

1 **Legends of the Supplementary Materials**

2 **Supplementary Figure S1. The 12-lead electrocardiograms after the syncopal**
3 **event.**

4 Atrial fibrillation was obvious on the day of the syncopal event (A), and the arrhythmia
5 spontaneously converted to an intra-atrial reentrant tachycardia the next day (B)

6
7 **Supplementary Video S2. Mapping of the atrial potentials that became organized**
8 **during the atrial fibrillation while on an isoproterenol infusion**

9 The procedure was carried out with a high-density mapping system. The beat
10 acceptance criteria other than the electrogram stability were used.

11
12 **Supplementary Video S3. A propagation map of atrial potentials becoming**
13 **organized during atrial fibrillation**

14 The light purple dots indicate the sites of ablation.

15
16 **Supplementary Video S4. Position of the ablation catheter and intracardiac**
17 **electrocardiograms during the effective treatment**

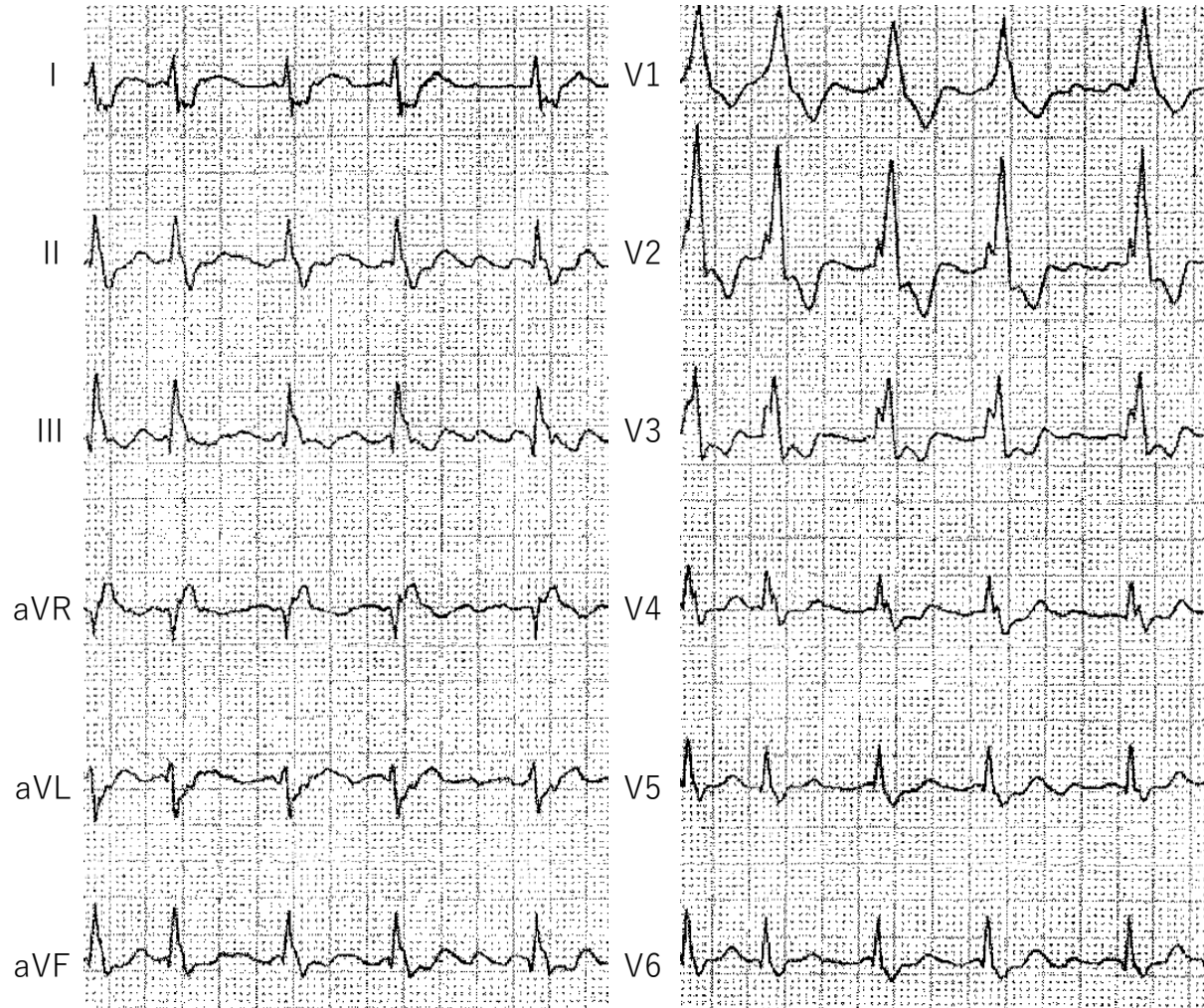
18 Shown is an activation map of the potentials with an organized pattern during atrial
19 fibrillation (left) and a voltage map during coronary sinus pacing (right). The atrial

20 fibrillation terminated when ablation was applied to the central area inside the reentrant
21 circuit. The light purple dots indicate the sites of the ablation.

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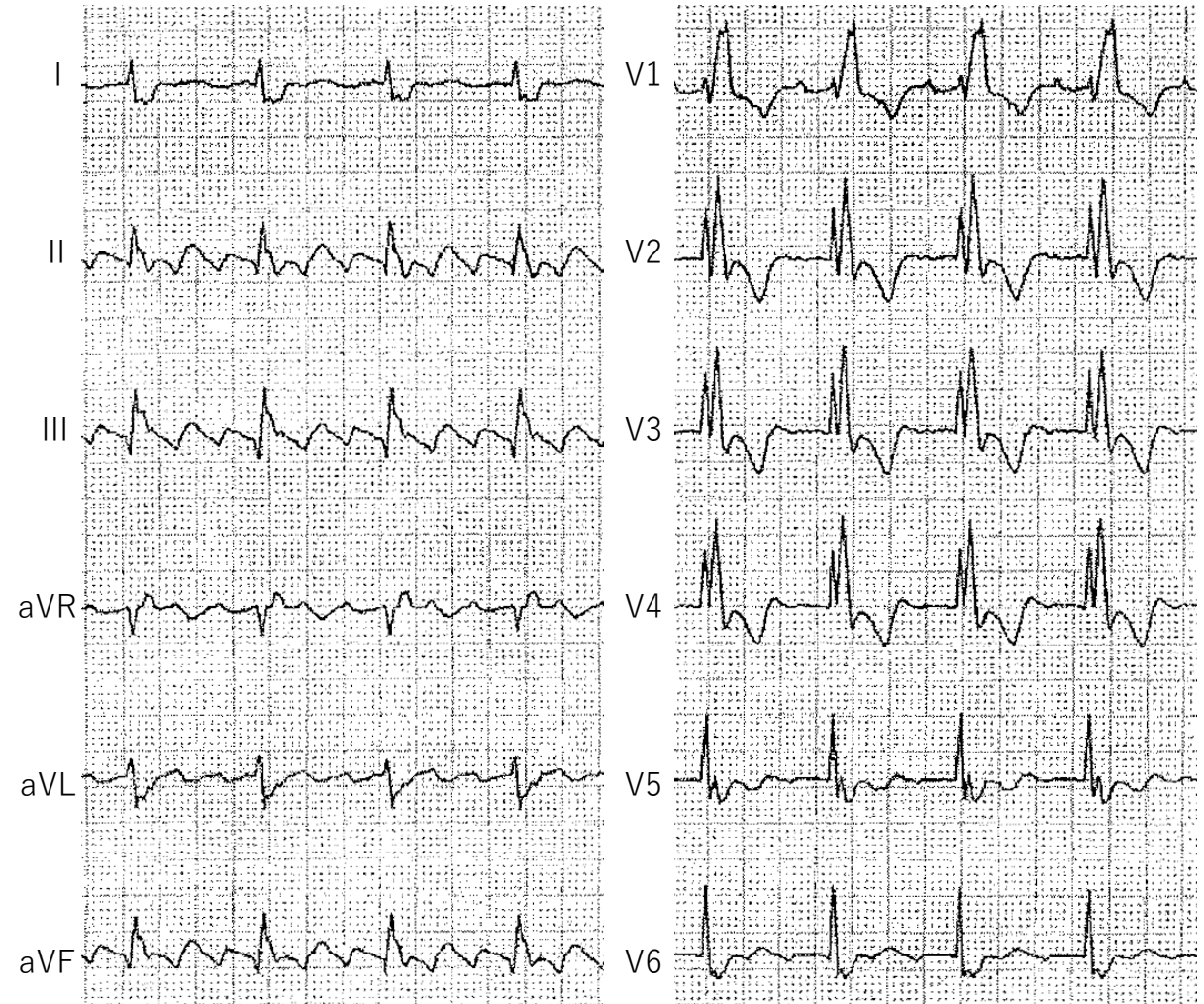
Supplementary Figure S1.

A.



10 mm/mV, 25 mm/s

B.



10 mm/mV, 25 mm/s