12-lead Diagnostic Criteria for Conduction Defects			
Left Anterior Hemiblock	Left Posterior Hemiblock	Right Bundle Branch Block	Left Bundle Branch Block
• qR in I and a VL • rS in II, III, & aVF • LAD	• rS in I and aVL • qR in II, III, & a VF • RAD	• rSR' in V_1 • slurred wide S in I, aVL, V_5, & V_6 • inverted T wave in V_1 • prolonged VAT in V_1 (>0.035 seconds) • QRS duration 0.12 seconds or more	• rS or QS in V1 • no q wave in I, aVL, V5 or V6 • R wave in I, aVL, V5, or V6 usually notched or slurred • Inverted T wave in V6 • Prolonged VAT in V6 (>0.045 seconds) • QRS duration 0.12 seconds or more

SUPRAVENTRICULAR ABERRANCY	VENTRICULAR ECTOPY
• Ashman's phenomena • Triphasic complex in V1 • Initial vector the same or similar P prime (P') • Noncompensatory pause • Ventricular rate 170 or greater • Slowed or terminated by vagal maneuvers • Complex duration < 0.14 seconds	• Fusion beats • Biphasic or predominantly positive complex in V_1 with taller left rabbit ear • Opposite initial vector • Absence of P prime • Compensatory pause • Ventricular rate < 170 • Unaffected by vagal maneuvers • Complex duration > 0.14 seconds • QS or rS in V_6 • Fat initial r > than 0.03 seconds in V_1 • Concordant pattern • Evidence of AV dissociation • Right or extreme right axis deviation

To Diagnose Atrial Enlargement, look at Leads II and V_1	
Right Atrial Enlargement	Left Atrail Enlargement
• increased amplitude of the 1st portion of the P wave • no change in the duration of the P wave • possible right axis deviation of the P wave	• occasionally, increased amplitude of the 2nd portion of the P wave • increased duration of the P wave • no significant axis deviation

Summary: Ventricular Hypertrophy	
Right Ventricular Hypertrophy	**Left Ventricular Hypertrophy**
6. Increased voltage of the r waves in the right precordial leads V_1 & V_2 7. Increased voltage of the s waves in V_5 & V_6 8. Secondary ST – T wave change in the right precordial leads V_1 & V_2 9. Right axis deviation +110° or more 10. VAT greater than 0.02 seconds in leads V_1 & V_2	1. Voltage criteria (3 points) • R or S in limb leads = 20 mm • S wave in V1 or V2 = 30 mm • R wave in V5 or V6 = 30 mm 2. ST – T wave abnormalities • without digitalis (3 points) • with digitalis (1 point) 3. Left atrial abnormality (3 points) 4. Left axis deviation (2 points) 5. QRS duration (0.09 seconds) (1 point) 6. Intrinsicoid deflection V5 or V6 greater than 0.05 (1 point) **4 points = probable; 5 points = diagnostic**
The presence of strain (asymmétric ST segment depression and T wave inversion) indicates clinically significant hypertrophy, is seen most often in those leads with tall R waves, and may herald ventricular dilatation and failures.	