A 36-year-old male smoker had a 4-day history of intense asthenia, general malaise, slight fever and dry cough predominately at night for the past 4 days. He had experienced several presyncope episodes for which he had received antibiotic therapy with amoxicillin and bronchodilators. He finally presented to the emergency department for an episode of oppressive retrosternal chest pain, with stabbing sensation towards his back, and with intense dyspnea. He was admitted for observation to the short-stay ward. The examination revealed signs of mild heart failure and left parasternal pansystolic murmur. Hemoglobin was 10.3 mg/dL; there were no other abnormalities. We were contacted to evaluate this Holter ECG tracing (Figure).

Suggest a solution to this ECG Contest at http://www.revespcardiol.org/es/electroreto/68/08 (only Spanish). The answer will be published in the next issue (September 2015). #RetoECG.