

Transtelephonic Arrhythmia Monitoring Report

dms-service llc

PO Box 3921, Stateline, NV 89449

Telephone: (866) 374-0105 Fax: (800) 441-3437

Patient Information

Name: Sample Patient
ID #: 0001234000
Phone: (555) 123-4567

DOB: 1/1/1976
Sex: Female

Transmission Information

Date: 3/30/2010
Time: 9:53 AM

Referring Physicians

John Smith, MD
 1212 Doctor Ln
 Irvine, ca 92802

Diagnoses

427.90 Arrhythmia (Unspecified)

Study Information

Transmitter: BRAEMAR ER 310
Serial #: 2222
Starting Date: 3/29/2010
Ending Date:

Current Event and Transmission History

#	Date	Time	Symptoms	Findings
1	3/30/2010	9:53 AM	Racing heart	

Symptoms

Racing heart

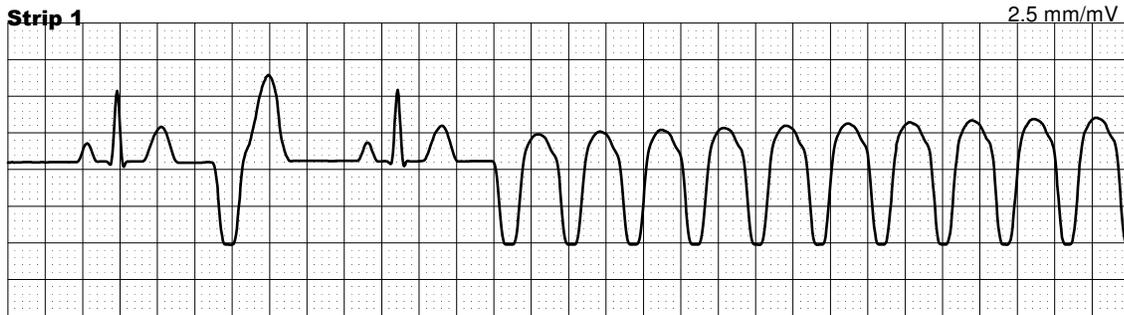
Rhythm Strip Interpretation

Rhythm Strip Findings

Nurse/Tech _____ **la** **Physician:** _____

Measurements

	Min	Max
Rate:	59.7	179.1
PR(s):	0.20	0.14
QRS(s):	0.08	0.07
QT(s):	0.38	0.20



Original Strip 03/30/10 09:56

2.5 mm/mV



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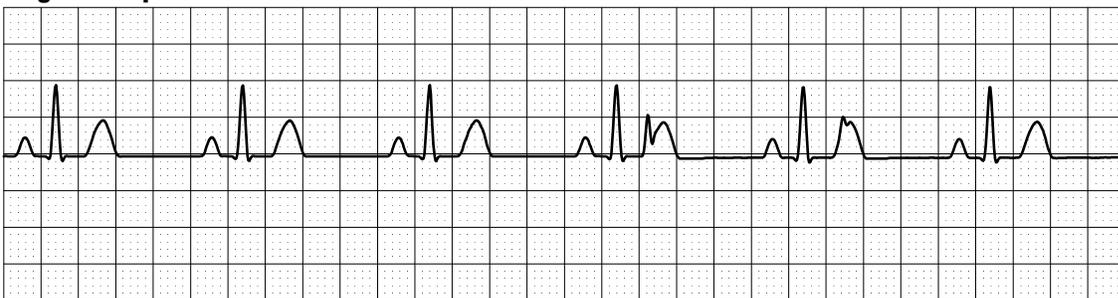
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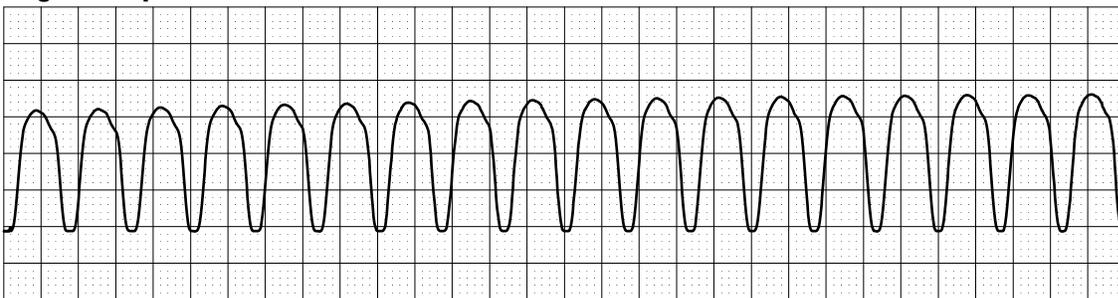
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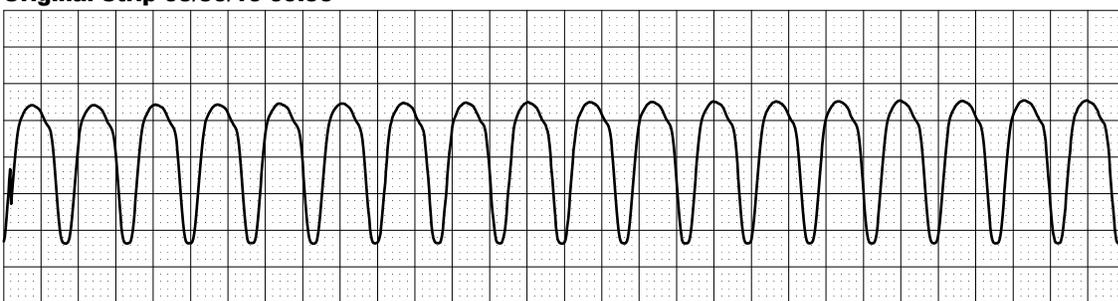
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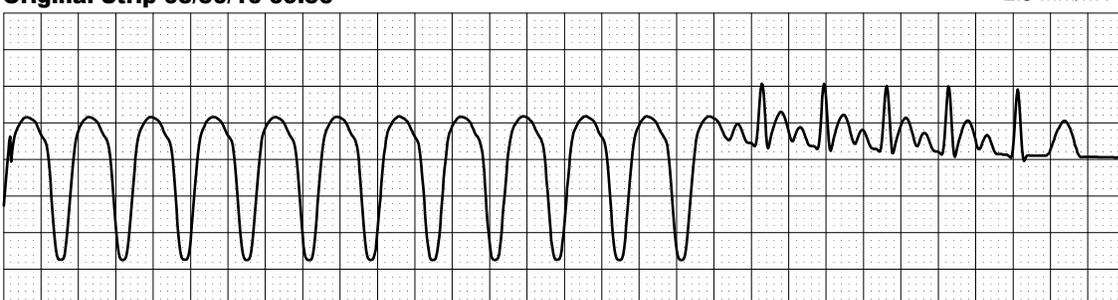
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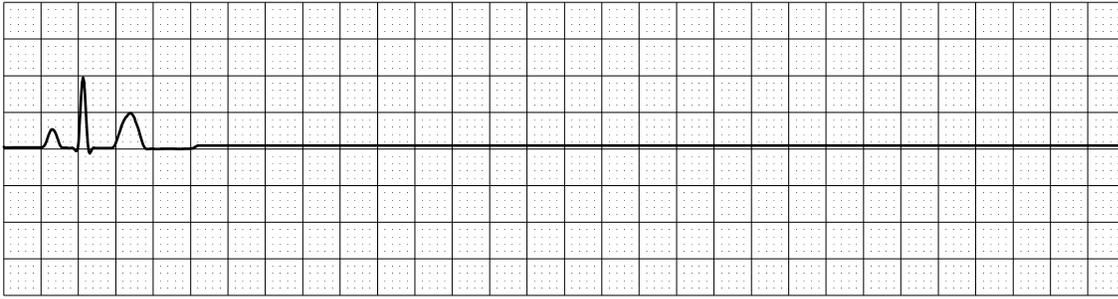
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