Why does the ECG evaluation process take so long?

Many common ECG findings are normal variants and are not cause for deferment, unless the pilot is symptomatic or there are other concerns.

How do you identify ECG normal variants?
Let’s look at a few examples.

- Ectopic Atrial Rhythm
- Sinus Bradycardia
- Left Atrial Enlargement
- Intraventricular Conduction Delay (IVCD)
  (Complexes do not appear like a Rt or Lt BBB)
- Abnormally wide QRS complex
- Left Axis Deviation
  (less than or equal to -30 degrees)
- Short QT Interval
  (with no history of arrhythmia)
- Sinus Tachycardia
- Sinus Arrhythmia
- Wandering Atrial Pacemaker
- Early Repolarization
  (Defined as appearance of a J wave on a normal heart beat pattern)
- Indeterminate Axis
- Low Voltage Electromotive Force
  (Make sure the ECG is performed with 10mm standardization)
- Single Premature Ventricular Contraction (PVC)
- Low Atrial Rhythm
- First-degree AV Block With PR Interval Between 0.21 and 0.29 Seconds
- Two Or More Premature Atrial Contractions In A Pilot Less Than 50 Years Old
- Left Ventricular Hypertrophy
  By Voltage Criteria Alone
- Incomplete Right Bundle Branch Block (IRBBB)