



GHADIALI

General Surgery

P R E S E N T S

Dr. Mufa T. Ghadiali is skilled in all aspects of General Surgery.
His General Surgery Services include:

- General Surgery
- Advanced Laparoscopic Surgery
- Surgical Oncology
- Gastrointestinal Surgery
- Hernia Surgery
- Endoscopy

Electrocardiogram

Multimedia Health Education

Disclaimer

This film is an educational resource only and should not be used to make a decision on **Electrocardiogram**. All such decisions must be made in consultation with a physician or licensed healthcare provider.

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GHADIALI

MULTIMEDIA HEALTH EDUCATION MANUAL

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INTRODUCTION

Electrocardiogram (ECG or EKG) is a medical test that measures and records the electrical activity of the heart.

What is an Electrocardiogram?

The heart is a muscular organ that beats rhythmically to pump blood throughout the body delivering oxygen to organs and tissues.

The sinoatrial node, SA node, is the natural pacemaker of the heart. It sends signals to the muscle fibers of the heart telling them when to contract. Each contraction is one heartbeat.

In an EKG test, the electrical impulses made while the heart is beating are recorded and documented on a strip of paper.

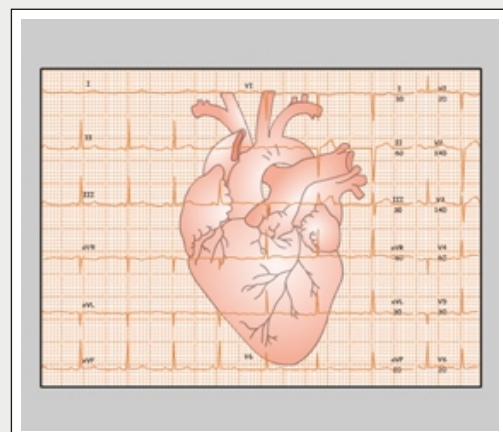
(Refer fig. 1 to 3)



(Fig.1)



(Fig.2)



(Fig.3)

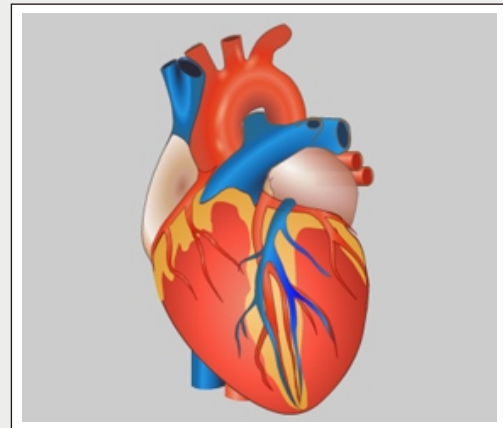
Unit 2: Purpose of Electrocardiogram

Why is an EKG Done?

An electrocardiogram (ECG or EKG) is done to:

- Assess the heart's electrical activity for any abnormalities.

(Refer fig. 4 & 5)



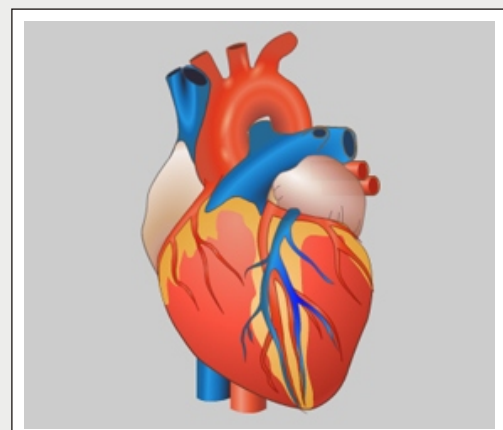
(Fig.4)



(Fig.5)

- Find the cause of unexplained chest pain, such as from a heart attack, inflammation of the sac surrounding the heart (pericarditis), or angina.
- Assess the cause of symptoms of heart disease, such as shortness of breath, dizziness, fainting, or rapid, irregular heartbeats (palpitations).

(Refer fig. 6 & 7)



(Fig.6)



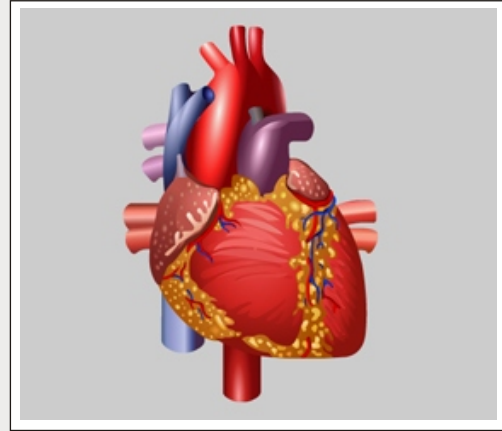
(Fig.7)

Unit 2:

Purpose of Electrocardiogram

- Find out if the walls of the heart chambers are too thick (hypertrophied).
- Assess the health of the heart when other diseases or conditions are present, such as high blood pressure, high cholesterol, cigarette smoking, diabetes, or a family history of early heart disease.

(Refer fig. 8)



(Fig.8)

How is an EKG Done?

An electrocardiogram (EKG or ECG) is usually done by a health professional and the results are interpreted by a doctor, such as an internist, family medicine doctor, electrophysiologist, cardiologist, anesthesiologist, or surgeon.

During an EKG, the patient will lie on their back on a bed or table. Small metal discs called electrodes will be taped to the arms and legs to record the heart rate during the test.

A special EKG gel or small pads soaked in alcohol may be placed between the electrodes and your skin to improve conduction of the electrical impulses.

The electrodes may be moved at different times during the test to measure the heart's electrical activity from different locations on the chest.

(Refer fig. 9)

What are the Risks?

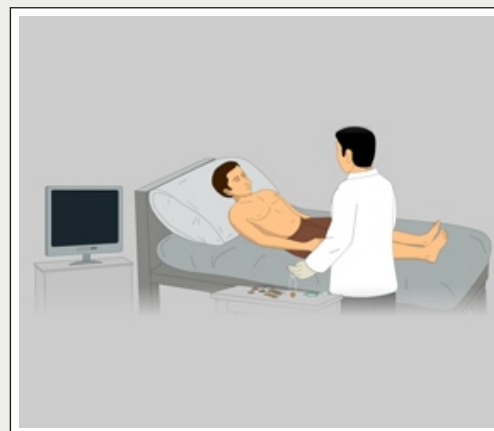
An EKG is a completely safe test with no adverse risks or side effects.

The electrodes that are placed on the body are used to transfer an image of the electrical activity of your heart to a strip of paper.

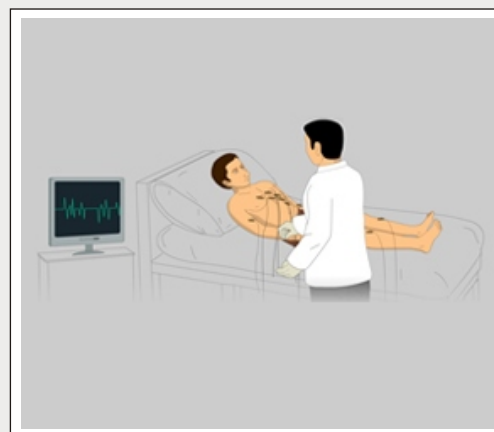
No electricity passes through your body from the machine so there is no danger of getting an electrical shock.

(Refer fig. 10)

Sometimes an EKG is performed with the patient exercising. If an exercise test is performed, there is a small risk the patient may get chest pains during the exercise session. These pains usually stop once the exercise is stopped. This type of EKG examination is called a stress EKG and must be supervised by a medical doctor in addition to the EKG technicians.



(Fig.9)



(Fig.10)

Although every effort is made to educate you on **ELECTROCARDIOGRAM** and take control, there will be specific information that will not be discussed. Talk to your doctor or health care provider about any concerns you have about **ELECTROCARDIOGRAM**.

YOUR SURGERY DATE

READ YOUR BOOK AND MATERIAL

VIEW YOUR VIDEO /CD / DVD / WEBSITE

PRE - HABILITATION

ARRANGE FOR BLOOD

MEDICAL CHECK UP

ADVANCE MEDICAL DIRECTIVE

PRE - ADMISSION TESTING

FAMILY SUPPORT REVIEW

Physician's Name : _____

Patient's Name : _____

Physician's Signature: _____

Patient's Signature: _____

Date : _____

Date : _____