ECG Dilemma

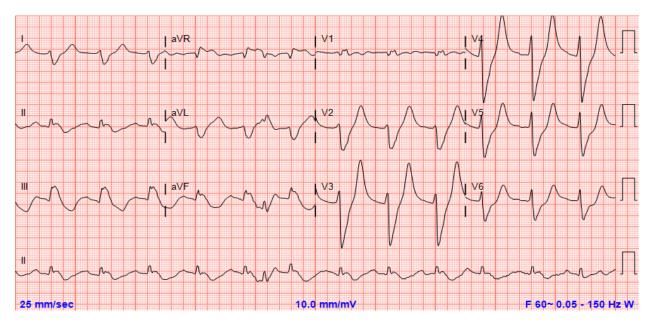
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A 45-year-old white female with past medical history of type 2 diabetes mellitus, hypertension, coronary artery disease, chronic kidney disease stage 3, diabetic retinopathy and nephropathy presented to the emergency department for complaints of fatigue, nausea, mild fever and cough. She reports taking non-steroidal anti-inflammatory drugs (NSAIDs) for myalgias. She also complained of chest discomfort which was worse upon taking a deep breath. A 12-lead ECG was performed which is shown below. Labs are pending.



ECG courtesy of Mary Dohrmann MD

The next step in the patient's management is:

- 1. Administer oral sodium polystyrene sulfonate (Kayexalate®)
- 2. Administer intravenous amiodarone 300 mg bolus
- 3. Administer 2 gm of intravenous magnesium sulfate
- 4. Activate the cardiac catheterization laboratory
- 5. Administer intravenous calcium gluconate

See answer in the next article, "Answer to the ECG Dilemma".