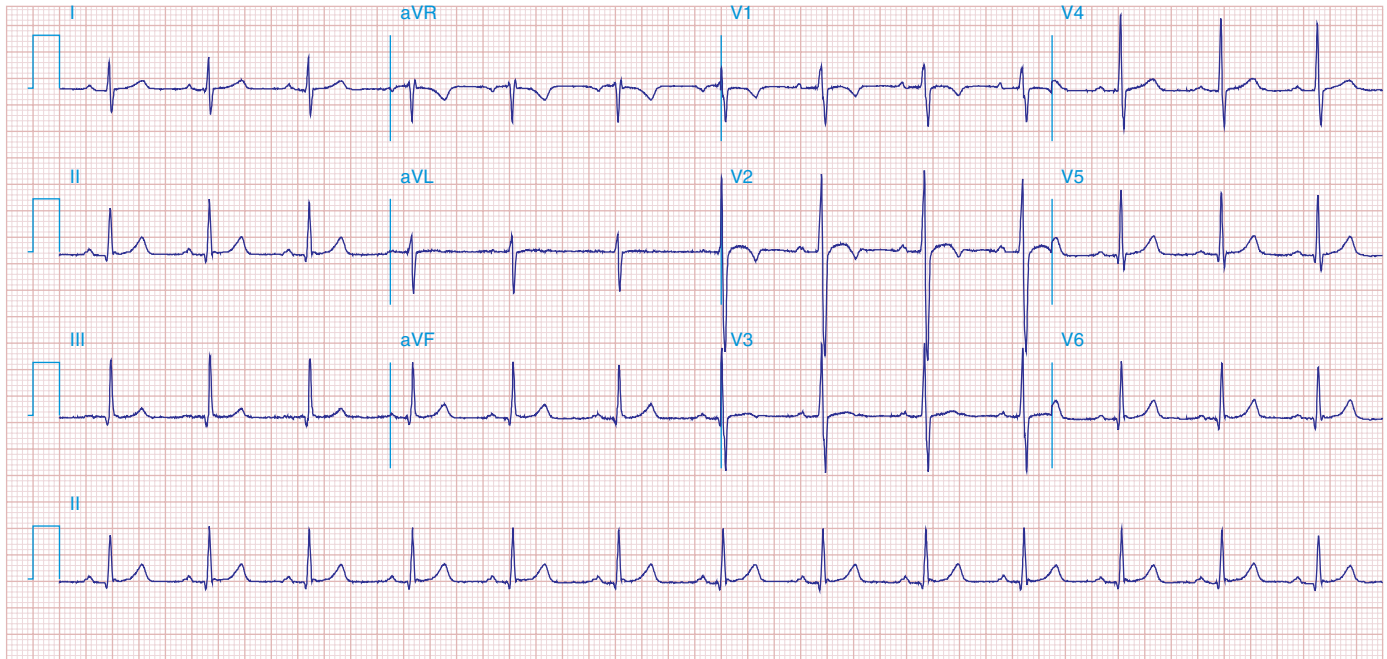


**FIGURE 269e-26** SR with LVH, left atrial abnormality, and tall peaked T waves in the precordial leads with inferolateral ST depressions (II, III, aVF, and V<sub>6</sub>); left anterior fascicular block and borderline prolonged QT interval in a patient with renal failure, hypertension, and hyperkalemia; prolonged QT is secondary to associated hypocalcemia.



**FIGURE 269e-27** Normal ECG in an 11-year-old male. T-wave inversions in V<sub>1</sub>-V<sub>2</sub>. Vertical QRS axis (+90°) and early precordial transition between V<sub>2</sub> and V<sub>3</sub> are normal findings in children.