

Emergencies A series - 7

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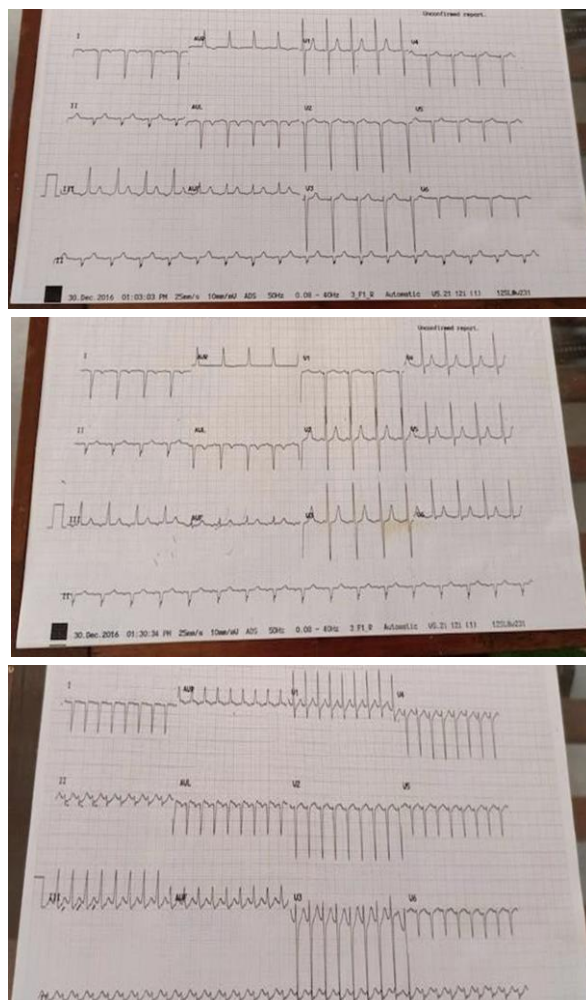
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Introduction: Emergency departments frequently encounter cases of palpitations, particularly in young individuals. Accurate diagnosis and effective management are essential for these patients. This case study highlights an intriguing ECG finding in a 21-year-old female college student who presented with palpitations.

Case Presentation: A 21-year-old female college student presented to the Emergency Department (ED) with complaints of palpitations. On examination, she was found to have a clinically

prominent systolic murmur. Her medical history included congenital heart disease, for which she was under the care of a cardiologist. She had recurrent episodes of supraventricular tachycardia (SVT).

ECG Findings and Management: An initial ECG taken in the ED showed SVT. Further analysis revealed the presence of dextrocardia, a congenital condition where the heart is situated on the right side of the chest. To manage the SVT, the patient was administered intravenous



adenosine, which successfully terminated the tachycardia.

Following the administration of adenosine, a repeat ECG was performed using right-sided chest leads to accommodate for the dextrocardia. ECG confirmed the return to normal sinus rhythm.

Conclusion: This case underscores the importance of considering congenital anomalies,

such as dextrocardia, when interpreting ECGs and managing cardiac arrhythmias in young patients. The use of right-sided chest leads in patients with dextrocardia is critical for accurate diagnosis and effective treatment. This case also highlights the efficacy of IV adenosine in managing SVT and the importance of specialised care for individuals with congenital heart disease.