

for only  
**\$ 4.99**

**ECG+**  
 *mastery*



# THE LITTLE BLACK BOOK OF ECG SECRETS

***15 facts nobody ever told you about the ECG:***

- ✓ *The truth about ventricular hypertrophy*
  - ✓ *How to master myocardial infarction using these simple tricks*
  - ✓ *Are you making these mistakes when reading the ECG?*
- ... And much, much more*





## **Dear Future ECG Rock Star,**

In this book, you will find several ECG cases taken from our award-winning online ECG Mastery course. If you are completely new to the ECG, you might not be able to answer these questions right now. However, after going through the ECG Mastery program, you'll be able to diagnose all of them after just a couple of training sessions.

Do you know the most effective way to learn the ECG? It's having a teacher and mentor with lots of years of experience stand next to you and explain an actual ECG case with pen and paper. If you have access to such a mentor—great, you've nailed it!

But what if you don't have access to this mentor? What if you have to learn the ECG on your own? Well, then the ECG Mastery program could be your solution. In our program, we are using hundreds of hand-picked, real-world teaching cases that will help you understand what's really important about the ECG.

Each chapter in our program works like this: after teaching you the necessary basics, you'll go through a couple of cases and try to solve them on your own. Then you'll watch an expert with decades of experience solve the case. It's almost as if the expert were standing next to you, scribbling on the ECG. It's as close as it gets to a real-life mentor.

From this booklet, you'll get an idea of this teaching approach. Learning the ECG is like learning to ride a bicycle. Once you master it, you won't forget it. Understanding instead of memorizing—that's our teaching mantra. If you want to find out more about our course or sign up for a free trial account to get access to even more, interesting cases, please visit [www.medmastery.com](http://www.medmastery.com)

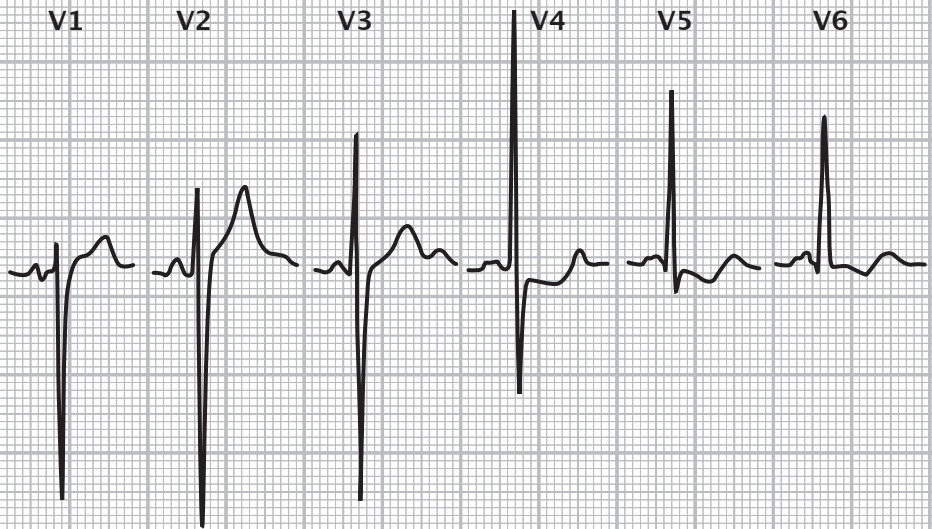
We wish you a great learning experience!

Yours,

***Franz Wiesbauer & the Medmastery team***

***PS:*** If you know someone who might be interested in this booklet, please share it with them.

## ECG 1



### What's the diagnosis?

**A** Left ventricular hypertrophy

**D** No hypertrophy

**B** Right ventricular hypertrophy

**E** Bundle branch block

**C** Biventricular hypertrophy

**Here's the solution video:**

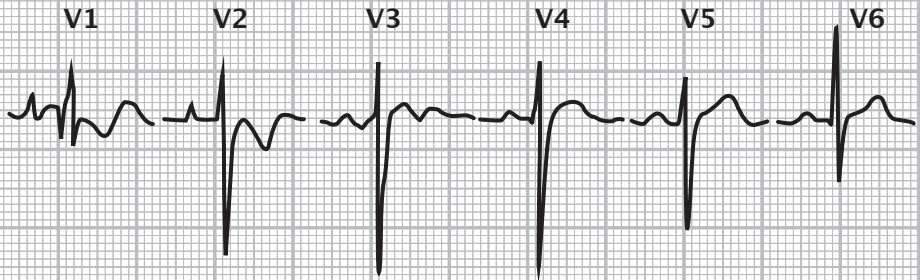
<http://bit.ly/T7ltrk>



**In this short video,  
you'll learn how to reach  
the right diagnosis fast in  
these patients:**

<http://bit.ly/1pIMFL5>





**What's the correct diagnosis?**

**A** Left ventricular hypertrophy

**D** No hypertrophy

**B** Right ventricular hypertrophy

**E** Ischemia

**C** Biventricular hypertrophy

**Here's the solution video:**

📺 <http://bit.ly/1qsGtHk>

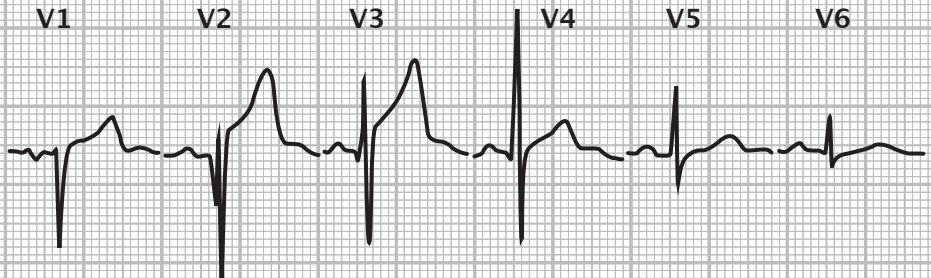


**Watch this video to learn more about the diagnostic criteria of this disease:**

📺 <http://bit.ly/T7lwUe>



## ECG 3



**Which of these statements is correct?**

- A** This patient has an old infarct of the lateral wall
- B** There are Q waves in V1 and V2
- C** This patient has an anteroseptal infarct
- D** This patient has an anterolateral infarct
- E** None of the above statements are correct

**Here's the solution video:**

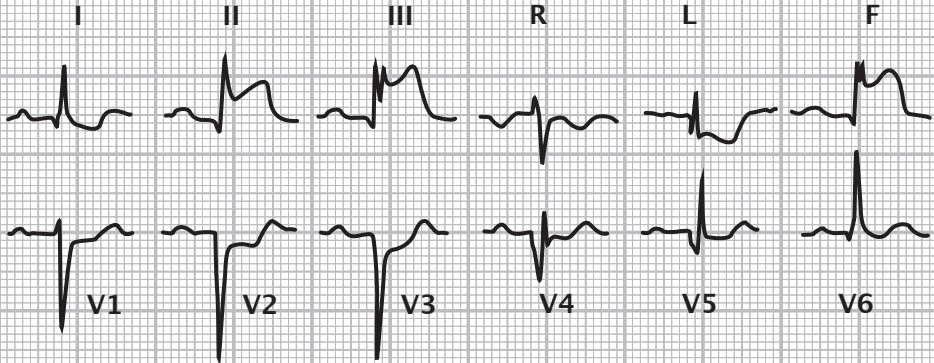
<http://bit.ly/T7lz2i>



**This video will teach you some important anatomy hacks:**

<http://bit.ly/1Dzcg>





**What's the problem and where is it located?  
(more than one right answer)**

**A** Old infarct of the inferior wall

**B** Old infarct of the anterior wall

**C** Old infarct of the lateral wall

**D** Acute ischemia of the anterior wall

**E** Acute ischemia of the lateral wall

**F** Acute ischemia of the inferior wall

**Here's the solution video:**

<http://bit.ly/T7lCep>



## ECG 5



**What's the correct statement:**

- A** This is a case of tachycardia and atrial fibrillation
- B** This is a case of bradycardia and atrial flutter
- C** This is a case of ventricular tachycardia
- D** This is sinus rhythm
- E** None of the above statements are correct



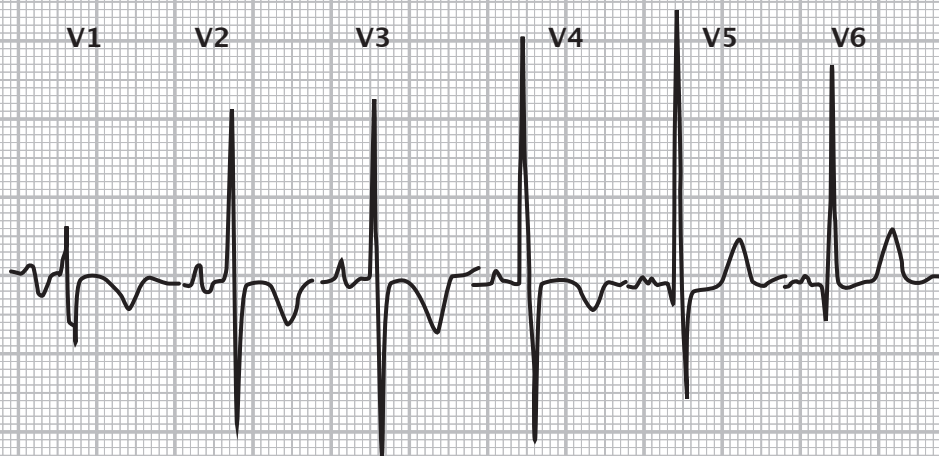


**Here's the solution video:**

▶ <http://bit.ly/11Dcedm>



## ECG 6



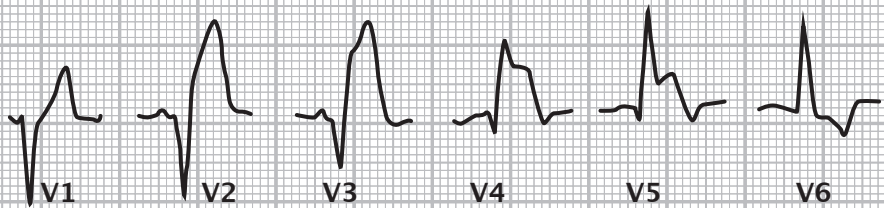
### Which statement is correct?

- A** The negative T waves in V1 to V4 are due to coronary insufficiency
- B** The patient has an old infarct of the anterior wall
- C** That's a case of WPW
- D** This patient has left ventricular hypertrophy, the right ventricle seems to be ok
- E** This is a case of biventricular hypertrophy

**Here's the solution video:**

■ <http://bit.ly/1uD9EFc>





**This patient has an acute problem.  
It is visible in the following leads:**

**A** V1 - V6

**D** V2 - V5

**B** V1 - V5

**E** V3 - V5

**C** V2 - V6

**Here's the solution video:**

<http://bit.ly/1136ASc>



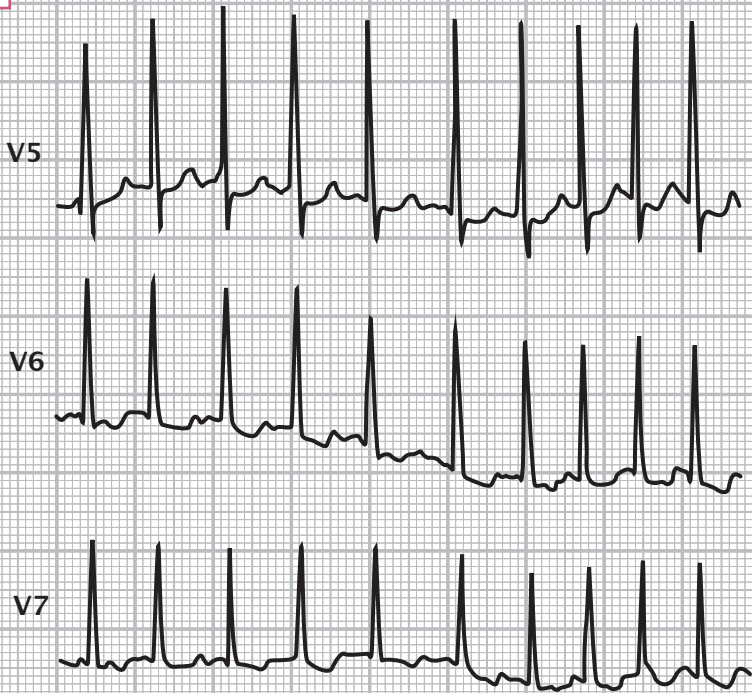
**If you want to learn more,  
please watch this video:**

<http://bit.ly/1nPDcP8>



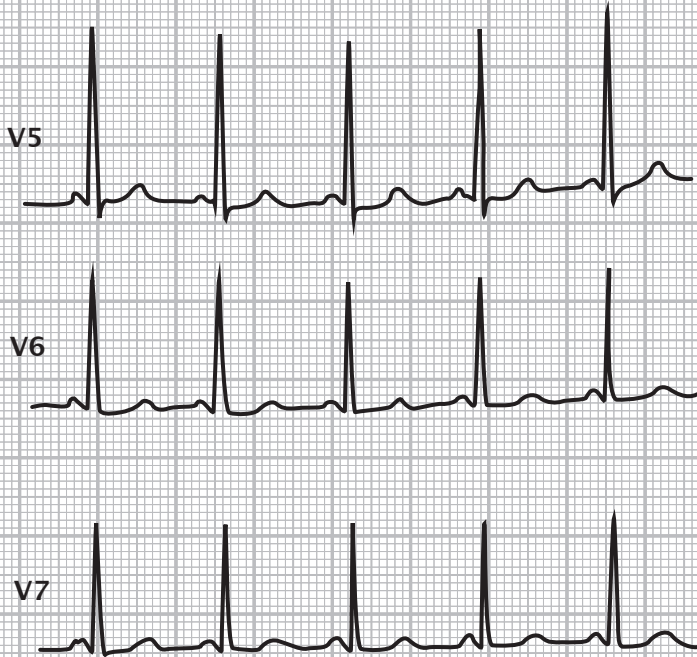
**ECG 8**

before

**Chose the correct answers:**

- A** On the initial ECG (before), the patient was in atrial flutter
- B** This patient has an additional bundle between the atria and the ventricles
- C** This is a case of LGL
- D** This is a case of WPW
- E** On the initial ECG (before), the patient was in atrial flutter
- F** On the initial ECG (before), the patient presented with a reentry tachycardia

afterwards



**Here's the solution video:**

▶ <http://bit.ly/1qdL5yO>

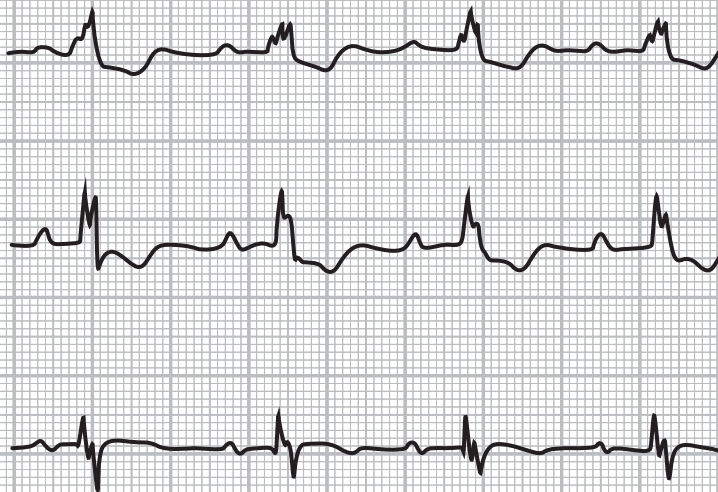


**Watch this video and learn more about the disease:**

▶ <http://bit.ly/1nguTJ8>



## ECG 9



**What's the problem here?**



**QRS #5 looks different than the others.  
What type of beat is it?**





**Here's the solution video:**

▶ <http://bit.ly/UMmExN>

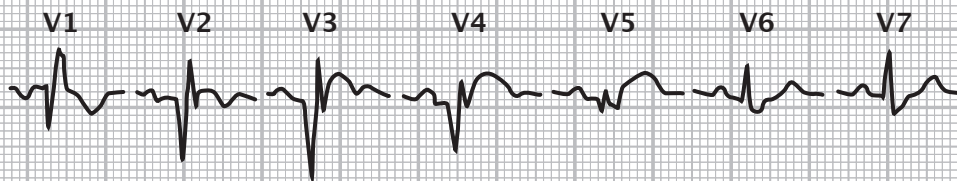


**Watch this video and learn more about this disease:**

▶ <http://bit.ly/1kO2d8M>



## ECG 10



**Pathologic Q waves can be found in which leads?**

- A** V1 - V5      **D** V2 - V5  
**B** V1 - V4      **E** V2 - V6  
**C** V2 - V4

**Here's the solution video:**

<http://bit.ly/1njTr5f>







**These ECG changes are typically seen in...**  
**(one correct answer)**

**A** Ehlers Danlos syndrome

**D** Arterial hypertension

**B** Addison's disease

**E** WPW syndrome

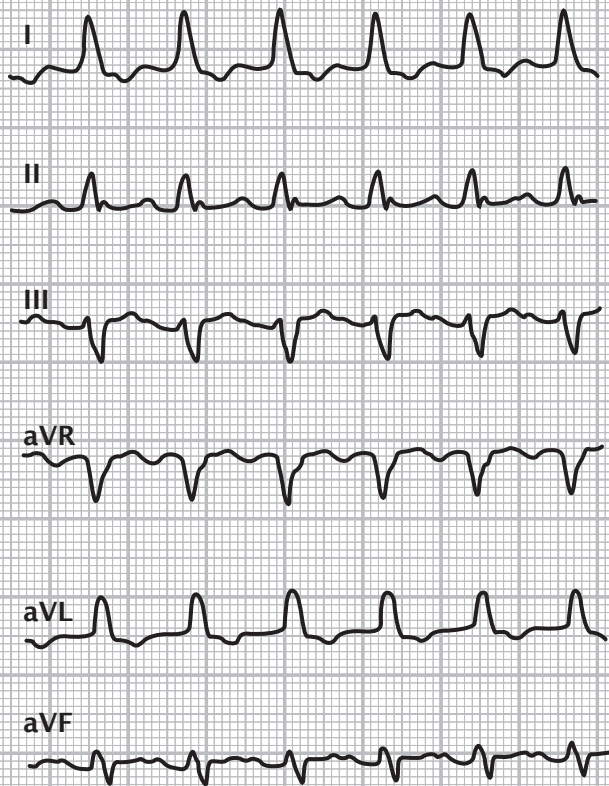
**C** hypothyreosis

**Here's the solution video:**

<http://bit.ly/1IV9c4F>



**ECG 12**



**What's the rhythm?**



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**This patient has bundle branch block.  
Is it LBBB or RBBB?**

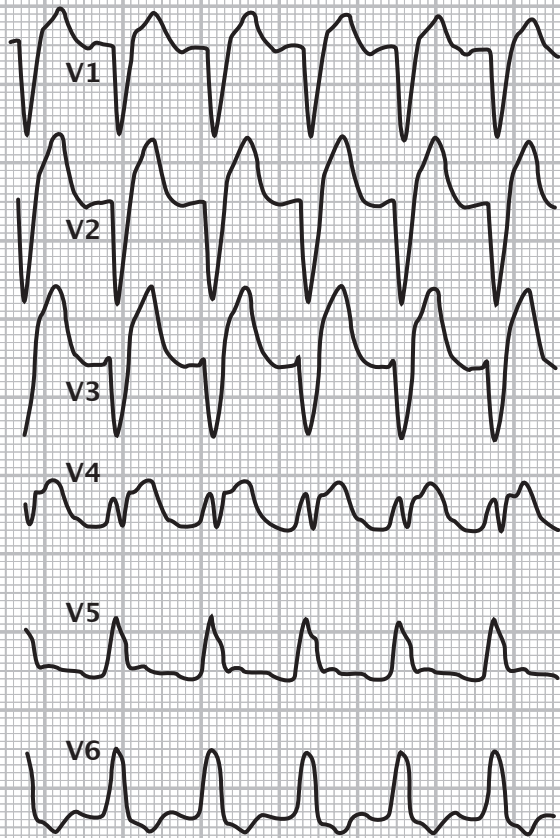


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**There's an acute problem. What is it and where?**



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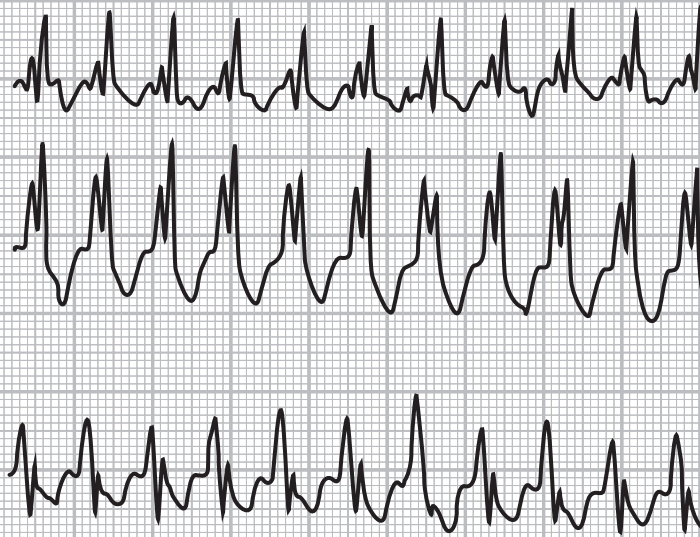


**Here's the solution video:**

<http://bit.ly/1DzPpN>



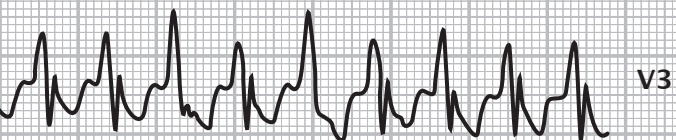
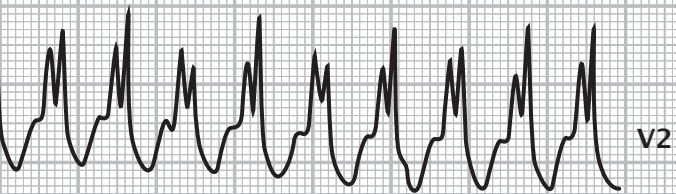
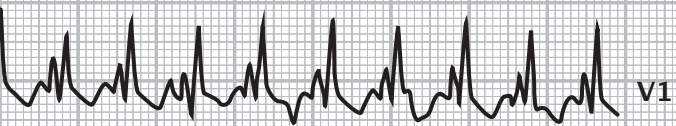
**ECG 13**



**Is this a case of atrial or ventricular tachycardia?**

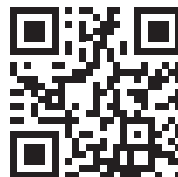


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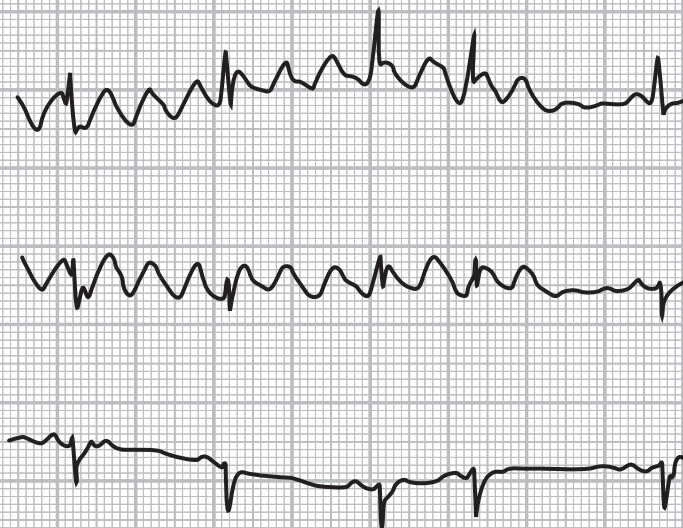


**Here's the solution video:**

📺 <http://bit.ly/1qdLscB>

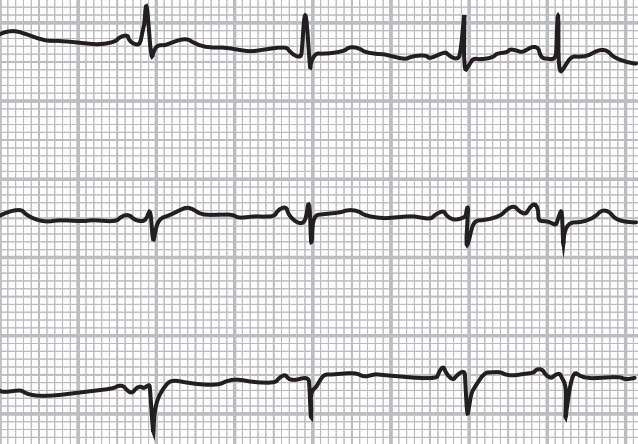


**ECG 14**



**What's the correct answer? This is...**

- A** Atrial flutter
- B** Atrial fibrillation
- C** Sinus rhythm
- D** None of the above answers

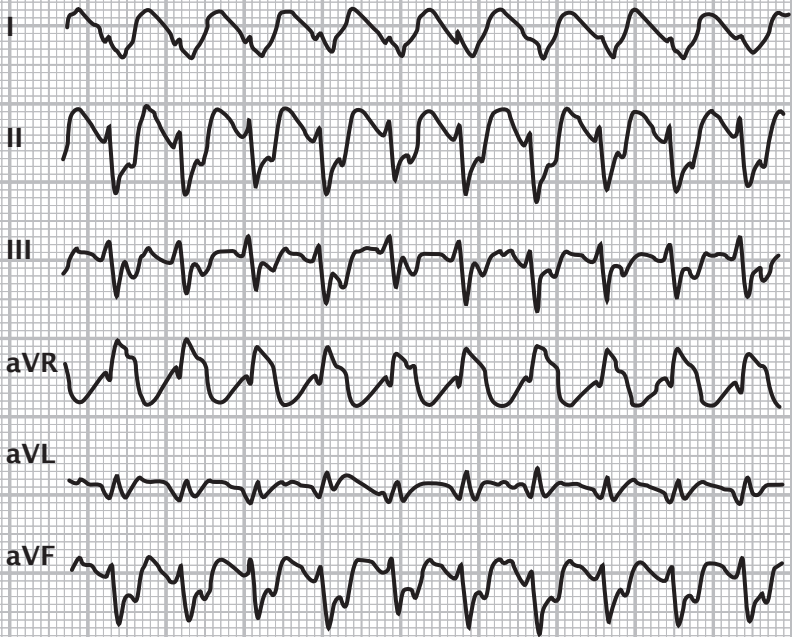


**Here's the solution video:**

📺 <http://bit.ly/1njTsWM>



## ECG 15



**What type of tachycardia is this?**



**What simple diagnostic measures can you take in order to diagnose the underlying rhythm problem?**



**Here's the solution video:**

<http://bit.ly/1yjiVqM>





## What now?

**It has never been as easy to become an ECG expert as this**

If you are hungry for more ECG wisdom, visit us at [www.medmastery.com](http://www.medmastery.com). Then go to the ECG section and register for our free ECG training sequence and sign up for a free trial account of our award-winning ECG Mastery Program.



To get instant access to 3 advanced ECG cases, please [click here](#).

Why should you take the bumpy road to success and go through overly complex textbooks when there's an easier way to learn the ECG?

*Have a great learning experience!*

✓ *Understand the ECG instead of memorizing the patterns*

✓ *Don't waste your time on complex theory - only learn what's really relevant*

✓ *Help more patients by making better decisions faster*

✓ *A case-based approach that makes learning effortless and fun*

✓ *We'll turn you into an expert - step by step*

✓ *Diagnose over 95% of cases without the help of a more senior colleague*

✓ *Reach your full potential*

