



# Exam 7

## Heart Monitor Alerts Form

Participant ID #:

Date:   /   /

Month                      Day                      Year

1. Was Cardea SOLO received at Northwestern?

- Yes →
- No

1a. Date received:   /   /

Month                      Day                      Year

2. Is there a Cardea SOLO Device report to upload (for alerts only)?

- Yes → *Provide file upload option*
- No

3. Was Cardea SOLO Report read by physician?

- Yes
- No

4. Were any **alerts** identified?

- Yes →
- No

4a. Enter YES or NO for each alert:

	Yes	No
Wide QRS tachycardia >110 bpm and sustained for >30 seconds	<input type="radio"/>	<input type="radio"/>
Complete heart block	<input type="radio"/>	<input type="radio"/>
2nddegree AV Block, Mobitz II	<input type="radio"/>	<input type="radio"/>
Pause >4 seconds	<input type="radio"/>	<input type="radio"/>
Bradycardia <40 bpm and sustained for >30 seconds during waking hours	<input type="radio"/>	<input type="radio"/>
Atrial fibrillation with average heart rate <40 bpm or >180 bpm and sustained for 60 seconds	<input type="radio"/>	<input type="radio"/>
Narrow QRS tachycardia >180 bpm and sustained for >60 seconds	<input type="radio"/>	<input type="radio"/>
Other findings of concern to reader	<input type="radio"/>	<input type="radio"/>

└ Please describe: \_\_\_\_\_  
 \_\_\_\_\_



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## Heart Monitor Alerts Form

5. Were any **abnormalities** identified?

- Yes →
- No

5a. Enter YES or NO for each alert:	Yes	No
Pause of >3 seconds duration at an <u>overall rate</u> of 1 or more per day, or more than 3 pauses in a single day	<input type="radio"/>	<input type="radio"/>
SVT occurring at an <u>overall rate</u> of 2 or more per day, or a single episode of SVT lasting >30sec with an average rate of >120 bpm	<input type="radio"/>	<input type="radio"/>
Supraventricular: ectopy >5%; couplets >5%, or triplets>5%	<input type="radio"/>	<input type="radio"/>
VT occurring at an <u>overall rate</u> of 1 or more per day, or a single episode of VT lasting >5 sec with an average rate of >110 bpm	<input type="radio"/>	<input type="radio"/>
Ventricular: ectopy >5%, couplets >5%, or triplets >5%	<input type="radio"/>	<input type="radio"/>
Atrial fibrillation >30 seconds	<input type="radio"/>	<input type="radio"/>
Atrial flutter >30 seconds	<input type="radio"/>	<input type="radio"/>
2 <sup>nd</sup> degree AV block, Mobitz I (Wenckebach) while awake	<input type="radio"/>	<input type="radio"/>
Other findings of concern to reader	<input type="radio"/>	<input type="radio"/>
↙ Please describe: _____ _____		

6. Form status:

- Complete
- Not complete
- Unverified