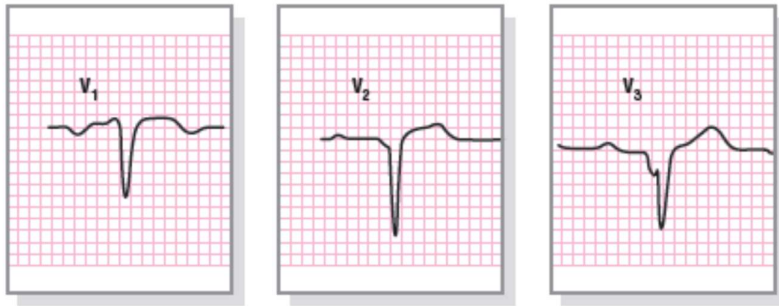


- Anterior or anteroseptal MI (age indeterminate or old)



- Abnormal Q waves (> 20 msec in V2, V3, > 30 msec in V4) without significant ST segment elevation in at least 2 contiguous leads between V2 to V4

The Cardiology Board Score Sheet lists “anteroseptal or anterior MI” as a single code and, for testing purposes, does not distinguish between the two.

In contrast to the Cardiology Board certifying examination, in clinical practice, acute anteroseptal MI and acute anterior MI are diagnosed separately:

- Old anteroseptal Q wave MI is diagnosed by the presence of abnormal Q waves without significant ST elevation in leads V1 to V3. In addition, lead V<sub>4</sub> may also show an abnormal Q wave without significant ST elevation. This is an exception to the “2 consecutive lead” rule as a Q wave in lead V<sub>1</sub> is often seen in normals.
- Old anterior Q wave MI is diagnosed by the presence of abnormal Q waves without significant ST segment elevation in 2 consecutive leads between V2 to V4.
- Q waves in lead V1 help to differentiate anteroseptal from anterior Q wave MI.