

CORRECTION

Correction to: 2018 ACC/AHA/HRS Guideline on the Evaluation and Management of Patients With Bradycardia and Cardiac Conduction Delay: A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines and the Heart Rhythm Society

In the article by Kusumoto et al, "2018 ACC/AHA/HRS Guideline on the Evaluation and Management of Patients With Bradycardia and Cardiac Conduction Delay: A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines and the Heart Rhythm Society," which published ahead of print on November 6, 2018, and appeared in the August 20, 2019, issue of the journal (*Circulation*. 2019;140:e382–e482. doi: 10.1161/CIR.0000000000000628), several corrections were needed.

1. On page e394, in "Figure 2. Initial evaluation of suspected or documented SND algorithm,"
 - third row, the green box, the text read, "Treat underlying cause as "needed, e.g., sleep apnea" (Class I)." It has been updated to read, "Treat underlying cause as needed, e.g., sleep apnea (Class I)."
 - in the legend, the penultimate sentence read, "†Refer to Section 5.5.4.1., Figure 6." It has been updated to read, "†Refer to Section 5.4.4.1., Figure 6."
2. On page e395, in "Figure 3. Initial evaluation of suspected atrioventricular block algorithm," ninth row, the orange box, an asterisk was added to the text in the box. It has been updated to read, "Advanced imaging* (Class IIa)."
3. On page e405, in the "5.3.1. Acute Management of Reversible Causes of SND," section, left hand column, under "Synopsis," first paragraph, the first sentence read, "Most patients with SND...that does not require acute treatment." It has been updated to read, "Most patients with SND...that do not require acute treatment."
4. On page e409, in the "5.3.2.3. Therapy of Digoxin Mediated Bradycardia Attributable to either SND or Atrioventricular Block," section, left hand column, under "Synopsis," first paragraph, the fifth sentence read, "Patients with hyperkalemia or life-threatening in the setting of digoxin serum levels...." It has been updated to read, "Patients with hyperkalemia or arrhythmias in the setting of digoxin serum levels...."
5. On page e411, in the "5.3.3. Temporary Pacing for Bradycardia Attributable to SND" section, left hand column, under "Synopsis," first paragraph, the third sentence read, "Typically, temporary transvenous pacing is performed...from a central venous site veins." It has been updated to read, "Typically, temporary transvenous pacing is performed...from a central venous access site."
6. On page e411, in the legend to "Figure 5. Acute pacing algorithm," the second sentence read, "*Refer to Section 5.5.4.1...." It has been updated to read, "*Refer to Section 5.4.4.1...."
7. On page e412, in the "5.4.1. General Principles of Chronic Therapy/Management of Bradycardia Attributable to SND" section,"

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- in the left hand column, the paragraph under “Synopsis,” the fourth sentence read, “...(discussed in Section 5.5.2.).” It has been updated to read, “...(discussed in Section 5.4.2.).”
 - in the right hand column, under “Recommendation-Specific Supportive Text,” second paragraph, the first sentence read, “Parasympathetic tone has is more dominant....” It has been updated to read, “Parasympathetic tone is more dominant....”
8. On page e416, in “Figure 6. Chronic SND management algorithm,”
 - sixth row, the diamond-shaped box, an asterisk was added to the text in the box. It has been updated to read, “*Infrequent pacing? Significant comorbidities?”
 - in the legend, the second sentence read, “See Sections 4.3. and 5.5. for discussion.” It has been updated to read, “See Sections 4.3. and 5.4. for discussion.”
 9. On page e420, in the “6.3.1. Acute Management of Reversible Causes of Bradycardia Attributable to Atrioventricular Block,” section, left hand column, under “Recommendation-Specific Supportive Text,” first paragraph, the penultimate sentence read, “...digoxin toxicity as a cause of reversible atrioventricular block still occurs (reference).” It has been updated to read, “...digoxin toxicity as a cause of reversible atrioventricular block still occurs.^{S6.3.1-14a}”
 10. On page e423, in “Figure 7. Management of Bradycardia or Pauses Attributable to Chronic Atrioventricular Block Algorithm,” seventh row from the bottom, just below the green box “Dual Chamber Pacing Class I,” the text “No” has been deleted.
 11. On page e428, in the “6.4.4. Permanent Pacing” section, right hand column, the “Recommendation-Specific Supportive Text” section, paragraph 3, the last sentence read, “In the asymptomatic patient, there is specific pause duration that warrants permanent pacing.” It has been updated to read, “In the asymptomatic patient, there is no specific pause duration that warrants permanent pacing.”
 12. On page e447, right hand column, in the “8.4. Neurologic Disorders” section, the last sentence of the paragraph read, “...outlined in Sections 5.5.4 and 6.4.4.” It has been updated to read, “...outlined in Sections 5.4.4 and 6.4.4.”
 13. On page e449, in the “11. Shared Decision-Making,” section, “Recommendation-Specific Supportive Text” section, third paragraph, the last sentence read, “These pros and cons can be discussed with the patient, with patient permission a discussion of the process and patient decision needs to be facilitated with the family, or the patient’s family or surrogate if the patient does not have capacity.” It has been updated to read, “These pros and cons can be discussed with the patient and include family with patient permission, or the patient’s family or surrogate if the patient does not have capacity.”
 14. On page e452, in the “ACC/AHA Task Force Members” section, an asterisk was added to the listing for Dr. Ikonomidis and Dr. Mauri. They are now designated as “*Former Task Force member; current member during the writing effort.”
 15. On page e452, in the “References” section, “1.4. Scope of the Guideline” section, the second reference was misnumbered. It has been updated to read, “S1.4-2. Epstein AE, DiMarco JP, Ellenbogen KA, et al. 2012 ACCF/AHA/HRS focused update incorporated into the ACCF/AHA/HRS 2008 guidelines for device-based therapy of cardiac rhythm abnormalities: a report of the American College of Cardiology Foundation/American Heart Association Task Force on Practice Guidelines and the Heart Rhythm Society. *Circulation*. 2012;127:e283–352.”
 16. On page e455, in the “References” section, “4.2.2. Exercise Electrocardiographic Testing in Patients With Documented or Suspected Bradycardia or Conduction Disorders,” the fifth reference read, “S4.2.2–5. Issa ZF. Atrioventricular conduction abnormalities. Miller JM, Zipes DP. *Clinical Arrhythmology and Electrophysiology: A Companion to Braunwald’s Heart Disease*, 2nd ed. 2012. Elsevier/Saunders: Philadelphia, PA;175–93.” It has been updated to read, “S4.2.2–5. Atrioventricular conduction abnormalities. In: Issa ZF, Miller JM, Zipes DP, eds. *Clinical Arrhythmology and Electrophysiology: A Companion to Braunwald’s Heart Disease*. 2nd ed. Philadelphia, PA: Elsevier/Saunders; 2012:175–93.”
 17. On page e458, in the “References” section, reference S4.3.1–4 has been updated. It now reads, “S4.3.1–4. Krahn AD, Klein GJ, Yee R, et al. Final results from a pilot study with an implantable loop recorder to determine the etiology of syncope in patients with negative noninvasive and invasive testing. *Am J Cardiol*. 1998;82:117–19.”
 18. On pages e460 and e461, in the “References” section, references S5.3.1–36 and S5.3.2.1–22 have been updated. They now read, “Chadda KD, Lichstein E, Gupta PK, et al. Effects of atropine in patients with bradyarrhythmia complicating myocardial infarction. Usefulness of

an optimum dose for overdrive. *Am J Med.* 1977;63: 503–10.”

19. On page e464, in the References section, reference S5.4.4.1-5 has been updated. It now reads, “S5.4.4.1-5. Brandt NH, Kirkfeldt RE, Nielsen JC, et al. Single lead atrial vs. dual chamber pacing in sick sinus syndrome: extended register-based follow-up in the DANPACE trial. *Europace.* 2017;19:1981–7.”
20. On page e465, in the “References” section, a new reference has been added to the “6.3.1. Acute Management of Reversible Causes of Bradycardia Attributable to Atrioventricular Block” section. It reads, “S6.3.1-14a. Hauptman PJ, Blume SW, Lewis EF, Ward S. Digoxin toxicity and use of digoxin immune fab: insights from a national hospital database. *JACC Heart Fail.* 2016;4:357–64.”

21. On page e467, in the “References” section, reference S6.4.3–6 has been updated. It now reads, “S6.4.3–6. Shetty RK, Agarwal S, Ganiga Sanjeeva NC, et al. Trifascicular block progressing to complete AV block on exercise: a rare presentation demonstrating the usefulness of exercise testing. *BMJ Case Rep.* 2015:bcr2014209180.

22. On page e470, in the “References” section, reference S7.4-4 has been updated. It now reads, “S7.4-4. Barrett PM, Komatireddy R, Haaser S, et al. Comparison of 24-hour Holter monitoring with 14-day novel adhesive patch electrocardiographic monitoring. *Am J Med.* 2014;127:95:e11–7.”

These corrections have been made to the current online version of the article, which is available at <https://www.ahajournals.org/doi/10.1161/CIR.0000000000000628>.