TRIAGETRAIL MEDICAL ACADEMY

ECG Foundations Learner Workbook

Context, recording quality and safe learning boundaries

FOUNDATION PATHWAY / PRODUCT DRAFT v0.2

This workbook supports a draft online knowledge course. It is not clinical guidance and does not certify practical skill, interpretation competence or authorisation. Complete it without patient-identifiable information.

How to use this workbook

Work through one section after each online module. Write in your own words. Use your employer's current procedure and supervision route for practical recording questions. Do not upload names, dates of birth, ECGs or other patient-identifiable material.

Evidence boundary	Your answers show reflection on course concepts. They do not demonstrate observed practical competence.

Your details

Name

Role and learning setting

What do you want to understand by the end?

Signal, Not Squeeze

An ECG records cardiac electrical activity. It does not directly measure blood pressure, oxygen saturation or the mechanical force of contraction.

Pause point	Use synthetic or non-identifying examples. Follow local policy for any workplace discussion.

Explain an ECG to a new colleague in two plain-language sentences.

List two measurements that an ECG does not directly provide.

Contacts And Views

An electrode is a physical contact. A lead is an electrical view. A standard twelve-lead recording generally uses ten electrodes to provide twelve conventional perspectives.

Pause point	Use synthetic or non-identifying examples. Follow local policy for any workplace discussion.

Write your own analogy for the difference between a contact and a view.

Where is your current local recording procedure kept, and who can supervise you?

Quality Before Conclusions

Movement, poor contact, connection problems and other technical factors can affect the displayed signal. Separate the question 'is this suitable to interpret?' from 'what might this mean?'.

Pause point	Use synthetic or non-identifying examples. Follow local policy for any workplace discussion.

Record three checks or questions you would raise when quality is uncertain.

Describe how you would document and escalate uncertainty within your role.

Waveform Language

In introductory language, the P wave represents atrial depolarisation, the QRS complex ventricular depolarisation, and the T wave ventricular repolarisation. Naming components is not the same as diagnosing a rhythm.

Pause point	Use synthetic or non-identifying examples. Follow local policy for any workplace discussion.

Describe P, QRS and T without making a diagnosis.

What additional teaching or supervision do you need before interpretation is part of your role?

Context And Limits

Automated text is information to review, not a transfer of responsibility to a machine. A tracing must be considered with the reason for recording, the presentation, recording quality and appropriate clinical review.

Pause point	Use synthetic or non-identifying examples. Follow local policy for any workplace discussion.

A machine prints 'normal'. List the questions that remain unanswered.

Write one example of how a result could be stretched beyond what it establishes.

06 / KNOWLEDGE CHECK

Before the scored assessment

Answer these without looking back, then review the relevant module. The online assessment uses a larger reviewed bank.

1. What does an ECG directly record?

2. Explain electrode versus lead.

3. Why can movement matter?

4. What does the QRS complex represent in introductory electrical language?

5. Why is 'normal' automated text not the whole assessment?

07 / ACTION PLAN

Turn knowledge into a safe next step

Choose an action that fits your role and can be checked later.

One concept I can now explain:

One uncertainty I still have:

The current source or local procedure I will consult:

The person or supervisor I will speak with:

My specific next action and review date:

Completion reminder	A course certificate records online learning and assessment. Practical competence requires the appropriate workplace process, observation and authorisation.

Clinical reviewer page

Remove this page from the learner edition after review is complete.

Reviewer name and professional role:

Registration or relevant credential checked:

Course version reviewed:

Clinical corrections required:

Assessment bank checked:

Approved date / next review date:

Source starting points

British Heart Foundation: bhf.org.uk/informationsupport/tests/ecg
Resuscitation Council UK: Monitoring, rhythm recognition and 12-lead ECG learning resources
NICE CG95: Recent-onset chest pain recommendations

Sources checked 16 September 2026. Final reviewer must confirm accuracy, currency, audience suitability and local-policy boundaries before sale.