~tall, peaked T wave = MI injury or hyperkalemia (high potassium)
- QT interval - ventricular and depolarization and repolarization
  ~ normal range: 0.36-0.44 sec
  ~ short repolarization - hypercalcemia (**double check this)
-U wave - if visible it looks like P wave after T wave
  - caused by too much calcium
  - too much = high and peaked T wave (hypocalcemia)

-immediately after cells depolarize, muscle contracts

- PR Interval - time from the beginning of P wave to beginning of QRS
  - normal range 0.12-20 sec
- PR segment is the time when t cells slow down impulse transmission to the ventricles
- Normal duration - ½ the PR interval time
- Notched R wave - BBB (bundle branch block → change in speed of depolarization process) → looks different on ECG
- Wide QRA - conduction relay
- Depolarization = contraction = pulse

- Question: depolarization always causes a palpable pulse
  A: false
  - not every depolarization is not going to cause a surge in blood

- To count ventricular rate = count t waves
- To count atrial rate = count p waves