

# The value of learning surface ECG in the 21st century

Adrian Baranchuk<sup>1,2</sup>, Andrés Ricardo Pérez-Riera<sup>1,2</sup>

<sup>1</sup>Division of Cardiology, Kingston General Hospital, Queen's University, Kingston, Ontario, Canada; <sup>2</sup>Design of Studies and Scientific Writing Laboratory, ABC School of Medicine, Santo André, São Paulo, Brazil

Correspondence to: Adrian Baranchuk, MD, FACC, FRCPC, FCCS. Professor of Medicine, Cardiac Electrophysiology and Pacing, Kingston General Hospital, K7L 2V7, Queen's University, Kingston, Ontario, Canada. Email: barancha@kgh.kari.net.

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## Welcome to a new section of the *Journal of Thoracic Disease*: “ECG Pearls”

Surface 12-lead ECG remains in the 21st century, one of the diagnostic tools most extensively used in clinical practice (1). For the internist, the anaesthesiologist, the thoracic surgeon, the respirologist and the cardiologist, maintaining ECG interpretation skills is mandatory, as the ECG allows a rapid (and inexpensive) diagnosis of a large series of entities (2). The advances of new technologies have not replaced the ECG, which still is one of the most cost/effective tools in medicine. Several interventions (in the acute and chronic phases of a disease) are still guided by the proper analysis of the surface ECG.

We are delighted to call for submission in this new section (“ECG Pearls”) of the *Journal of Thoracic Disease* (see instructions for authors).

The new section is intended to review not only unusual cases but also frequent cases that can pose a diagnostic dilemma, and/or to review the application of useful algorithms to differentiate frequent arrhythmias providing the reader with the relevant clinical scenario where these conduction abnormalities could occur.

Proper skill ECG interpretation should still be part of the medical curricula and new methods to teach and evaluate knowledge should be developed in order to avoid erosion of skills usually learnt at early stages of the medical

career (3).

We welcome the initiative of *JTD* to include the “ECG Pearls” section and we invite all researchers to submit their cases to keep learning about the fascinating world of ECGs.

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## Footnote

*Conflicts of Interest:* The author has no conflicts of interest to declare.

## References

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