

Supplementary material

Moskal P, Bednarski A, Kietbasa G, et al. Increased preexcitation on electrocardiography improves accuracy of algorithms for accessory pathway localization in Wolff–Parkinson–White syndrome. Kardiol Pol. 2020; 78: 567-573. doi:10.33963/KP.15378

Please note that the journal is not responsible for the scientific accuracy or functionality of any supplementary material submitted by the authors. Any queries (except missing content) should be directed to the corresponding author of the article.

Table S1

Algorithm	Criteria for specific accessory pathway locations									
Pambrun et al. (2018) <small>(requires maximally pre-excited ECG)</small>	RA	RL	RP	RPS	NH	DCS	LPS	LPL	LL	
	V1 – 3 positive inferior leads V3 –	V1 – 1-2 positive inferior leads V3 –	V1 – 0 positive inferior leads V3 –	V1 – 0 positive inferior leads V3 +	V1 – 1-3 positive inferior leads V3 +	V1 – 1-2 positive inferior leads V1/I ratio < 1 II notched QS +	V1 + 1-2 positive inferior leads V1/I ratio < 1 II notched QS –	V1 + 1-2 positive inferior leads or 0 positive inferior leads and V1/I ratio ≥ 1	V1 + 3 positive inferior leads	
Xie et al. (1994)	RAS	RL	RP	RPS	MS	see RPS	LPS	LP	LPL	LAL
	III – & V1 – aVF R/Rs morph.	III + and/or V1 + aVL + V1 –	III + and/or V1 + + aVL – with rS	III – & V1 – aVF –/qR morph. RWH in V5 or V6	III – & V1 – aVF –/qR morph. RWH in V2– V4 RW < 0.06 ms		III – & V1 – aVF –/qR morph. RWH in V2– V4 RW > 0.06 ms	III + and/or V1 + V1 + aVL + V1 ±	III + and/or V1 + V1 + aVL + V1 +	III + and/or V1 + aVL – with QS or QR morph.

d'Avila et al. (1995)	AS	RL	RPS	PS	MS	see PS	LPS	LP	LL
	1. V1 – III ±	V1 – III –	V1 – III –	(paraseptal) V1 –	V1 – III – & Qrs		V1 + or ± III –	V1 + or ± III ±	1. V1 + or ± III +
	2. V1 – III + aVL +	II + or – V2 –	II + V2 +	III – II – V2 +	morph.				2. V1 – III + aVL –
Iturralde el al. (1996)	RA	see RA	RIP/RI	see RIP/RI	RASP	see RIP/RI	LIP/LI	LPL/LAS	see LPL/LAS
	III – or ± V1 – or ± V2 –		III – or ± V1 – or ± V2 +		III + V1 –		III – or ± V1 +	III + V1 +	
Taguchi et al. (2014)	RAS/RA/RL	see RAS/RA/RL	RPL/RP	MS/PS	see MS/PS	see MS/PS	see MS/PS	LP/LPL	LAL/LL
	V1 R/S ratio < 0.5 V2 R/S ratio < 0.5 aVF R/S ratio ≥ 1		V1 R/S ratio < 0.5 V2 R/S ratio < 0.5 aVF R/S ratio < 1	V1 R/S ratio < 0.5 V2 R/S ratio ≥ 0.5				V1 R/S ratio ≥ 0.5 aVF R/S ratio < 1	V1 R/S ratio ≥ 0.5 aVF R/S ratio ≥ 1

Abbreviations: RA, right anterior; RL, right lateral; RPS, right posteroseptal; NH, node-His; DCS, deep coronary sinus; LPS, left posteroseptal; LPL, left posterolateral; LL, left lateral; RAS, right antero-septal; MS, midseptal; LP, left posterior; LAL, left anterolateral; AS, antero-septal; PS, posteroseptal; RIP/RI, right inferior paraseptal and right inferior; RASP, right anterosuperior paraseptal; LIP/LI, left inferior paraseptal and left inferior; LPL/LAS, left posterolateral and left anterosuperior; RWH, the highest R wave recorded in precordial lead