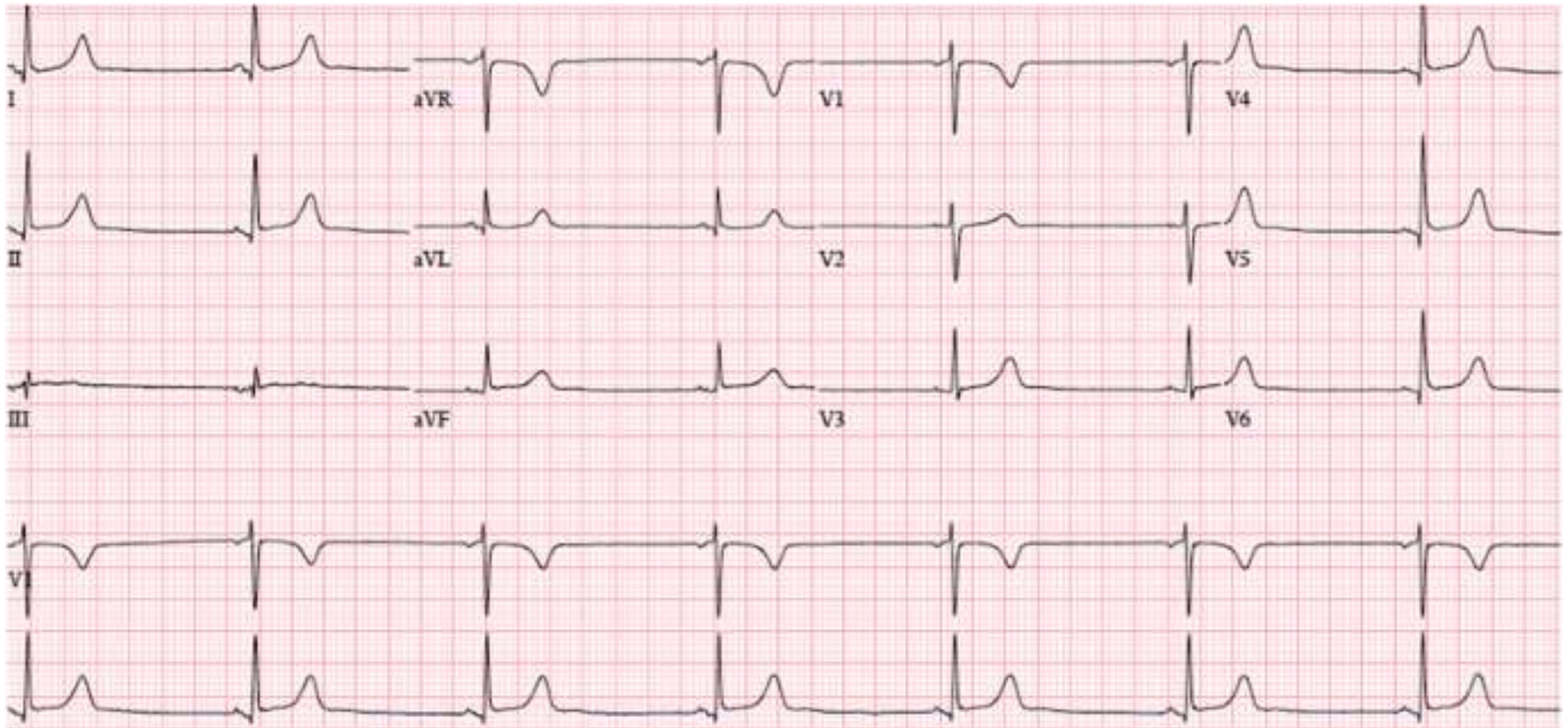


- Sinus bradycardia



- Normal P wave axis and morphology
- Rate < 60 BPM

Causes include:

- High vagal tone (normals, especially during sleep; trained athletes; pain; inferior MI; pulmonary embolism)
- Drugs (beta-blockers, verapamil, diltiazem, digitalis, Type IA, IB, IC antiarrhythmics, amiodarone, sotalol, clonidine, methyldopa, lithium)
- Hypothyroidism
- Hypothermia
- Hyperkalemia
- Increased intracranial pressure
- Sick sinus syndrome (SSS)

Blocked APCs occurring in a bigeminal pattern or 2:1 AV block may be mistaken for sinus bradycardia (pseudo-sinus bradycardia); the APC or dropped P waves may appear as a subtle deformity of the T wave.