Supplementary Table S3. Summary of patients referred to cardiology based on initial ECG findings

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| Pt | Symptom Severity | Initial ECG Findings | Follow-up Testing | Follow-up ECG Findings | Additional Findings | Outpatient Visits | Final Diagnosis | Follow-up Plan |
| 1 | Mild | NSR, Possible LVH | Echo | - | *Echo*: normal | 1 | No heart disease | PRN |
| 2 | Mild | NSR, Sinus arrhythmia, ST elevation (non-specific) | None | - | - | 1 | No heart disease | PRN |
| 3 | Mild | NSR, Sinus arrhythmia, IRBBB/RVCD/RSR' V1 | Echo | - | *Echo*: normal | 1 | No heart disease | PRN |
| 4 | Asymptomatic | Sinus bradycardia, NSIVCD | ECG | Sinus bradycardia, Sinus arrhythmia, NSIVCD | - | 1 | No heart disease | PRN |
| 5 | Mild | NSR, LVH | ECG, Echo | Sinus bradycardia, possible LVH | *Echo*: normal | 1 | No heart disease | PRN |
| 6 | Mild | NSR, IRBBB/RVCD/RSR' V1 | ECG, Echo | NSR, IRBBB/ RVCD/RSR' V1 | *Echo*: normal | 1 | No heart disease | PRN |
| 7 | Mild | Sinus bradycardia, Prolonged QTc (484 msec) | ECG (2), Echo, EST | 1. Sinus bradycardia, prolonged QTc (500 msec)  2. Sinus bradycardia,  T wave abnormality (non-specific) | *Echo*: normal  *EST*: QTc in early recovery measures  500 msec | 2 | Congenital long QT syndrome (gene positive for KCNH2 mutation) | Beta blocker, follow-up 3 months |
| 8 | Mild | NSR, Sinus arrhythmia, Rightward axis | ECG, Echo | NSR, Rightward axis, IRBBB/RVCD/RSR' V1 | *Echo*: non-obstructive cor triatriatum sinister | 1 | Cor triatriatum sinister | Follow-up 1 year |
| 9 | Mild | NSR, Possible RAE | ECG | NSR, Normal ECG | - | 1 | No heart disease | PRN |
| 10 | Mild | NSR, ST elevation (non-specific) | None | - | - | 1 | No heart disease | PRN |
| 11 | Moderate | NSR, Rightward axis, RAE | ECG, Echo | Sinus bradycardia, Rightward axis | *Echo*: normal | 1 | No heart disease | PRN |
| 12 | Mild | Sinus bradycardia, short PR interval | None | - | - | 1 | No heart disease | PRN |
| 13 | Mild | Low right atrial rhythm, Possible LVH | ECG | Low right atrial rhythm | - | 1 | No heart disease | PRN |
| 14 | Mild | NSR, Sinus arrhythmia, RAE | ECG, Echo | NSR, Normal ECG | *Echo*: normal | 1 | No heart disease | PRN |
| 15 | Mild | Sinus bradycardia, IRBBB/RVCD/RSR' V1 | ECG, Echo | Sinus bradycardia, RAD, IRBBB/RVCD/RSR' V1 | *Echo*: normal | 1 | No heart disease | PRN |
| 16 | Mild | NSR, Possible RAE | ECG | NSR, Normal ECG | - | 1 | No heart disease | PRN |
| 17 | Mild | NSR, RBBB | Echo | - | *Echo*: normal | 1 | No heart disease | PRN |
| 18 | Asymptomatic | NSR, Sinus arrhythmia, IRBBB/RVCD/ RSR' V1 | None | - | - | 1 | No heart disease | PRN |
| 19 | Mild | NSR, Sinus arrhythmia, IRBBB/RVCD/ RSR' V1 | None | - | - | 1 | No heart disease | PRN |
| 20 | Mild | Low right atrial bradycardia, ST elevation (non-specific), IRBBB/RVCD/RSR' V1, Possible LVH | ECG, Echo, CMR, EST | Sinus bradycardia, Early repolarization, IRBBB/RVCD/ RSR' V1, Possible LVH | *Echo*: prominent LV apical trabeculations; no thrombus  *CMR*: prominent LV apical trabeculations not meeting criteria for noncompaction, no myocardial scarring or diffuse fibrosis  *EST*: normal | 1 | Prominent LV trabeculations | Follow-up 1 year |
| 21 | Mild | NSR, Sinus arrhythmia, Rightward axis | ECG, Echo | NSR, Sinus arrhythmia | *Echo*: normal | 1 | No heart disease | PRN |
| 22 | Mild | Low right atrial rhythm, Possible RVH | ECG, Echo | Low right atrial rhythm | *Echo*: normal | 1 | No heart disease | PRN |
| 23 | Mild | NSR, PVCs, RAE | Echo, Holter | - | *Echo*: normal  *Holter*: 3.3% mono-morphic, isolated PVCs | 1 | PVCs | Follow-up 6 months |
| 24 | Mild | Sinus bradycardia, ST elevation (non-specific) | ECG, Echo | NSR, Sinus arrhythmia | *Echo*: normal | 1 | No heart disease | PRN |
| 25 | Mild | NSR, Peaked T waves | ECG | NSR, Peaked T waves | - | 1 | No heart disease | PRN |
| 26 | Mild | Normal sinus rhythm, short PR interval | ECG, Echo, Holter | Regular atrial rhythm (low right atrial rhythm) | *Echo*: normal  *Holter*: <1% atrial and ventricular ectopy, no complex ectopy. Single episode of 2˚ Mobitz 1 AVB, frequent transition of NSR to ectopic atrial rhythm | 1 | No heart disease | PRN |
| 27 | Mild | Low right atrial rhythm | ECG | NSR, Normal ECG | - | 1 | No heart disease | PRN |
| 28 | Mild | NSR, T-wave abnormality (non-specific) | ECG, Echo | NSR, T-wave abnormality (non-specific) | *Echo*: normal | 1 | No heart disease | Follow-up 6 months |
| 29 | Mild | NSR, T-wave abnormality (non-specific) | ECG, Echo | NSR, T-wave abnormality (non-specific) | *Echo*: normal | 1 | No heart disease | PRN |
| 30 | Asymptomatic | Sinus bradycardia, ST abnormality (non-specific) | ECG, Echo | NSR, Sinus arrhythmia, possible RVH | *Echo*: normal | 1 | No heart disease | PRN |
| 31 | Mild | NSR, junctional escape complexes | Holter | - | *Holter*: sinus rhythm with occasional junctional rhythm, otherwise normal | 1 | No heart disease | PRN |
| 32 | Mild | Sinus bradycardia, ST elevation (non-specific) | None | - | - | 1 | No heart disease | PRN |
| 33 | Mild | Sinus bradycardia, ST elevation (non-specific), NSIVCD | None | - | - | 1 | No heart disease | PRN |
| 34 | Mild | NSR, Sinus arrhythmia, T-wave abnormality (non-specific) | ECG, Echo | NSR, Sinus arrhythmia | *Echo*: mild dilation of ascending aorta (Z=2.46) | 1 | Ascending aorta dilation | Follow-up 2 years |
| 35 | Asymptomatic | NSR, T-wave abnormality (non-specific) | ECG | NSR, Normal ECG | - | 1 | No heart disease | PRN |
| 36 | Mild | Sinus tachycardia, IRBBB/RVCD /RSR' V1 | ECG, Echo | NSR, NSIVCD | *Echo*: normal | 1 | No heart disease | PRN |
| 37 | Mild | NSR, ST elevation (non-specific) | ECG | NSR, Normal ECG | - | 1 | No heart disease | PRN |
| 38 | Mild | NSR, Possible LVH | ECG, Echo | NSR, LVH | *Echo*: bicuspid aortic valve, mild AI, mildly dilated ascending aorta | 1 | Bicuspid aortic valve | Follow-up timing to be determined |
| 39 | Mild | NSR, Rightward axis, Borderline QTc (466 msec) | ECG | Sinus bradycardia, normal QTc (426 msec) | - | 1 | No heart disease | PRN |
| 40 | Mild | NSR alternating with low right atrial rhythm, IRBBB/RVCD/ RSR' V1 | ECG, Echo | Low right atrial rhythm, Rightward axis, IRBBB/RVCD/ RSR' V1 | *Echo*: normal | 1 | No heart disease | PRN |
| 41 | Mild | NSR, Sinus arrhythmia, T-wave abnormality (non-specific) | ECG, Echo | NSR, Sinus arrhythmia, T-wave abnormality (non-specific) | *Echo*: normal | 1 | No heart disease | PRN |
| 42 | Mild | Sinus bradycardia | None | - | - | 1 | No heart disease | PRN |
| 43 | Mild | NSR, Borderline QTc  (465 msec) | ECG, Echo, Holter, EST | NSR, Normal ECG  (QTc 415 msec) | *Echo*: normal  *Holter*: NSR alternating with ectopic atrial rhythm; otherwise normal  *EST*: normal; QTc does not prolong with exercise | 1 | No heart disease | Follow-up 6 months |
| 44 | Mild | NSR, NSIVCD | ECG, Echo, Holter | Low right atrial rhythm, occasional PACs | *Echo*: discrete narrowing distal to LSCA without flow acceleration.  *Holter*: 2% atrial PACs, no complex ectopy. | 1 | PACs | Follow-up 1 year |
| 45 | Mild | Sinus bradycardia, RAE | ECG | Sinus bradycardia | - | 1 | No heart disease | PRN |
| 46 | Mild | NSR, Borderline QTc  (464 msec) | ECG, Echo | NSR, Borderline QTc  (462 msec) | *Echo*: normal | 1 | Borderline prolonged QTc interval | Follow-up 2 months |

*Key*: ECG, electrocardiogram; Echo, echocardiogram; EST, exercise stress test; CMR, cardiac magnetic resonance; NSR, normal sinus rhythm; LVH, left ventricular hypertrophy; RBBB, right bundle branch block; IRBBB, incomplete right bundle branch block; RVCD, right ventricular conduction delay; NSIVCD, non-specific intraventricular conduction delay; RAE, right atrial enlargement; RAD, right axis deviation; PVCs, premature ventricular contractions; AVB, atrioventricular block; RVH, right ventricular hypertrophy; MR, mitral regurgitation; AI, aortic insufficiency; PACs, premature atrial contractions; LSCA, left subclavian artery.