Non-contact mapping is often used to identify the origin of focal arrhythmias; however, validation against point-to-point mapping technologies has been limited to the construction of separate complementary maps. Recent advances (Ensite Precision) have permitted single map validation of non-contact mapping using unipolar virtual endocardial electrograms with isopotential maps and point-to-point mapping using isochronal maps of activation time. This figure demonstrates mapping and validation of the area of earliest activation of a posterior right ventricular outflow tract premature ventricular contraction using both point-to-point activation mapping (red square, left panel) and non-contact isopotential mapping with a 64-electrode array (red asterisk, right panel) in the same electroanatomic map.

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