



**Inclusion criteria:**

Ages 7y – 22y with chest pain

**Exclusion criteria (any of the following):**

- Ill appearing
- History of congenital heart disease or heart surgery
- Known ingestion/exposure
- Major trauma preceding chest pain

**High Risk Medical History**

- Hypercoagulable states
- Arthritis/vasculitis, (SLE, IBD, JRA)
- Immobilization
- Illicit drug use – cocaine, amphetamines
- History of Kawasaki
- Oncologic history
- Dyslipidemia
- Connective Tissue Disease (EDS, Marfans)

**Abnormal Physical Findings:**

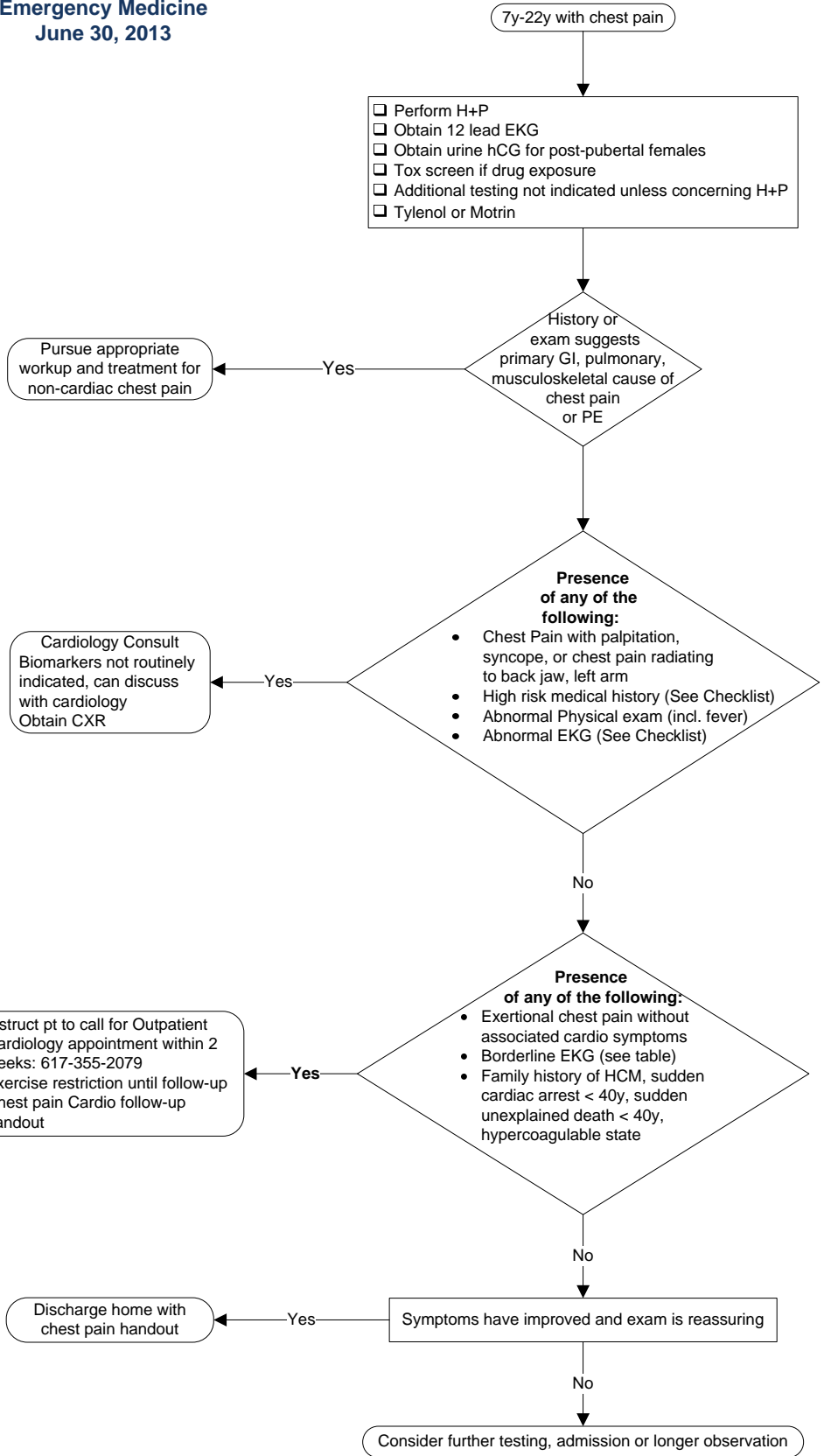
- Sustained tachycardia or tachypnea
- Non-innocent murmur
- Distant heart sounds, gallop, friction rub
- Increased pulmonic component
- Edema, swollen extremity

**12 Lead EKG Checklist**

Consult Cardiology for any of the following EKG findings:

- Low QRS voltage
- LVH – as defined by one or more of the following:
  - S > 25 mm in V1
  - R > 30 mm in V6
  - Q > 5 mm in V6
  - left axis deviation
  - left atrial enlargement
- RVH – as defined by one or more of the following:
  - R > 10 mm in V1
  - S > 5 mm in V6
  - Axis > 130
  - Upright T in V1 if patient < 12 years
  - R' > R in V1
- Left or right atrial enlargement
- 1<sup>st</sup>, 2<sup>nd</sup> or 3<sup>rd</sup> degree AV block
- S1, Q3, inverted T3
- Prolonged QTc > 470ms
- Abnormal PR interval – depression
- ST-T segment change > 2mm
- PVC's
- WPW/delta waves

	Normal	Borderline	Abnormal
PR interval (ms)	<200	200-250	>250
Axis (°)	-5 – 130	N/A	>130 or <-5
QTc (ms)	<450	450-470	>470



**NOTE:** The medication dosing contained within these guidelines is provided for reference only. Please refer to your institutional formulary or ordering guidelines when placing orders for clinical care of patients.