

# Rules:

1. Teams of 2-3 work best, but it can also be played individually.
2. Match each patient's **History**, **Exam Findings** and **ECG** cards to the correct **Diagnosis** & **Management** cards.
3. Allow 30-45 minutes per game.

# Answer Key:

→ Each case card matches to a **diagnosis** and a **management** card.

→ Refer to this answer key to check if your answers are correct.

Case	Diagnosis	Management
1	%	H
2	&	H
3	£	E
4	*	A
5	!	B
6	@	F
7	=	D
8	#	I
9	~	G
10	+	C

# Patient Case 1

12-year-old male  
presents with 1 week of  
left-sided chest pains.  
Comfortable in triage.

No collapse episodes.

No difficulty in  
breathing.

PMHx: NAD

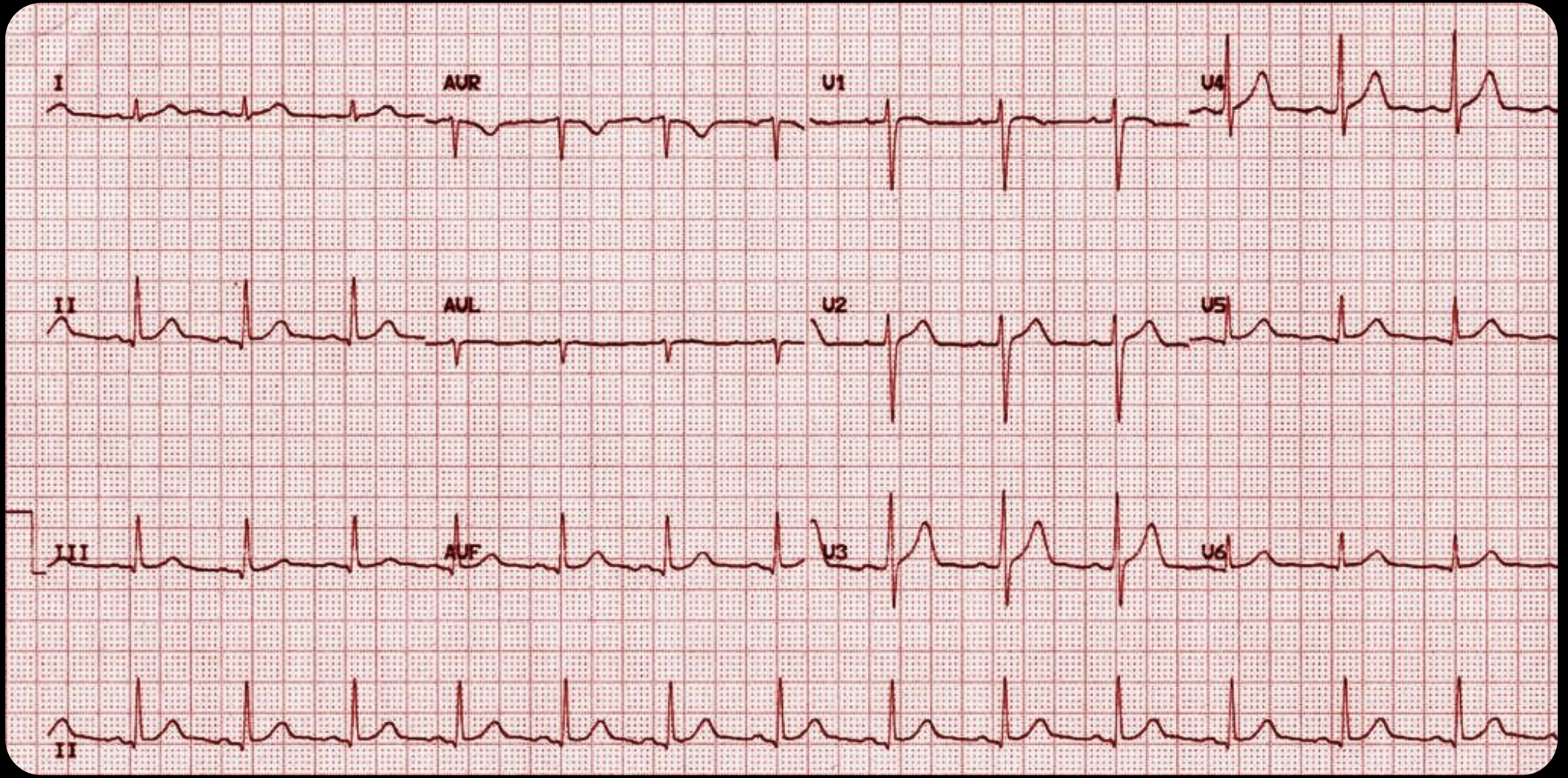
Observations within  
normal limits.

Normal heart sounds  
and breath sounds.

Tender on pressing  
the sternum.



# Patient Case 1





# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves



# Normal ECG

# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves

**No specific  
management  
required.**



# Patient Case 2

6-year-old female  
with generalised  
tonic clonic seizure  
lasting 4 minutes.

Cough and coryza  
for last 2 days.

PMHx: Nil

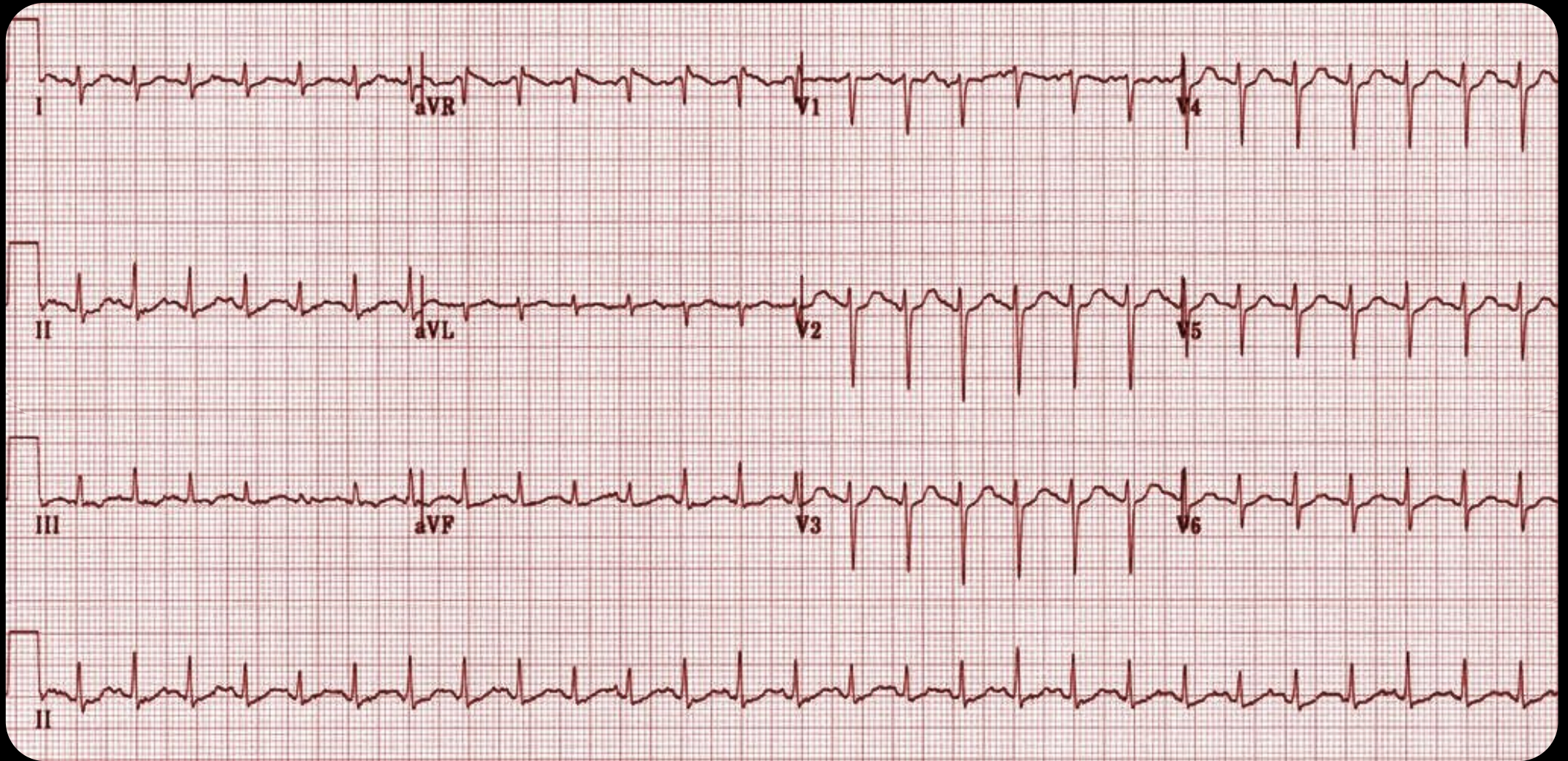
HR 160, RR 30,  
Temp 38.9°C

Hot and flushed.  
CRT 2 seconds.

Normal heart  
sounds.

Postictal.

# Patient Case 2





# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves



# Sinus Tachycardia



# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves

H

**No specific  
management  
required.**

# Patient Case 3

3-week-old with poor feeding, breathlessness & irritability.

PMHx: Term baby, no issues in pregnancy, no sepsis risk factors.

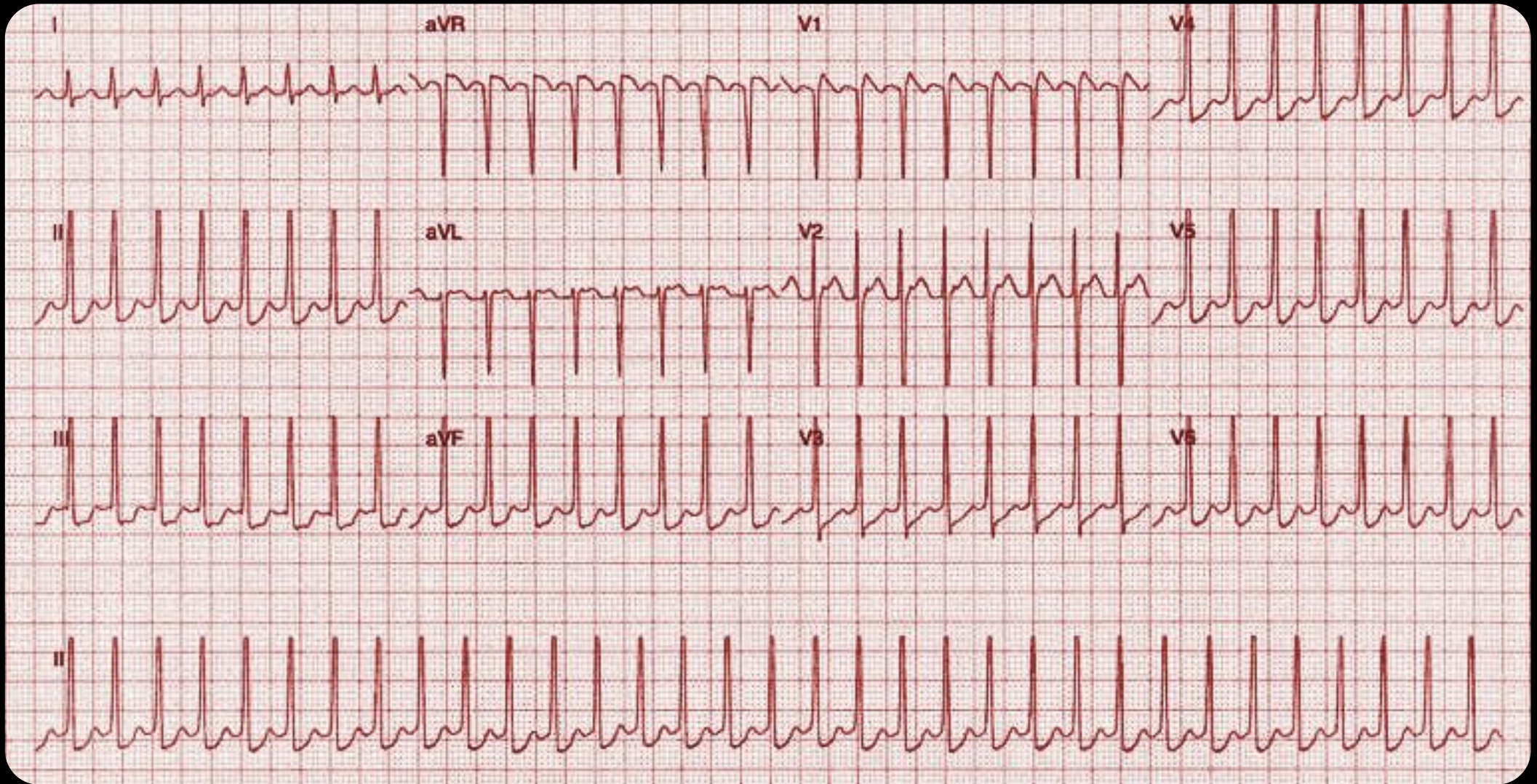
HR 270, RR 70, SpO<sub>2</sub> 97%, Temp 36.6°C

Normal heart sounds.

Liver edge 3 cm below costal margin. Well perfused. Alert.



# Patient Case 3





# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves



# Supra- ventricular Tachycardia

# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves

**Vagal manoeuvres.**

**Adenosine.**

**Follow APLS SVT  
algorithm.**



# Patient Case 4

14-year-old male  
worried after feeling  
that his pulse is  
irregular.

PMHx: hay fever

FHx: none

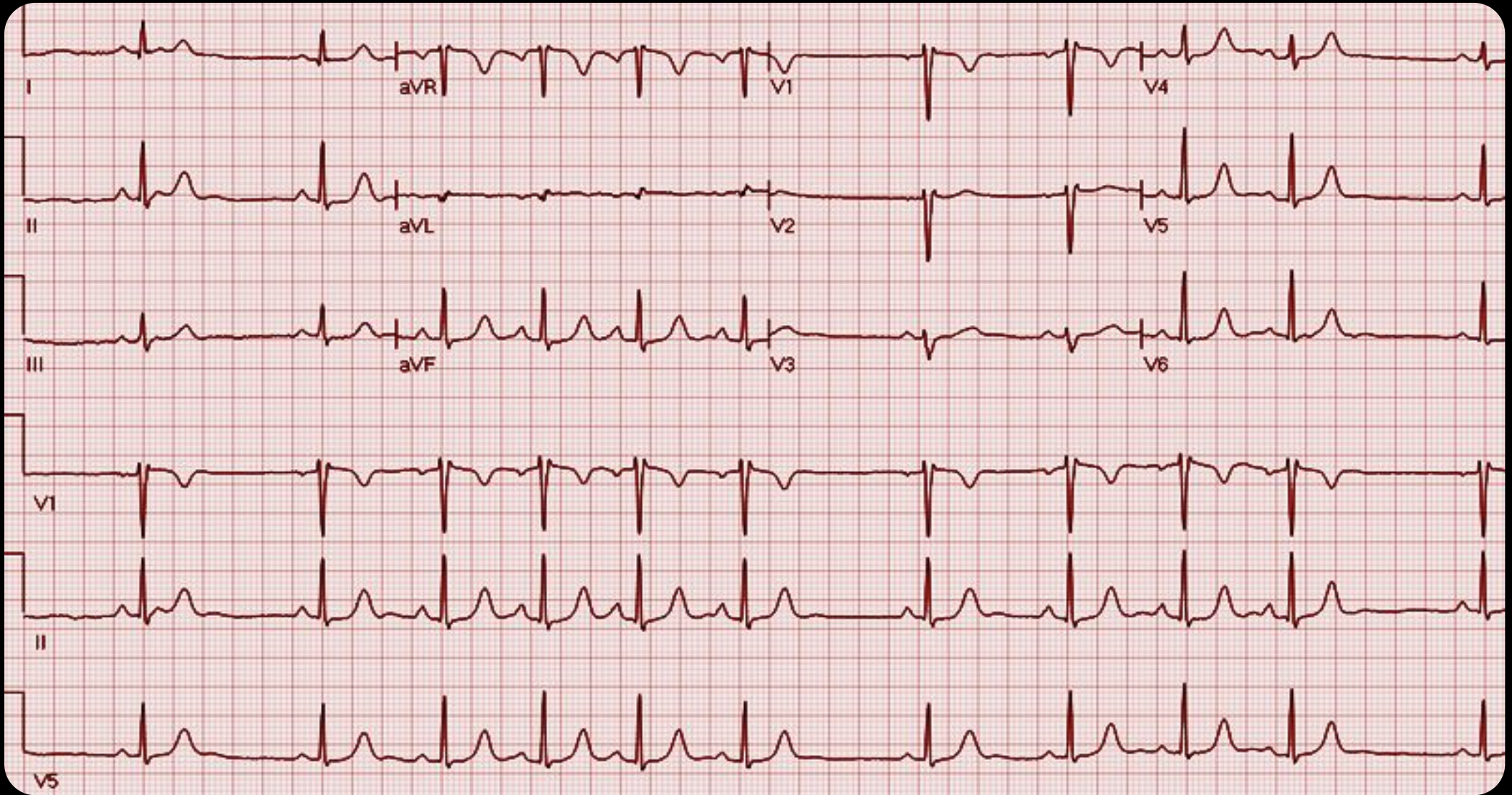
HR 85, RR 12,  
SpO2 99%

Heart sounds normal.

No chest pain.

Irregular pulse,  
quicker when taking  
in a deep breath.

# Patient Case 4





# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves



# Sinus Arrhythmia



# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves



**No intervention  
required, normal  
for age.**

**Reassure.**

# Patient Case 5

15-year-old girl  
collapsed after brief  
period of dizziness  
and palpitations.  
No seizure.

No drowsiness after  
coming round.

PMHx: Eczema

HR 65, RR 14,  
SpO2 99%

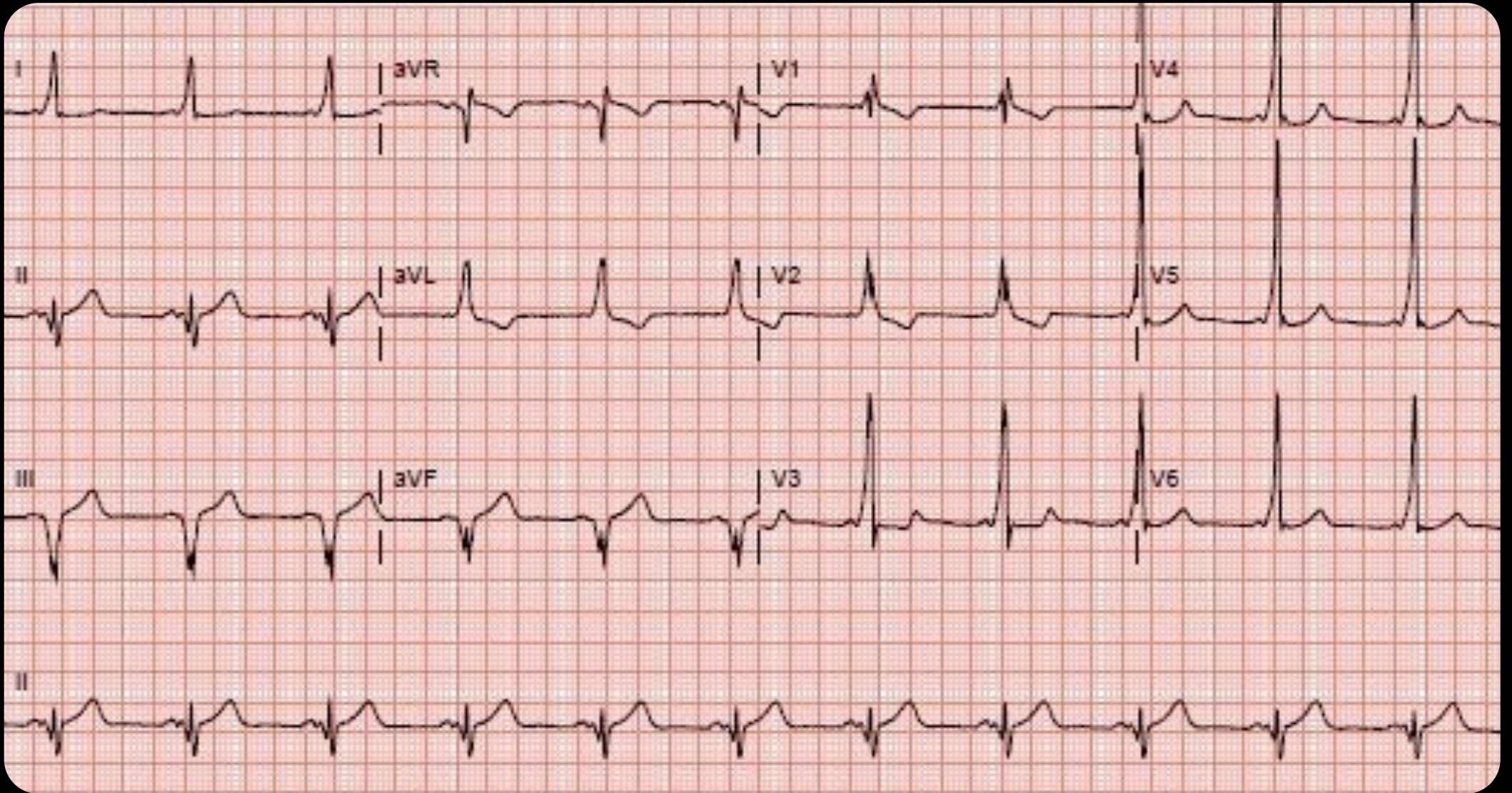
BP Lying = 110/62

BP Standing = 115/60

Normal heart  
sounds, clear chest.  
Regular pulse.



# Patient Case 5





# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves



# Wolff- Parkinson- White (WPW) Syndrome

# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves



**B**

# **Follow-up with Paediatric Cardiology.**

# Patient Case 6

16-year-old female.  
Collapse episode and  
cardiac arrest whilst  
playing football.  
Successful resuscitation.

PMHx: none

FHx: sudden unexplained  
deaths in several  
relatives of dad.

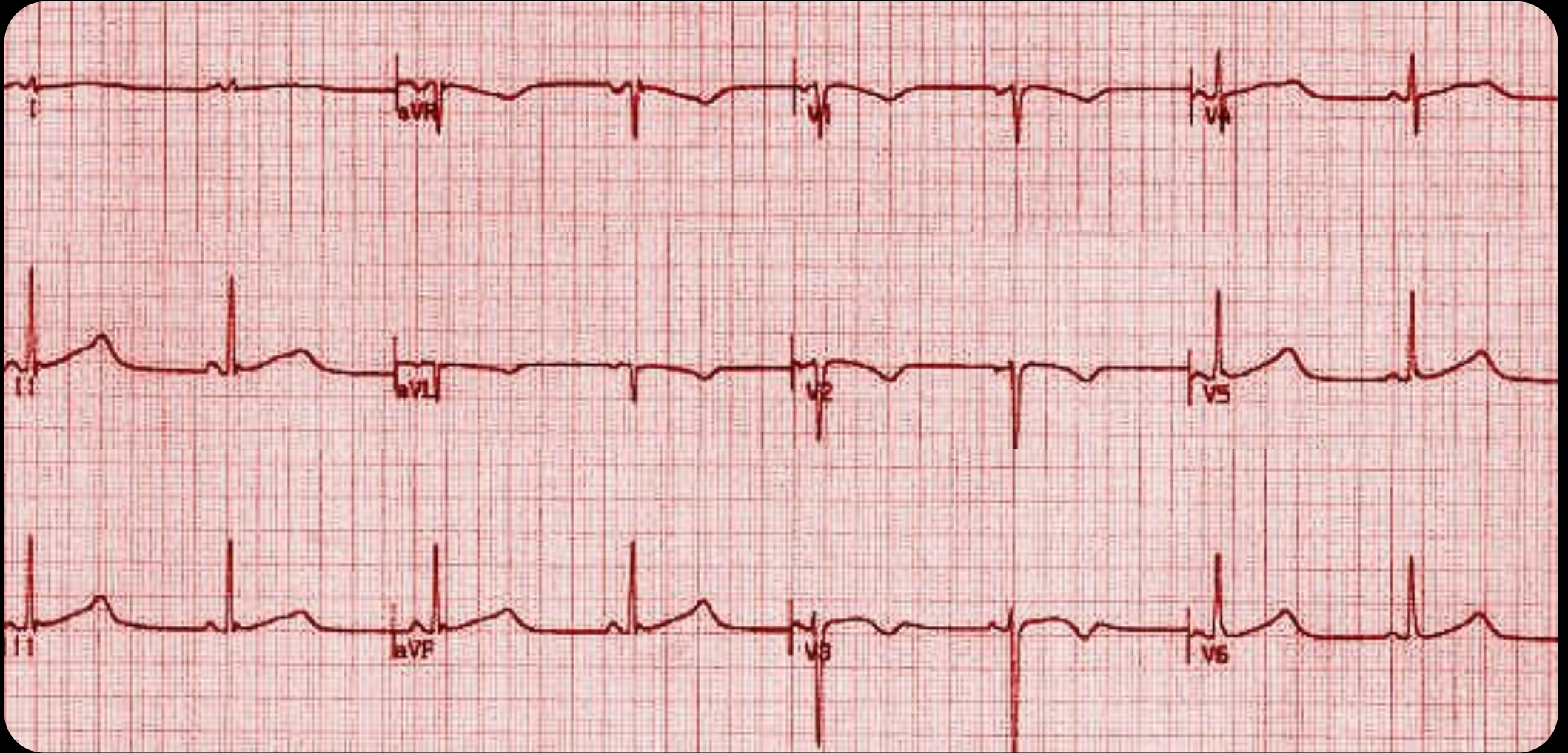
Meds: nil

Intubated, sedated  
and on inotropic  
support.

Normal heart  
sounds, clear chest.

No palpable liver  
edge.

# Patient Case 6





# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves



# Long QT Syndrome

# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves



F

# Review by Paediatric Cardiology.

# Patient Case 7

15-year-old male  
with worsening  
central chest pain.

Recent cough and  
cold symptoms.

PMHx: epilepsy

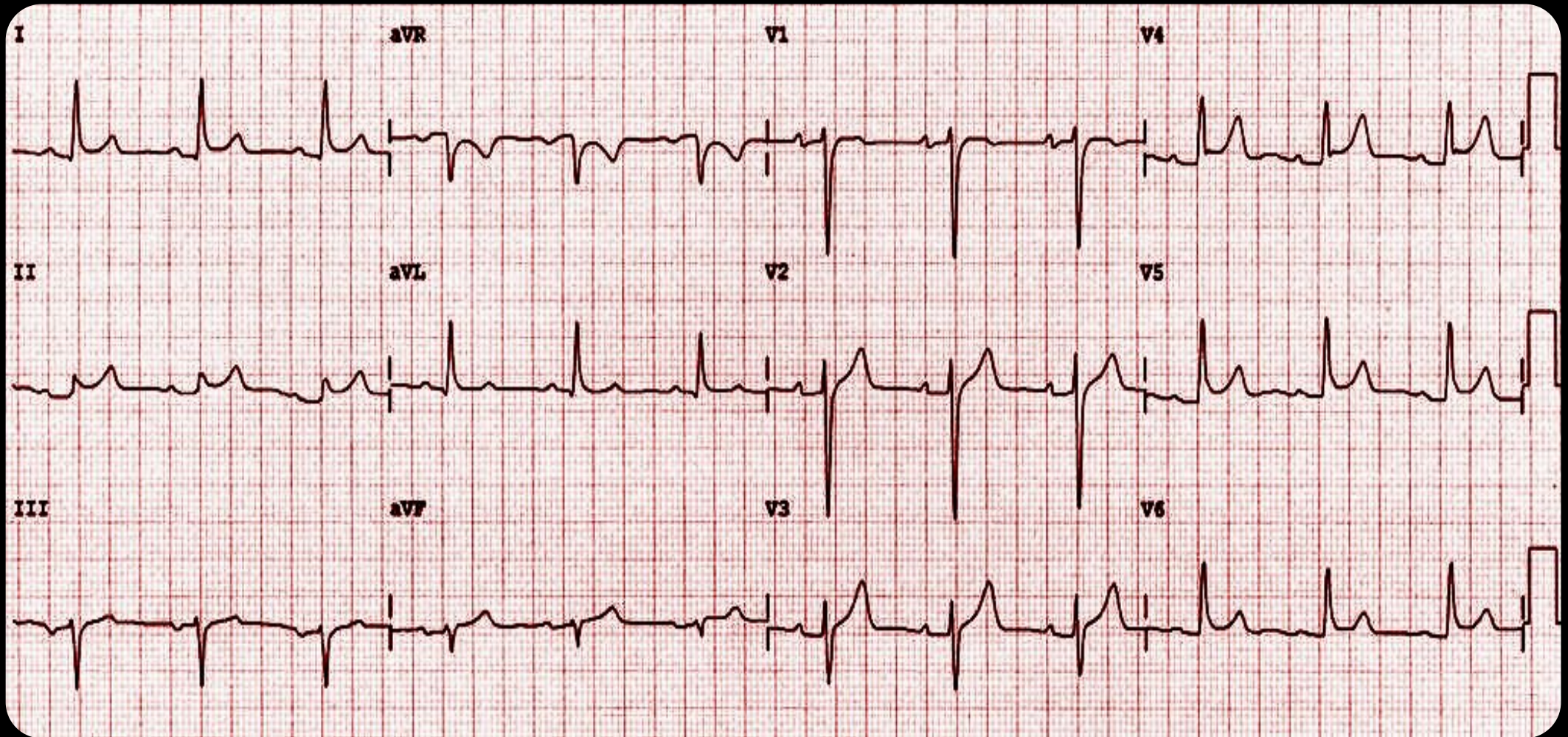
HR 75, RR 18,  
SpO2 99%

Temp 37.4°C

No chest wall  
tenderness.

Heart sounds normal  
but with a rub.

# Patient Case 7





# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves





# Pericarditis

# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves



**CXR, bloods  
including troponin.**

**NSAIDs.**

**Discuss with  
Paediatric Cardiology.**

# Patient Case 8

4-year-old boy with bloody diarrhoea & vomiting for 5 days.

Not tolerating oral fluids.

No urine output for 2 days.

PMHx: none

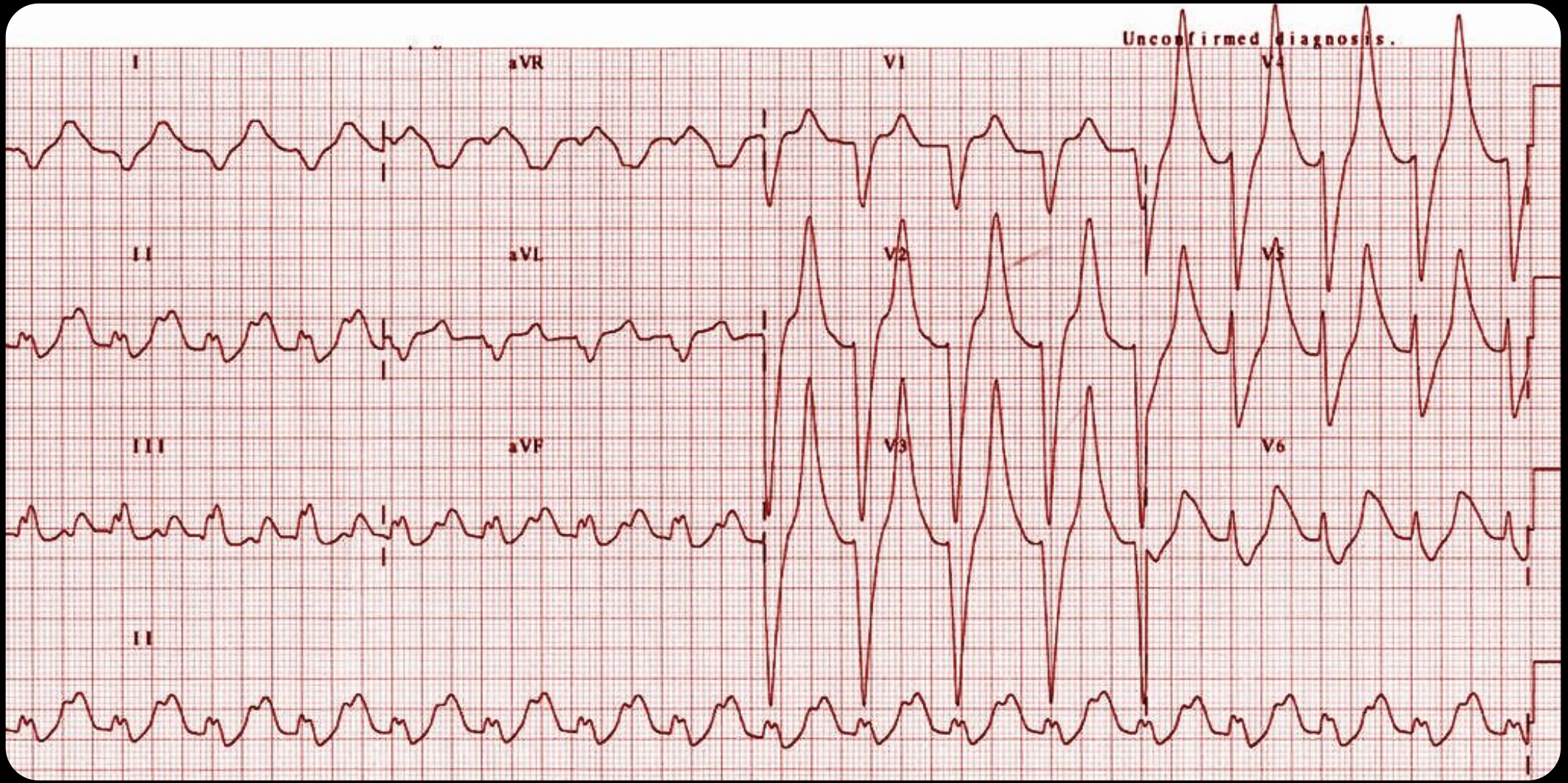
HR 130, RR 30,  
SpO2 99%, Temp 37.3°C

Pale, clinically dry with poor perfusion.  
Lethargic.

Bloods show raised urea & creatinine, alongside high potassium.



# Patient Case 8

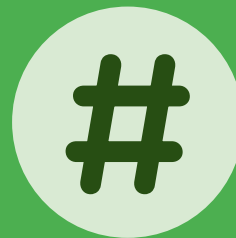




# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves



# Hyper- kalaemia

# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves



**Calcium gluconate.**



**Fluid resuscitation.**

**Insulin/dextrose.**

**Salbutamol.**

# Patient Case 9

12-year-old male  
attending with  
seizure.

Found near multiple  
packets of  
Fluoxetine.

PMHx: depression

HR 125→300,  
RR 12, SpO2 97%,  
Temp 37.8°C

Postictal. Flushed.  
CRT <2.

Heart sounds  
normal, chest clear.  
PERL.

# Patient Case 9



# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves



# Torsades des pointes (Polymorphic VT)

# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves

# Check for a pulse!

A white circle containing a bold, black letter 'G'.

**If pulse present:**

**IV Magnesium sulphate,  
repeat after 5 minutes  
if unresolved.**

# Patient Case 10

3-week-old term boy with breathlessness & cyanosis.

PMHx: Term delivery, no issues in pregnancy.

HR 200, RR 70, SpO<sub>2</sub> 80% in air, Temp 36.4°C

Systolic murmur on auscultation. Poor volume peripheral pulses.

CXR shows oligaemic lung fields.



# Patient Case 10



# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves

# Superior Axis



(possible  
congenital  
heart disease)



# Cards Against Paediatric ECGs



A medical education game by Dr Andy Reeves





**IV Prostin/  
Dinoprostone  
immediately.**

**Transfer to PICU.**