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	Document Title:	PERFORMING AN ELECTROCARDIOGRAM (ECG)

PURPOSE:

To establish a process flow on how to perform an ECG to patient to ensure that it is being done accordingly.

SCOPE:


Applies to all staffs of Non-Invasive Cardiovascular Imaging Sciences (NICIS) of Dr. Pablo O. Torre Memorial Hospital

RESPONSIBLE PERSON:


Cardiologist, Cardiovascular Tech (Registered nurse and other allied Healthcare professionals who had undergone training or certification.)

GENERAL GUIDELINES:

1. Doctors will carry out an ECG in all emergencies if no ECG nurse is available.
2. ECG nurse should always check the Doctor's order or the patient's chart for the type of ECG to be taken (12 leads, 15 leads, 18 leads, with long lead II and rhythm strip of each lead, right chest leads).
3. Only Cardiovascular Technician who are appropriately trained and competent will do the ECG.
4. The Cardiovascular Technician must ensure the comfort, safety, security and general condition of the individual throughout the procedure. Special needs that include the need to use alternative positions for placing electrodes due to dressing/wound supports situated in the usual position, limbs missing, physical conditions which prevent the individual from keeping still during the procedure (example tremors and restlessness).
5. The Cardiovascular Technician must apply standard precautions for infection control and other appropriate health and safety measures.

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6. The Cardiovascular Technician emphasizes to the patient the importance of minimizing unnecessary movements during the procedure to ensure quality tracings.
7. The Cardiovascular Technician must confirm patient's identity by using two (2) patient identifier and the reason for referral.
8. The Cardiovascular Technician must observe the privacy of the patient throughout the procedure exposing only the necessary parts for the test.
9. The ECG result will be interpreted by a qualified medical practitioner only.
10. Staff nurse on duty must properly endorse if the procedure is a STAT or for another indicated time. STAT requests are prioritized.

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PROCEDURE:

OUT-PATIENT (WALK-IN) PRE-EXAMINATION PROCEDURES:

- 1 The client presents a written request from his/her attending or referring physician to the ECG Nurse.
- 2 The ECG Nurse processes the requested ECG procedure on the Bizbox Hospital computer system after the patient had completely filled up the Admission Data and Consent Form.
- 3 The ECG Nurse prepares the ECG machine, inputs the patient's data and sets the equipment for proper test documentation.
- 4 The ECG Nurse introduces self to patient and instructs the patient to remove jewelries/accessories which may interfere with the test, maintaining the patient's privacy and confirms the patient's identity by interview based on the data given on the admission slip.
- 5 The ECG Nurse assesses the patient prior to the procedure which includes
 - 5.1 Patient's ability to tolerate the procedure
 - 5.2 Potential contraindications to the procedure
 - 5.3 Physical assessment
- 6 The ECG Nurse explains to the patient the necessity of the procedure, its time duration that it takes about 10 minutes and that it is non-invasive, painless and a safe way to evaluate the cardiac function.

DIRECT EXAMINATION PROCEDURES:


1. The Nurse Technician positions the patient in supine position with his arms exposing only the areas to be examined (chest and limbs area). If the patient cannot tolerate lying flat, raise the head of the bed to Semi-Fowler's position.
2. Selects the areas to attach the electrodes. Chooses spots that are flat and fleshy, not muscular or bony. Shaves the area if it's excessively hairy.

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- The Nurse Technician cleans excess oil or other substances from the skin to enhance electrode contact by gently scrubbing area with alcohol swab. Air dry the alcohol before attaching electrodes. Contact gel may also be used.
- Plugs the cord of the ECG machine into the grounded outlet if not charged battery operated.
- Attaches electrodes properly as follows:

12 leads ECG placement:

ELECTRODE LABEL	ELECTRODE PLACEMENT
RA	On the right arm, avoiding bony prominences.
LA	In the same location that RA was placed, but on the left arm this time.
RL	On the right leg, avoiding bony prominences.
LL	In the same location that RL was placed, but on the left leg this time.
V1	In the <i>fourth</i> intercostal space (between ribs 4 & 5) just to the <i>right</i> of the sternum (breastbone).
V2	In the <i>fourth</i> intercostal space (between ribs 4 & 5) just to the <i>left</i> of the sternum.
V3	Between leads V2 and V4.

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V4	In the fifth intercostal space (between ribs 5 & 6) in the mid-clavicular line (the imaginary line that extends down from the midpoint of the clavicle (collarbone)).
V5	Horizontally even with V4, but in the anterior axillary line. (The anterior axillary line is the imaginary line that runs down from the point midway between the middle of the clavicle and the lateral end of the clavicle; the lateral end of the collarbone is the end closer to the arm).
V6	Horizontally even with V4 and V5 in the midaxillary line. (The midaxillary line is the imaginary line that extends down from the middle of the patient's armpit).

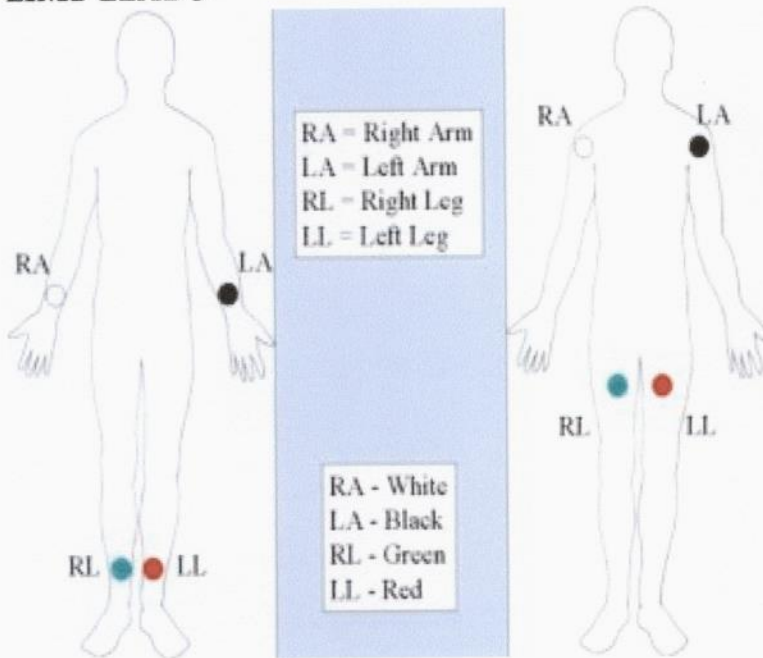


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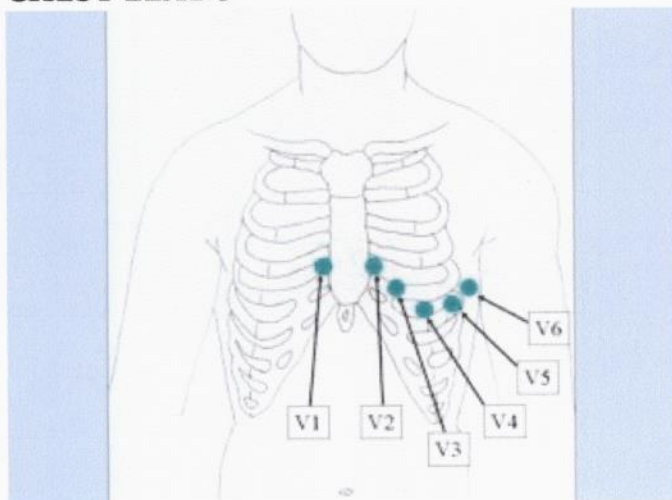
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LIMB LEADS



CHEST LEADS



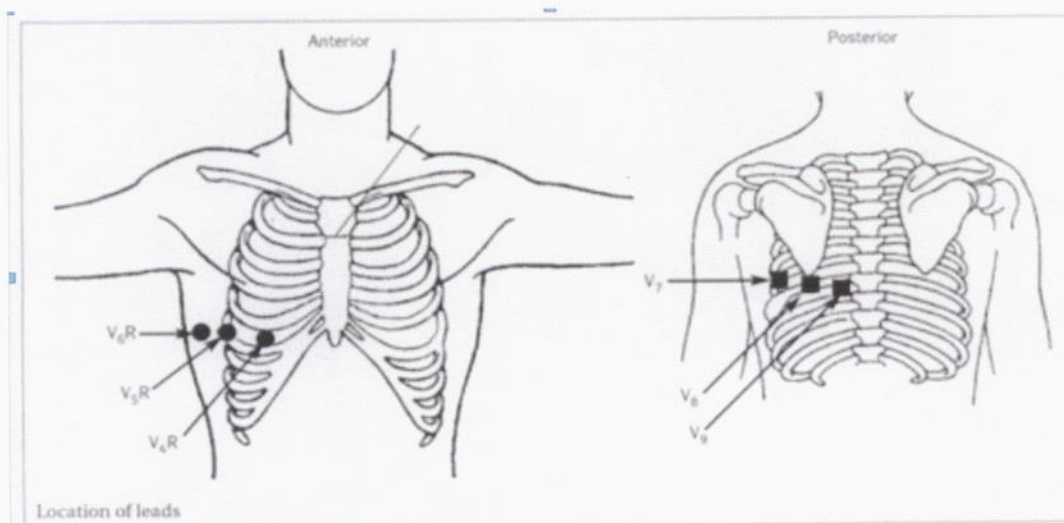
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15 Leads ECG placement:

1. Attaches the standard 12 leads ECG electrodes.
2. Attaches V7 lead at the left posterior auxiliary line from V6 (use V4 Lead).
3. Attaches V8 lead at the left midscapular line, straight line from V7 (Use V5 Lead).
4. Attaches V9 lead at the left paraspinal line, straight line from V8 (Use V6 lead).

18 Leads ECG placement:

1. Attaches the standard 15 leads ECG electrodes.
2. Attaches V4R lead at the right mid-clavicular line, fifth intercostal space (use V3 Lead).
3. Attaches V5R lead at the right anterior axillary line, straight line from V4R (Use V2 Lead).
4. Attaches V6R lead at the right mid axillary line, straight line from V5R (Use V1 Lead).
5. Makes sure all leads are securely attached, and then turn on the machine.




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6. Instructs the patient to relax, lie still, and breathe normally. Ask him not to talk during the recording to prevent distortion of the ECG tracing.
7. Sets the ECG paper speed selector to 25 mm/second then calibrate or standardize the machine according to the manufacturer's instructions.
8. Press the recording button either automatic recording or manual recording. Record 1 copy for final interpretation.
9. Observes the quality of the tracing and once correct, remove ECG strip. When the machine finishes the recording, turn it off.
10. Properly label the ECG strip with the patient's name, age, attending physician, time and date of the test and other special circumstances.
11. Make sure all leads are securely attached, and then turn on the machine.

POST EXAMINATION PROCEDURES:


- 1 The ECG Nurse removes the electrodes and excess gel by wiping it off gently.
- 2 The ECG Nurse gives instructions that the final ECG results are released 1-2 days after the ECG reader had affixed his/her signature and are considered official.
- 3 The ECG Nurse mounts ECG strip on the electrocardiography chart and properly fills in the data of the patient and records the procedure on the official logbook for documentation.
- 4 The ECG Nurse submits to the ECG reader assigned the mounted ECG strip worksheet for the final interpretation of the test.
- 5 Once the assigned ECG reader has finished the results, the ECG Technician collects them from his clinic and sorts them out alphabetically in the centralized section of results for releasing.
- 6 The ECG Nurse makes sure that all ECG strip results are listed properly on the logbooks indicating the date it was taken, date interpreted and the ECG reader for future issuance of voucher.

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- 7 The ECG Nurse does after care and disinfection of the machine. The lead wires are gently coiled and secured on its proper place to be ready for the next patient.
- 8 The ECG Nurse switches off the machine when not in use to conserve energy and should be covered to free it from dust.


OUT-PATIENT (EMERGENCY ROOM) PRE-EXAMINATION PROCEDURES:

- 1 The staff nurse on duty at the OPD/ER department calls the ECG nurse as soon as physician orders for an ECG.
- 2 The ECG Nurse then proceeds to the OPD/ER and prepares the ECG machine that was stationed permanently at the department and the other supplies needed for the procedure.
- 3 Upon arrival at the station, the ECG Nurse checks the patient's OPD chart to verify the order and the type of ECG to be taken and asks the nurse on duty if there are any special endorsements or precautions before entering the patient's cubicle.
- 4 The ECG Nurse prepares the ECG machine, inputs the patient's data and sets the equipment for proper test documentation.
- 5 The ECG Nurse introduces self to patient and instructs the patient to remove jewelries/accessories which may interfere with the test, maintaining the patient's privacy and confirms the patient's identity by interview based on the data given on the OPD admission slip.
- 6 The ECG Nurse assesses the patient prior to the procedure which includes:
 - 6.1 Patient's ability to tolerate the procedure
 - 6.2 Potential contraindications to the procedure
 - 6.3 Physical assessment
- 7 The ECG Nurse explains that it is a non-invasive test to evaluate his cardiac function that takes only 10 minutes to perform.

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DIRECT/POST-EXAMINATION PROCEDURES:

1. The ECG Nurse removes the electrodes and excess gel by wiping it off gently and assists or asks the patient to dress and secure her belongings.
2. The ECG Nurse endorses the ECG strip to the staff nurse on duty or House case DEM Physician-on-duty and attaches it to the patient's OPD chart.
3. The ECG Nurse collects all charged OPD/ER ECG strips every shift, making sure that the charge number/OR number has been written on the ECG strip.
4. The ECG Nurse documents the ECG strips received on the ECG notebook of the OPD Department (Name of patient, charge number, date received and name and signature of the receiving ECG Nurse).
5. The ECG Nurse mounts ECG strip on the electrocardiographic chart, properly fills up the data of the patient and document procedure on the official logbook.
6. The ECG Nurse submits to the ECG reader assigned the mounted ECG strip worksheet for the final interpretation of the test.
7. Once the assigned ECG reader has finished the results, the ECG Technician collects it from his clinic and sorts them alphabetically in the centralized results for releasing.
8. The ECG Nurse makes sure that all ECG strip results are listed properly on the logbooks indicating the date it was taken, date interpreted and the ECG reader for future issuance of voucher.
9. The ECG Nurse does after care and disinfection of the machine by wiping the excess gel on the electrodes and gently coils the wires and secured on its proper place to be ready for the next patient.
10. The ECG Nurse switches off the machine when not in use to conserve energy and should be covered to free it from dust.


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IN-PATIENT PRE-EXAMINATION PROCEDURES:


- 1 The staff nurse on duty encodes request on the bizbox computer system upon receiving doctor's order for ECG.
- 2 The staff nurse then calls the NICIS Department that an ECG request has been ordered, stating the name and room number of the patient and if STAT or the time to be taken if indicated.
- 3 The ECG Nurse then prepares the machine and the necessary supplies and transports the machine to the requesting station.
- 4 Upon arrival at the station, the ECG Nurse checks the patient's chart to verify the order and the type of ECG to be taken and asks the nurse on duty if there are any special endorsements or precautions before entering the patient's room
- 5 The Nurse Technician introduces self to patient and assists him/her in proper positioning maintaining the patient's privacy and confirms the patient's identity using the two patient identifier.
- 6 The Nurse Technician assesses the patient prior to the ECG procedure which includes:
 - 6.1 Patient's ability to tolerate the procedure
 - 6.2 Potential contraindications to the procedure
 - 6.3 Physical assessment
- 7 The ECG Nurse explains to the patient the necessity and the time duration of the procedure, that the test takes about 10 minutes and that this is a non-invasive, painless and safe way to evaluate his cardiac function.

DIRECT/POST EXAMINATION PROCEDURES:



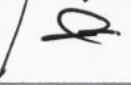
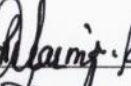


1. The ECG Nurse removes the electrodes and excess gel by wiping it off gently and assists the patient back to previous position.

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2. The ECG Technician does after care and disinfection of the machine by wiping the excess gel on the probe and softly coils the wires and after which the probe is secured on its proper place to be ready for the next patient.
3. The ECG Nurse brings the two (2) printed ECG strips to the nurses' station and places one (1) copy in the patient's chart, making sure that the strip is properly labeled and documented. ECG strips with suspected abnormalities should be endorsed to the Resident-on-duty or attending physician as soon as possible.
4. The ECG Nurse brings down the machine back to NICIS and mounts the other copy of the ECG for interpretation on an electrocardiographic chart with a pre-reading sheet attached. Procedure is logged in the official logbook.
5. All inpatient ECG strips for the day are then sorted by 20 pieces each folder. Seven (7) folders are submitted to each Internal Medicine Residents for pre-reading.
6. Once the Resident-on-duty finishes pre-reading the strips, returns it to NICIS for final reading by the Cardiologist on deck for final interpretation.
7. The Cardiologist writes the final diagnosis and affixes his signature on the mounted ECG result and returns it to NICIS for sorting and filing.
8. The final results are returned for one (1) day back to the residents who pre-read the ECG for their rechecking of corrections for their training and educational purposes.
9. Once the final ECG results are in, the pre-reading sheets are detached and the final results are submitted to the record's section.
10. Proper documentation is done all throughout the process of submissions.

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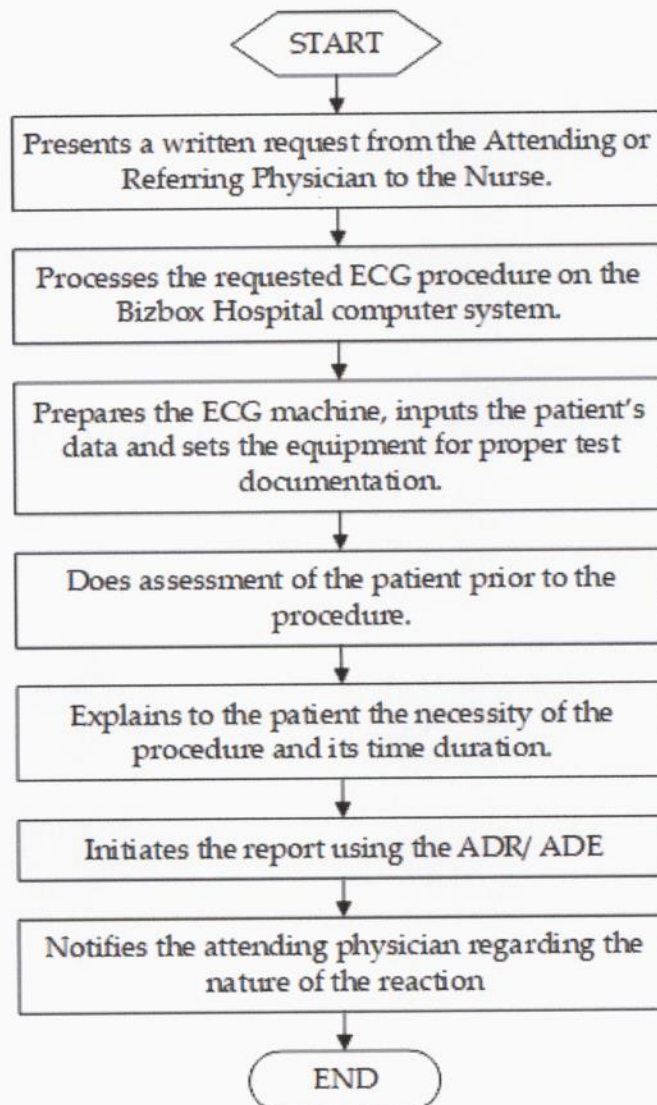
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FLOWCHART

OUT-PATIENT PRE-EXAMINATION PROCEDURE (WALK-IN)



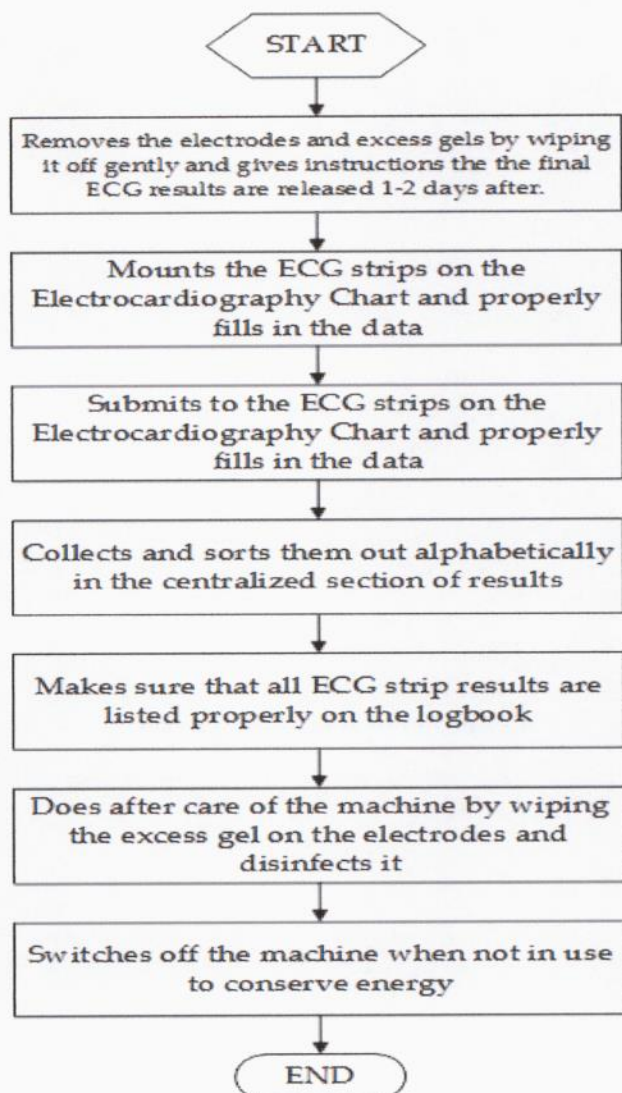


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OUT-PATIENT POST-EXAMINATION PROCEDURE (WALK-IN)



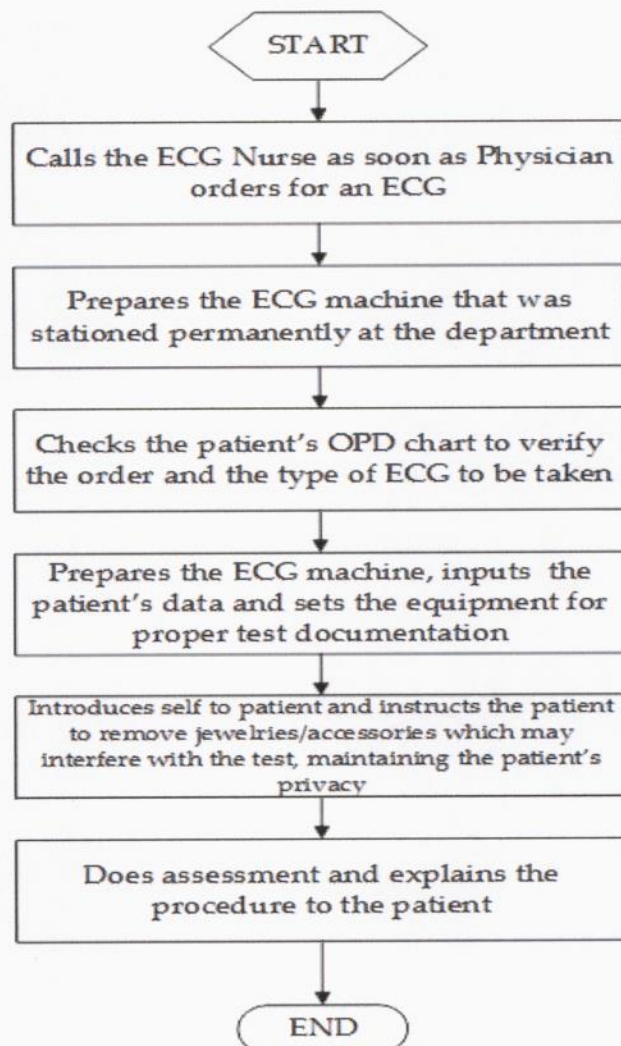


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OUT-PATIENT (OPD/ER) PRE-EXAMINATION PROCEDURE



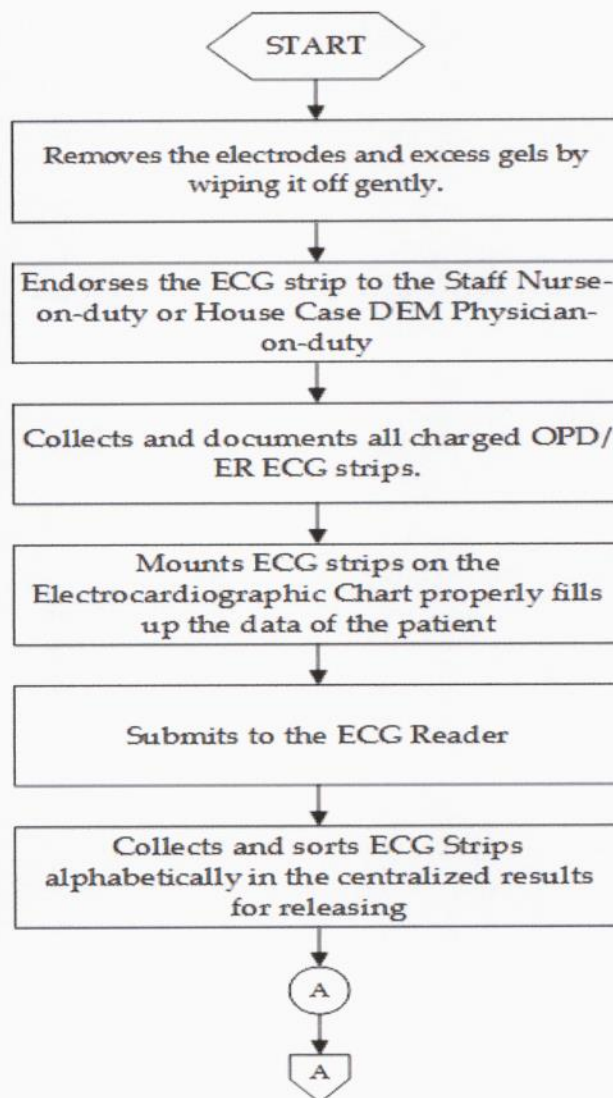


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OUT-PATIENT POST-EXAMINATION PROCEDURE

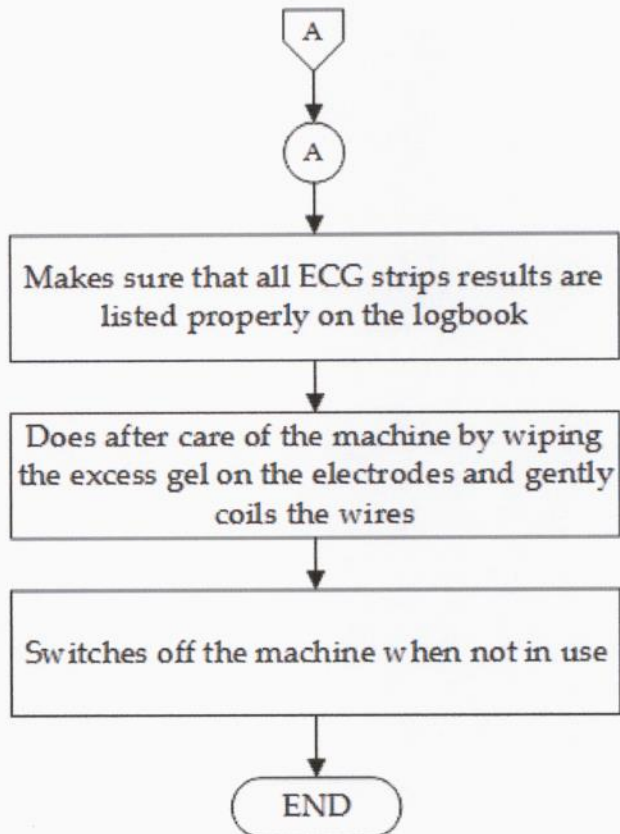




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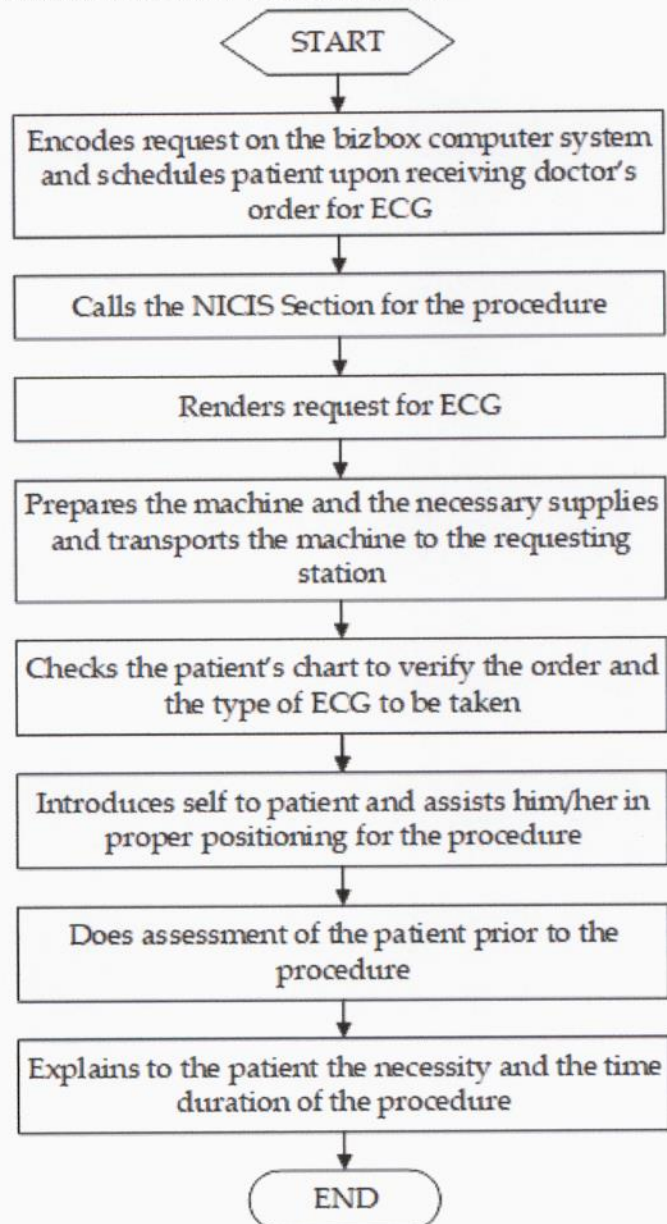


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IN-PATIENT PRE-EXAMINATION PROCEDURE



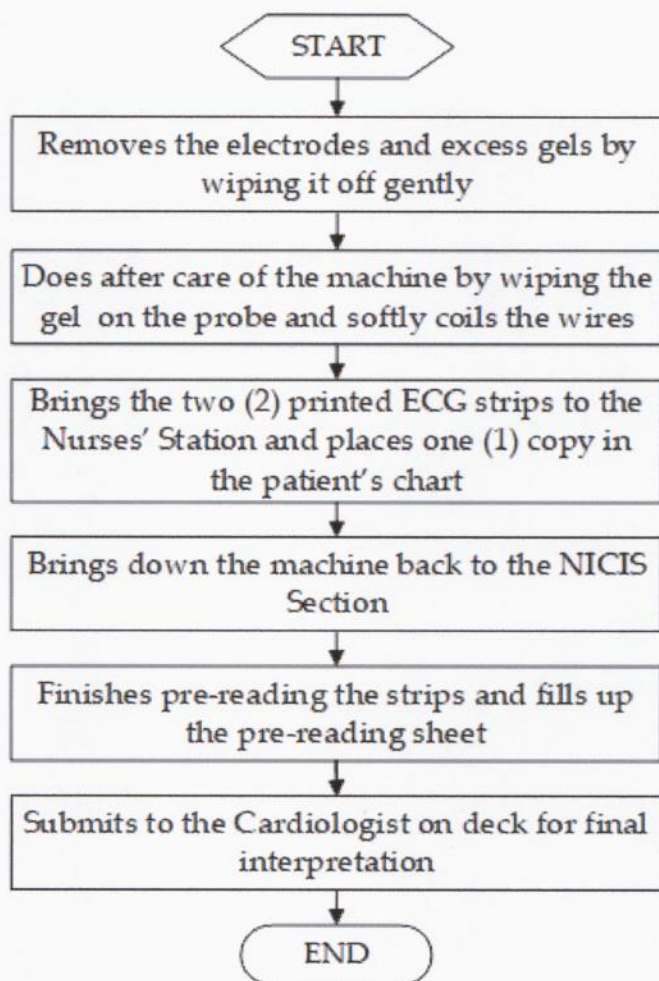



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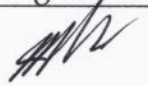
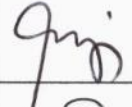

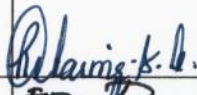

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IN-PATIENT POST-EXAMINATION PROCEDURE



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APPROVAL:

	Name/Title	Signature	Date
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OUT-PATIENT PRE-EXAMINATION (WALK-IN)	
KEY TASK	PERSON RESPONSIBLE
1. Presents a written request from the Attending or Referring Physician to the Nurse.	Patient
2. Processes the requested ECG procedure on the Bizbox Hospital computer system.	ECG Nurse
3. Prepares the ECG machine, inputs the patient's data and sets the equipment for proper test documentation.	
4. Introduces self to patient and instructs the patient to remove jewelries/accessories.	
5. Does assessment of the patient prior to the procedure.	ECG Technician
6. Explains to the patient the necessity of the procedure and its time duration.	ECG Nurse



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Effective Date:	04-01-2022
Document Type:	Work Instruction
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Document Title:	ELECTROCARDIOGRAM (ECG OR EKG)

OUT-PATIENT POST-EXAMINATION (WALK-IN)	
KEY TASK	PERSON RESPONSIBLE
1. Removes the electrodes and excess gels by wiping it off gently and gives instructions that the final ECG results are released 1-2 days after.	ECG Nurse
2. Mounts the ECG strips on the Electrocardiography Chart and properly fills in the data.	
3. Submits to the ECG reader assigned the mounted ECG strip worksheet.	
4. Collects and sorts them out alphabetically in the centralized section of results.	ECG Technician
5. Makes sure that all ECG strip results are listed properly on the logbook.	ECG Nurse
6. Does after care of the machine by wiping the excess gel on the electrodes and disinfects it.	
7. Switches off the machine when not in use to conserve energy.	




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OUT-PATIENT(OPD/ER) PRE-EXAMINATION PROCEDURE	
KEY TASK	PERSON RESPONSIBLE
1. Calls the ECG Nurse as soon as Physician orders for an ECG.	Patient
2. Prepares the ECG machine that was stationed permanently at the department.	ECG Nurse
3. Checks the patient's OPD chart to verify the order and the type of ECG to be taken.	
4. Prepares the ECG machine, inputs the patient's data and sets the equipment for proper test documentation.	
5. Introduces self to patient and instructs the patient to remove jewelries/accessories which may interfere with the test, maintaining the patient's privacy.	
6. Does assessment and explains the procedure to the patient.	

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OUT-PATIENT POST-EXAMINATION PROCEDURE	
KEY TASK	PERSON RESPONSIBLE
1. Removes the electrodes and excess gels by wiping it off gently.	ECG Nurse
2. Endorses the ECG strip to the Staff Nurse-on-duty or House Case DEM Physician-on-duty.	
3. Collects and documents all charged OPD/ER ECG strips.	
4. Mounts ECG strips on the Electrocardiographic Chart properly fills up the data of the patient.	ECG Technician
5. Submits to the ECG Reader.	ECG Nurse
6. Collects and sorts ECG strips alphabetically in the centralized results for releasing.	
7. Makes sure that all ECG strip results are listed properly on the logbook.	
8. Does after care of the machine by wiping the excess gel on the electrodes and gently coils the wires.	
9. Switches off the machine when not in use.	

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IN-PATIENT PRE-EXAMINATION PROCEDURE	
KEY TASK	PERSON RESPONSIBLE
1. Encodes request on the bizbox computer system and schedules patient upon receiving doctor's order for ECG.	Nurse-on-duty
2. Calls the NICIS Section for the procedure.	
3. Renders request for ECG.	ECG Nurse
4. Prepares the machine and the necessary supplies and transports the machine to the requesting station.	
5. Checks the patient's chart to verify the order and the type of ECG to be taken.	
6. Introduces self to patient and assists him/her in proper positioning for the procedure.	Nurse Technician
7. Does assessment of the patient prior to the procedure.	
8. Explains to the patient the necessity and the time duration of the procedure.	ECG Nurse




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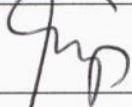
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IN-PATIENT POST-EXAMINATION PROCEDURE	
KEY TASK	PERSON RESPONSIBLE
1. Removes the electrodes and excess gels by wiping it off gently.	ECG Nurse
2. Does after care of the machine by wiping the gel on the probe and softly coils the wires.	ECG Technician
3. Brings the two (2) printed ECG strips to the Nurses' Station and places one (1) copy in the patient's chart.	ECG Nurse
4. Brings down the machine back to the NICIS Section.	
5. Finishes pre-reading the strips and fills up the pre-reading sheet.	Resident-on-duty
6. Submits to the Cardiologist on deck for final interpretation.	

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