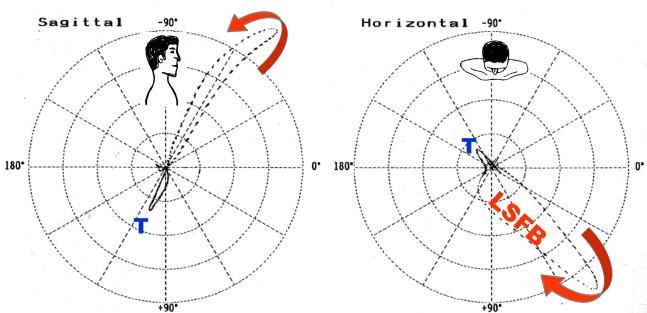
Back Hum

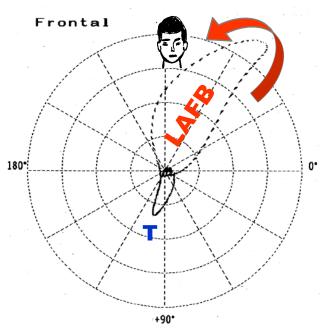
Filter

Muscle

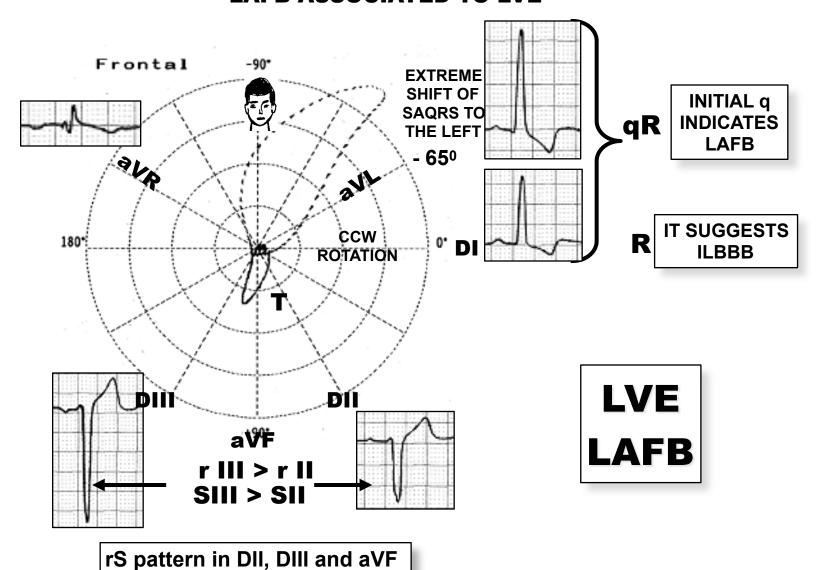
Drift

LVE + LAFB + LSFB

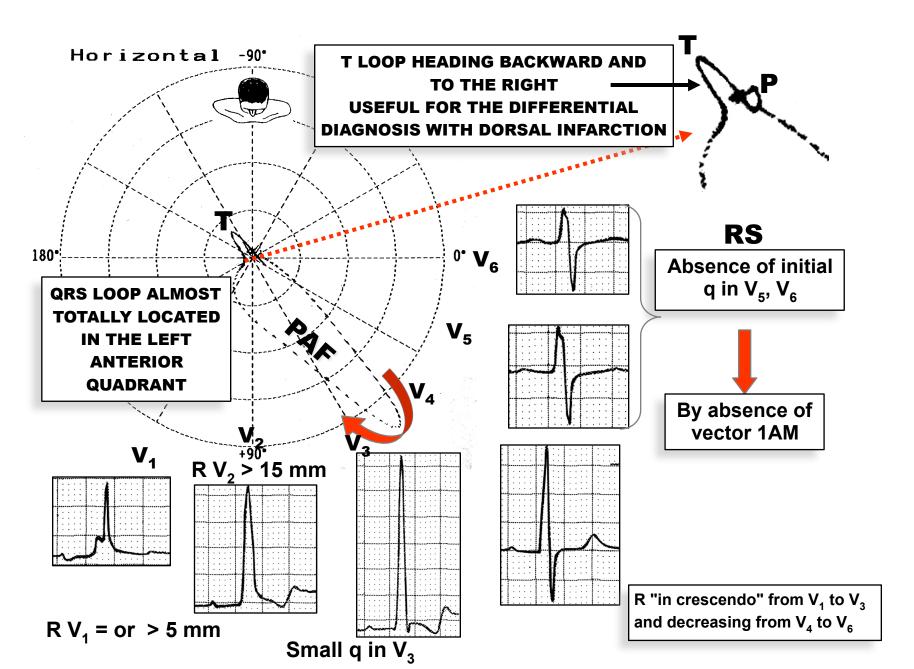




ECG/VCG CORRELATION FRONTAL PLANE CHARACTERISTICS OF ECG/VCG TYPICAL OF LAFB TYPE IV OF ROSENBAUM: LAFB ASSOCIATED TO LVE



ECG/VCG CORRELATION HORIZONTAL PLANE

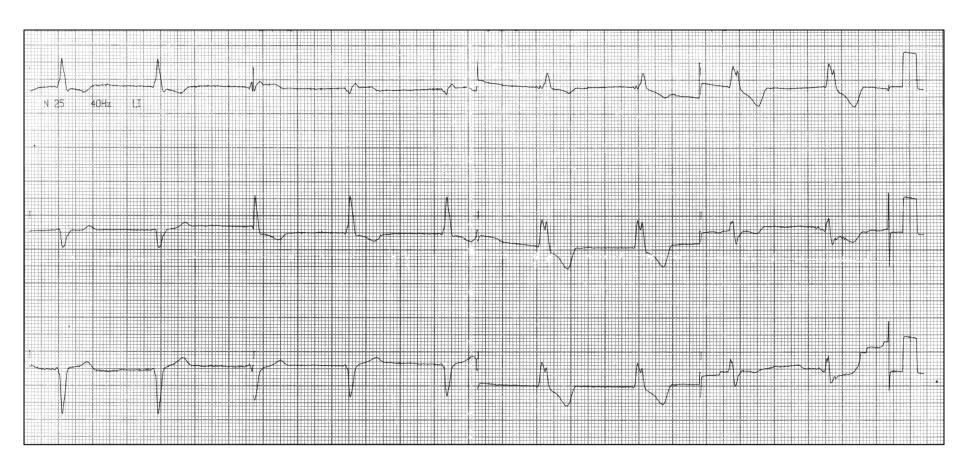


LAFB ASSOCIATED TO CRBBB AND LSFB

TRIFASCICULAR BLOCK STILL NOT DESCRIBED IN LITERATURE

Name: JFM; Sex: Male; Age: 73 y; Race: White; Weight: 62 Kg;

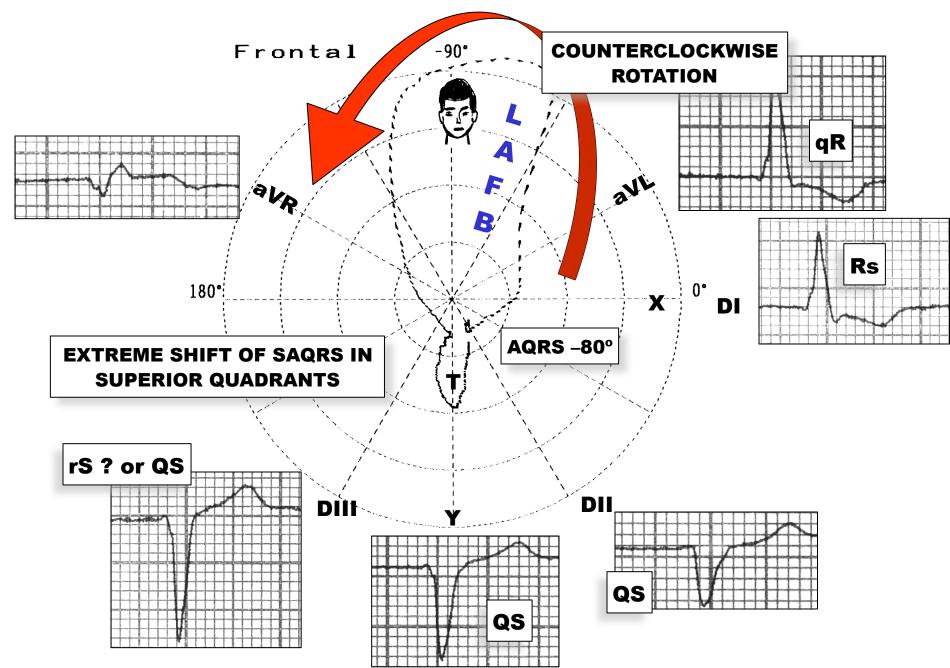
Height: 1.52 m; Biotype: Athletic; Date: 09/03/1995.

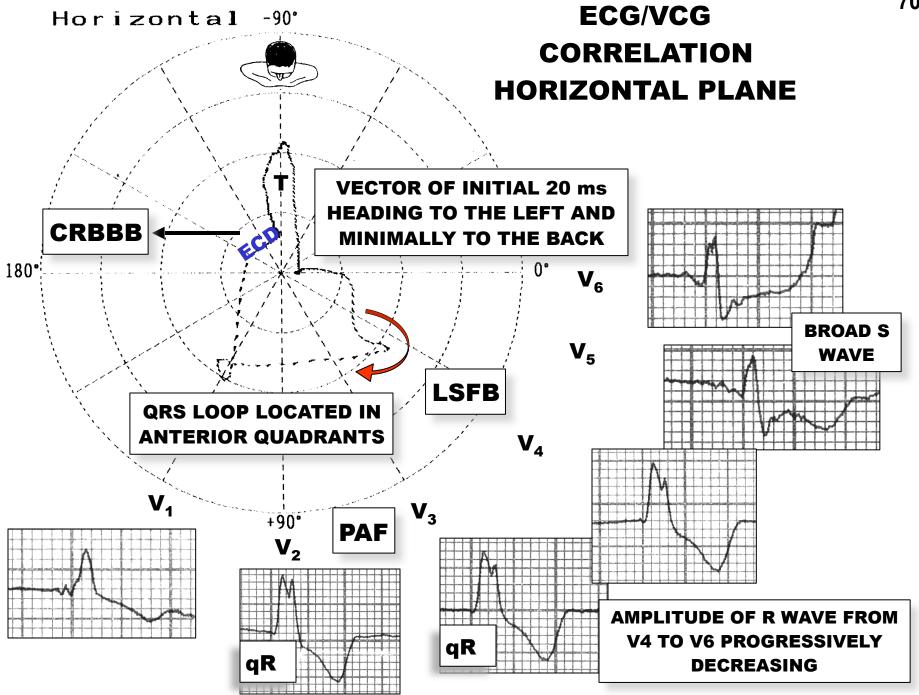


Clinical diagnosis: chronic chagasic cardiomyopathy, mixed form with CHF and dromotropic.

ECG diagnosis: CRBBB + LAFB + PAF: LSFB: Trifascicular block. DI and aVL R pattern: CRBBB "masked standard". Due to the high degree of LAFB, the S wave disappears in DI and aVL, resembling a CLBBB.

ECG/VCG CORRELATION FRONTAL PLANE





ECG/VCG CORRELATION RIGHT SAGITTAL PLANE

