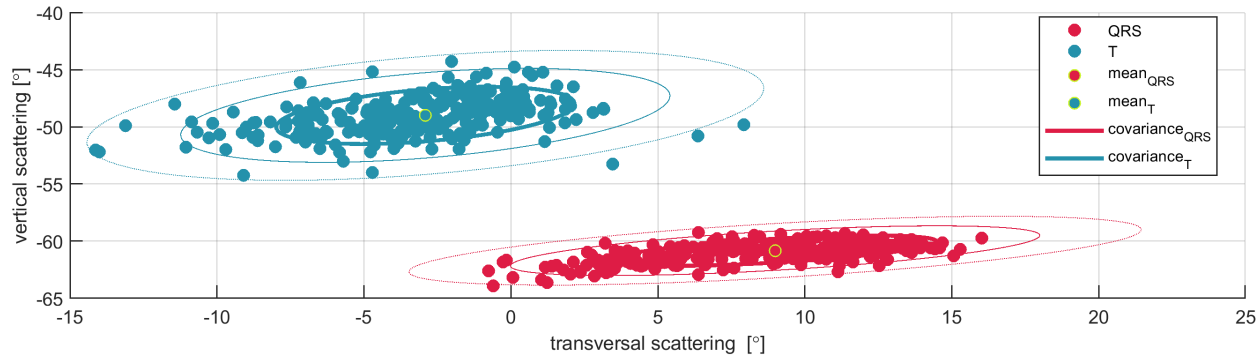
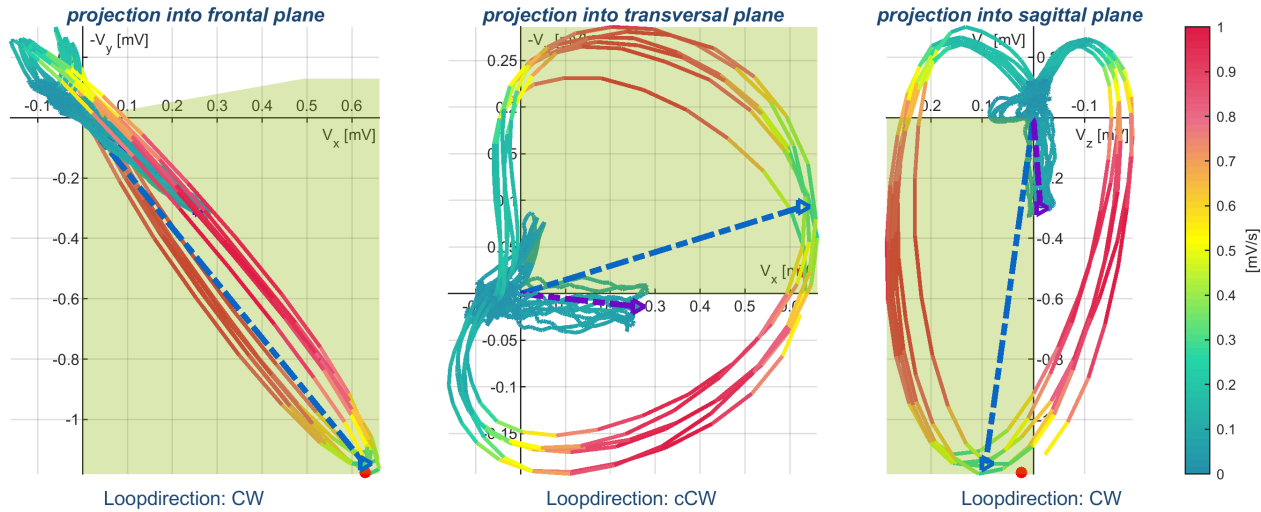


Vectorcardiography



Pretest Risk



VCG results

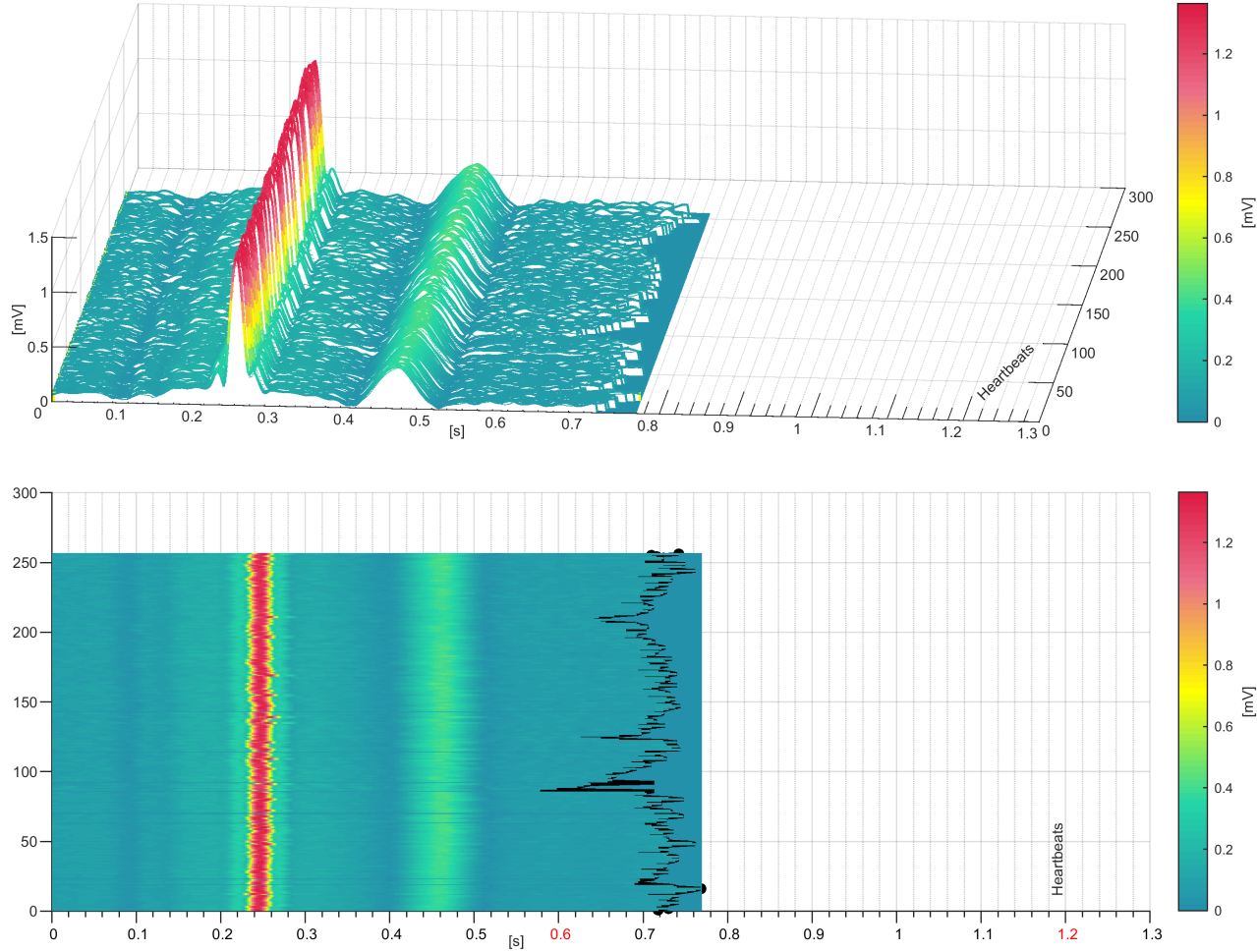
Parameter	Value	Unit	Reference
CSG-Index:	-0.973		< -0.27
3D QRS vector:	61	°	-30<x<90
3D T vector:	49	°	-30<x<90
3D QRS T angle:	14	°	<100
Superposition:	100.00	%	> 50
T Magnitude:	0.79	mV	> 0.4

VCG parameters within normal range.

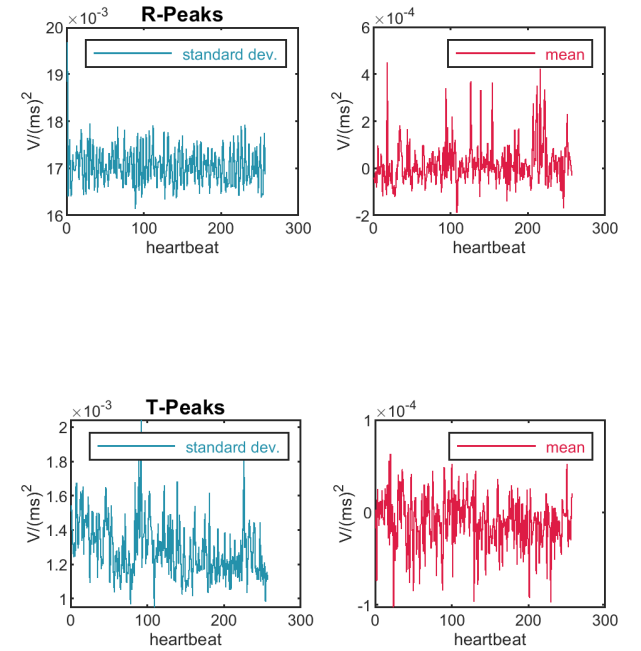
Scatter Analysis

Parameter	Value	Unit	Reference
Scatter QRS:	1.6	°	< 4,5
Scatter T:	2.2	°	< 10

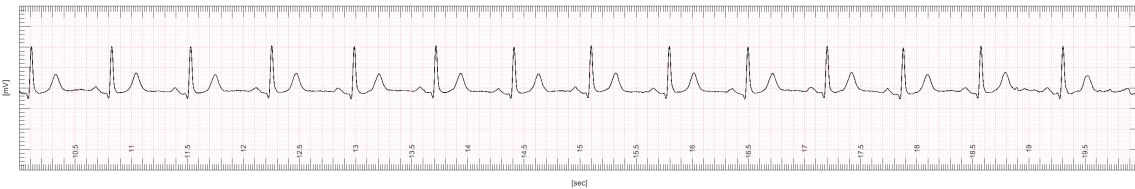
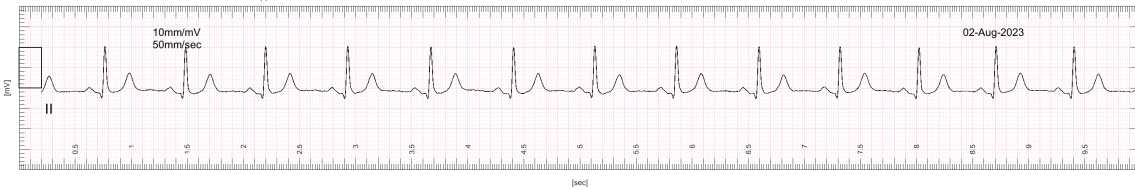
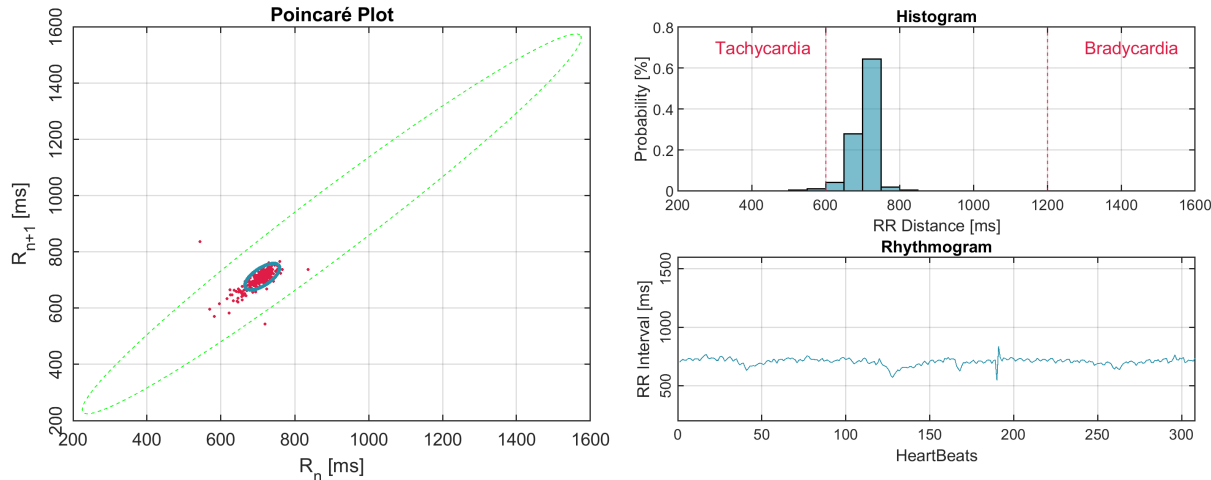
3D Absolute Cardiogram



Restriction Analysis



Rhythm Analysis



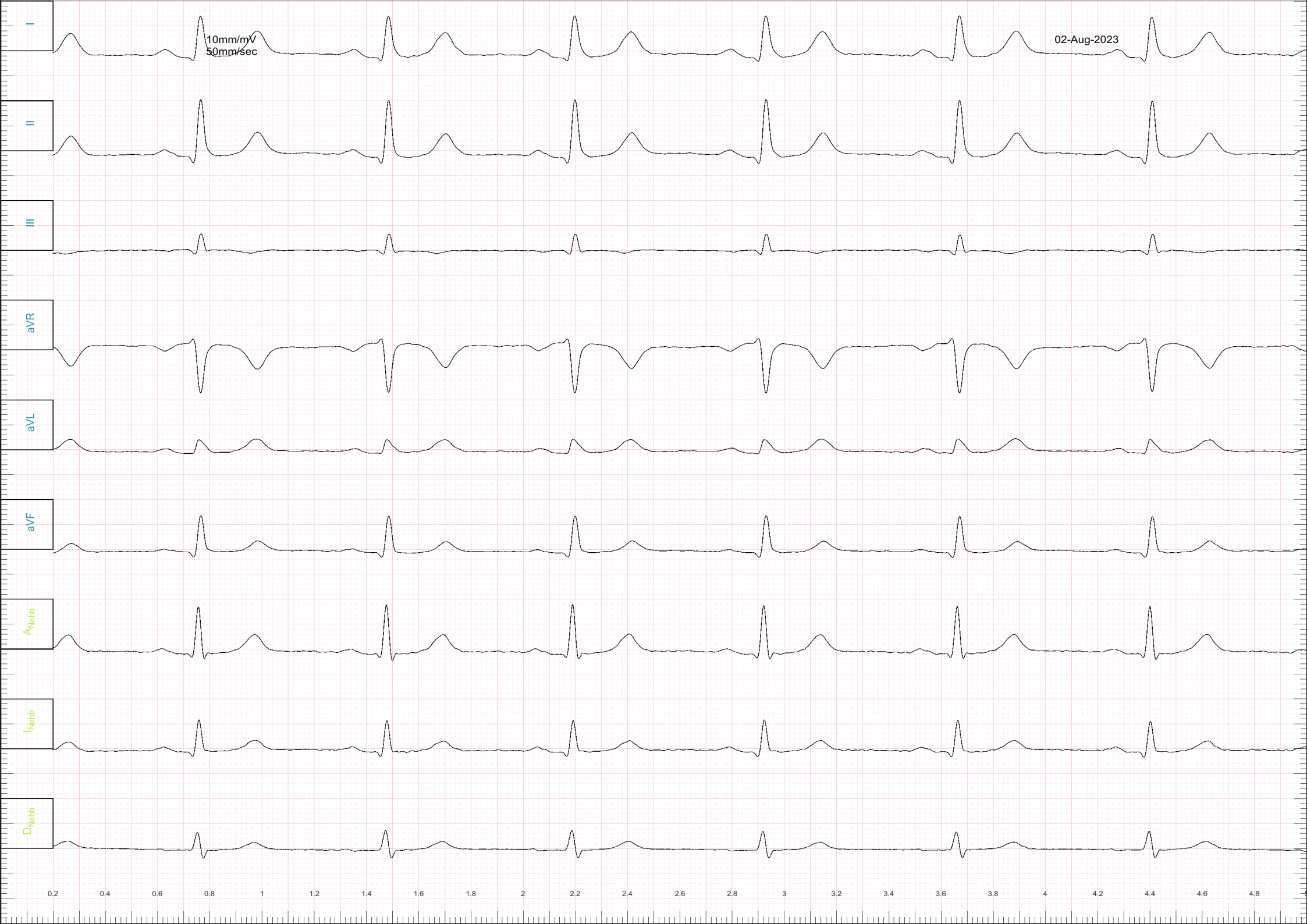
ECG results

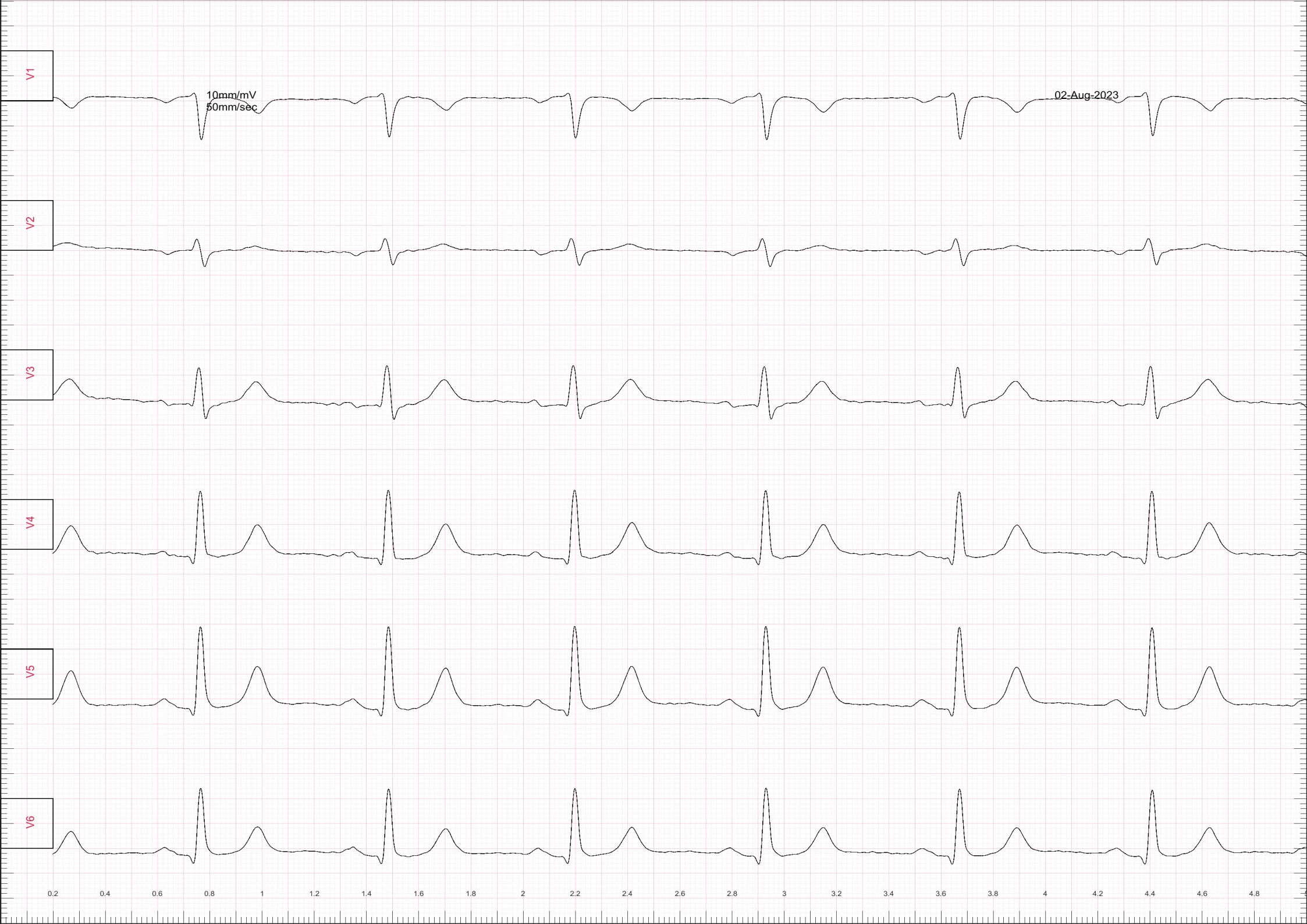
Parameter	Value	Unit	Reference
HF:	83	1/min	50-100/min
RR:	726	ms	-
PP:	724	ms	-
P:	98	ms	<120
PQ:	156	ms	120<x<200
QRS:	84	ms	<120
Cabrera:	Normal axis		
QT:	334	ms	< 460
QTc Bazett:	392	ms	< 460
QTc Fridericia:	372	ms	< 460

One or more ECG values outside normal range.

Rhythm parameters	Value	Unit	Reference
Percentage of heartbeats outside the norm	1	%	< 10

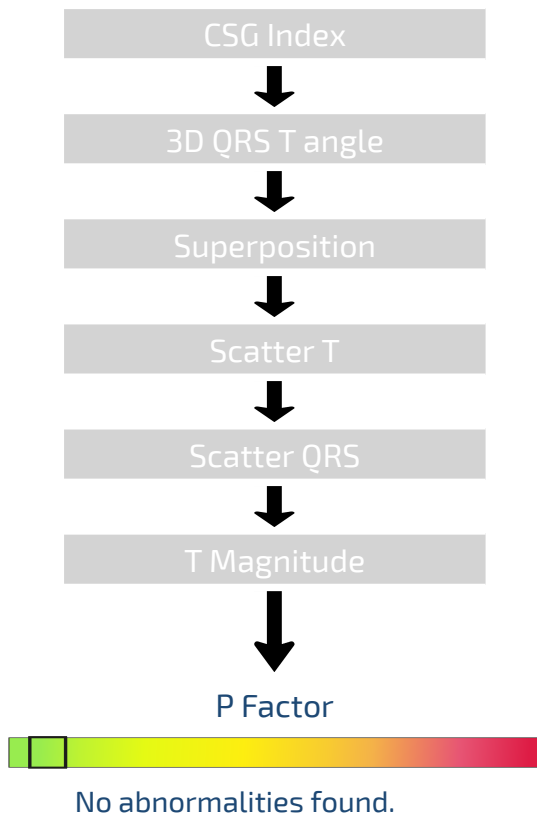
Heartbeats outside the norm can indicate extrasystoles, sinus arrhythmia and cardiac arrhythmias such as atrial fibrillation, atrial flutter or AV block. In combination with the clinical findings, further clarification by means of rhythm analysis in a conventional 12-lead ECG is recommended.



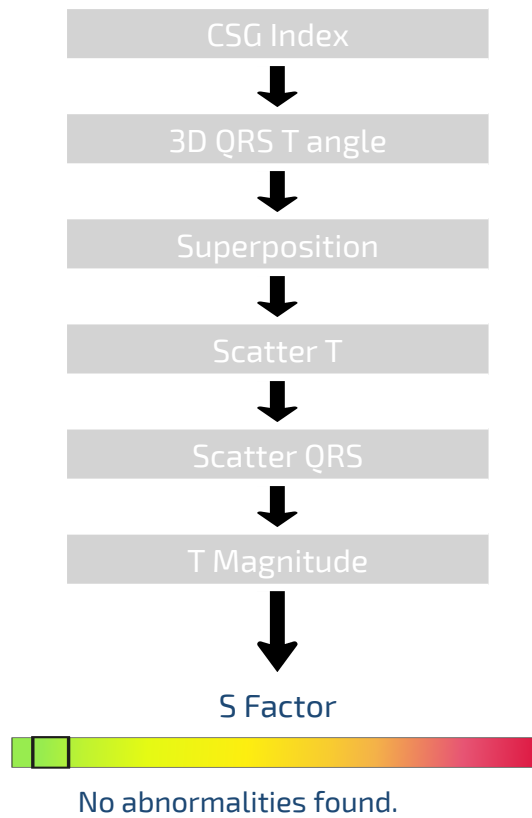


By combining vectorcardiography, electrocardiography and artificial intelligence Cardisioigraphy offers a variety of new parameters for the assessment of cardiac disease. All parameters must be interpreted individually as part of the overall clinical assessment. To aid in the decision-making process, the risk factors for perfusion, structure and arrhythmia with a corresponding decision tree are shown below.

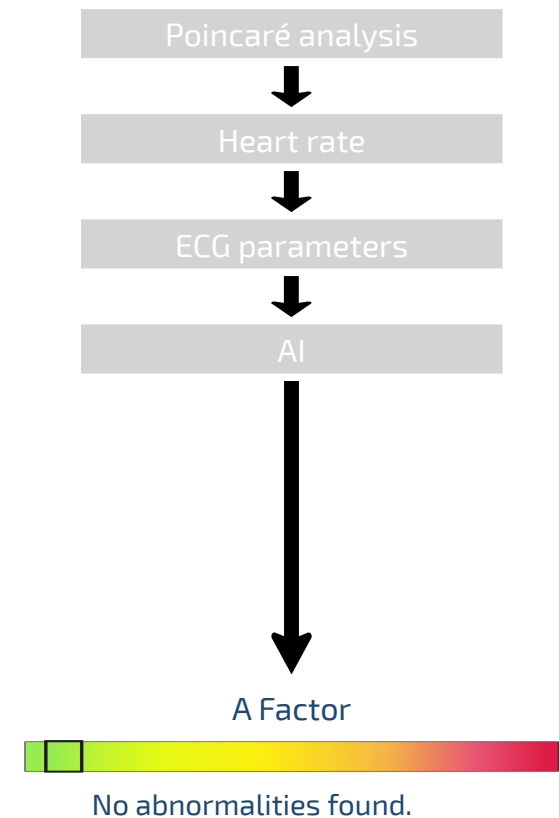
Perfusion



Structure



Arrhythmia



The diagnostic accuracy of the method can vary depending on prevalence and patient profile.