

Policy Title: ELECTROCARDIOGRAPHIC (ECG) MONITORING

Department/Unite:
Nursing Unit.

Policy Number:
UOJ-MSA-NR-P/07

Replaces No:

Creation Date: 10/12/2022

Effective Date:

Review Date:

Revision History

Subject	Changes made	Done by	Revision date

1. **CONDITIONS:**

1.1 All Patient of medical services Administration .

2. **PURPOSE:**

2.1 To get a single ECG trace as a basic reading so that cardiac arrhythmias can be identified and analyzed and the heart rate can be recorded.

2.2 To take vital precautions in case patient in need to be checked by the physician again.

2.3 To support patient with important treatment.

3. **DEFINITIONS:**

3.1 **Electrocardiographic (ECG) monitoring:** is defined as measurement record of a patient's heart rate produced by electrocardiography (electro-relating to or caused by electricity).

3.2 **Electrodes:** are placed at different parts of the patient's skin to view the heart's electrical activity from different angles1.

3.3 **Cable:** o The wire that attaches to the electrode and conducts current back to the ECG machine. One end of a monitoring cable is attached to the electrode, and the other end to the ECG machine.

3.4 **Lead:** has two meanings:

3.4.1 The actual tracing that is obtained and is dependent on the position of the electrode and the monitoring of the mode selected1. Lead II is the most commonly used when ECG monitoring is required2.

3.4.2 The wire that connects the patient to the ECG monitor1.

3.5 **Equipment:**

3.5.1 Monitor.

3.5.2 Cable/wires.

3.5.3 Disposable self-adhesive electrodes.

4. **Related**

N/A

Documents:

5. **POLICY:**

5.1 Electrocardiographic (ECG) monitoring: is defined as measurement record of a patient's heart rate produced by electrocardiography (electro-relating to or caused by electricity).

6. PROCEDURES:

6.1 Explain procedure to patient, he should be calm and relaxed for an accurate ECG reading.

6.2 Turn on the monitor.

6.3 clean and dry the skin, choose intact skin and over soft tissue, not over bony prominences or skin folds as these sites can produce false ECG reading .6.3.1 Patient's file.

6.4 apply conductive gel. press the click-on ECG leads place them on to the electrodes.

6.5 Apply right arm (RA) electrode (white) directly below the clavicle and near the right shoulder.

6.6 Apply left arm (LA) (black) electrode directly below the clavicle and near the left shoulder.

6.7 Apply left leg (LL) (red/green) electrode on left iliac fossa (left lower abdomen). The electrodes placed at these positions will produce ECG complexes for leads I, II, and III.

6.8 If further lead viewpoints are required, apply right leg (RL) electrode on right iliac fossa (right lower abdomen). Then apply the chest lead in the V1 position.

6.9 Connect leads to the ECG connection port. Where possible, connect correlating color into the module. However, be aware that lead placements may not always be color coded and positions should be checked.

6.10 Set the monitor to appropriate ECG lead either I, II, III. Lead II is the preferred lead.

6.11 Regularly monitor the patient's skin for signs of allergic reactions to electrodes.

7. RESPONSIBILITIES

7.1 All staff of Nursing Unit.

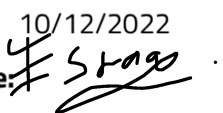
8. Appendix:

8.1 N/A

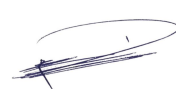
9. REFERRANCES:

9.1 Ministry of Health Manual for Nursing Unit.

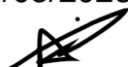
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