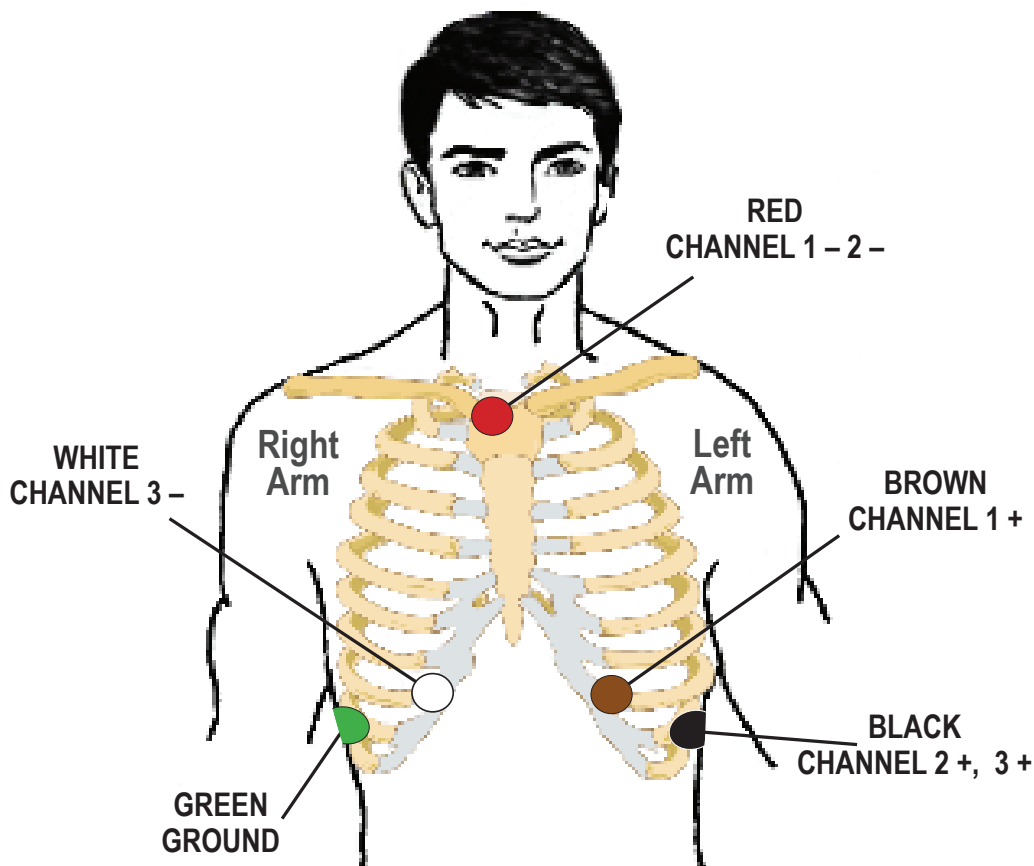


## NASIFF ELECTRODE PLACEMENT CHART 5 -LEAD 3 -CHANNEL

Select the sites for electrode application. The electrodes must be applied over bone or cartilage. Refer to the Electrode Placement Chart below.

- RED:** Channel 1, 2 ( - ) *Place at the top of the sternum.*
- BROWN:** Channel 1 ( + ) *Place on the left side, over lower ribs. (as shown below)*
- BLACK:** Channel 2, 3 ( + ) *Place on the left side, over lower ribs. (as shown below)*
- WHITE:** Channel 3 ( - ) *Place on the right side, over lower ribs. (as shown below)*
- GREEN:** Ground *Place on the right side, opposite the black lead over lower ribs.*

<b>CHANNEL 1 =</b>	RED ( - ) ↔ BROWN ( + )
<b>CHANNEL 2 =</b>	RED ( - ) ↔ BLACK ( + )
<b>CHANNEL 3 =</b>	WHITE ( - ) ↔ BLACK ( + )



## NASIFF CARDIOCARD® HOLTER ECG ELECTRODE SKIN PREPARATION and PLACEMENT

1. Gently separate lead wires to give length needed for creating loop and placing electrodes on chest (do not cut wires).
2. Electrodes should not be used if the gel is dried out or in a liquid state (store electrodes in unopened pouches at room temperature – avoid storage in excessive heat or cold).
3. Do not place electrodes over scar tissue, body protuberances, skin lesions, skin folds or established erythema – adhere electrodes exactly as shown on the Placement Chart.
4. Use disposable razor to shave hair from electrode placement sites.
5. Use the scrub pad to gently prep skin sites – avoid injury or abrasion of skin surface.
6. Remove skin oils with alcohol swabs – let dry completely before applying electrodes – skin oils and trapped solvents can cause skin irritation and loss of adhesion.
7. Open electrode pouch, snap wires on the electrodes and then peel electrode from carrier (discard carriers – they are slippery and should not be left on floor) and apply immediately per the Electrode Placement Chart.
8. Hold electrode firmly in both hands and apply to patient's chest skin by gently pressing down around the outer edge in a circular motion to assure firm attachment to the skin at the sites shown on the Electrode Placement Chart.
9. Make sure gel is in firm contact with patient's skin for proper recording. Roll electrode onto the skin like a bandage. Push firmly on the center of the electrode to make sure the gel is in firm contact with the skin.
10. NOTE: Remove an electrode that is not properly positioned per the Electrode Placement Chart and discard it – use a new electrode and position it exactly as shown in the Chart.
11. Long-Term (LT) Monitoring Electrodes typically may be effectively used for several days if properly applied – duration of use is affected by skin conditions & environmental factors.
12. Position lead wires exactly per color coding as shown on the Electrode Placement Chart.
13. Each of the five (5) lead wires must be individually restrained using tape strips to prevent excessive motion (motion causes noise and artifacts in the ECG tracing) – loop the wire slightly near the electrode and tape it to the patient's chest skin.
14. Instruct the patient not to touch the lead wires or the electrodes, not to shower or wet the monitor or electrodes, and to return in 24 hours to have the Holter removed. Holter will automatically stop recording after 24 hours, if return is delayed remove Monitor.
15. To remove electrodes, lift edge and peel back slowly in a continuous motion – properly discard the removed electrodes – rapid removal of an electrode may injure a patient's skin – if necessary, consider using alcohol to moisten the adhesive-skin interface.

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CardioCard® Training and Instructions  
are available for Holter Placement at  
website: [www.nasiff.com/ hookup5.pdf](http://www.nasiff.com/ hookup5.pdf)