

Practice Standards for ECG monitoring in Hospitals

Indications	Recommended Placement
Acute Coronary Syndromes: 1. Unstable angina and NSTEMI 2. STEMI 3. R/O MI	1. R2, R7, R9, CICU 2. R9, CICU 3. R2, R7, R9
Arrhythmias: 1. New onset/ uncontrolled Atrial fibrillation/flutter Paroxysmal SVT Non-sustained ventricular tachycardia Sinus node dysfunction Hyper/hypokalemia 2. Second degree AVB Type II Third degree AVB 3. Sustained ventricular tachycardia/fibrillation/prolonged QT	1. R1/R1 IMC, R2, R5, R7, R9, CICU, SCU 2. R1/R1IMC, R7, R9, CICU, SCU 3. R7, R9, CICU, SCU
Syncope	1. Any dept. with cardiac monitoring
CVA	1. R2 preferred unless hemodynamically unstable then Critical Care
CHF	1. R7 preferred unless hemodynamically unstable

Reference: Drew, B.J., Califf, R.M., Funk, M., Kaufman, E.S., Drucoff, M.W., Laks, M.M., Macfarlane, P.W. ... Van Hare, G.F. (2004). Practice standards for electrocardiographic monitoring in hospital settings: an American Heart Association scientific statement from the Councils on Cardiovascular Nursing, Clinical Cardiology, and Cardiovascular Disease in the Young. *Circulation*, 110, 2721-46.
