

CORRECTION

Correction to the paper entitled, "Guidelines and Recommendations for Targeted Neonatal Echocardiography and Cardiac Point-of-Care Ultrasound in the Neonatal Intensive Care Unit: An Update from the American Society of Echocardiography" by McNamara *et al.*, published in the February 2024 issue of JASE (J Am Soc Echocardiogr 2024;37(2):171-215).

In Table 3, on page 178, the Simpson biplane row included a bullet point in the column for Measurement Performance that incorrectly stated, "Papillary muscles should be excluded from the cavity tracing and MV." The papillary muscles should be considered part of the cavity; therefore, this bullet point has been removed from Table 3.

In Table 3, on pages 179-180, the RV FAC row included a bullet point in the column for Measurement performance that incorrectly stated, "RV trabeculations should be excluded from the cavity tracing." The trabeculations should be considered part of the cavity, therefore this bullet point has been removed from Table 3.

In Table 3, on page 180, the row for PVR index was incorrectly stated as, "May be expressed as either RVET/PAAT (normal<4) or PAAT/RVET (normal<0.25)." The correct description is, "May be expressed as either RVET/PAAT (normal ≤ 4.0) or PAAT/RVET (normal ≥ 0.25)."

In Figure 17, on page 191, the caption incorrectly stated, "PVRi may be calculated as either RVET:/PAAT (normal, <4.0) or PAAT/RVET (normal, <0.25) according to institutional standards." The correct description is, "PVRi may be calculated as either RVET:/PAAT (normal, ≤ 4.0) or PAAT/RVET (normal, ≥ 0.25) according to institutional standards."

The online version of the paper has been corrected to reflect these changes. The authors would like to apologize for any inconvenience caused by these errors.