ERRATUM TO: Myocardial Injury Among Postoperative Patients: Where Is the Wisdom in Our Knowledge?

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The author would like to make the following correction to the Editorial, originally published in the July issue of the Journal of Hospital Medicine 2020;15(7):447-448. DOI 10.12788/jhm.3468. In the third paragraph, MINS was described as an “umbrella term that can indicate either a myocardial infarction (MI) or nonischemic myocardial injury (NIMI).” This is not fully accurate: MINS is an umbrella term that can indicate either an MI or other myocardial injury due to ischemia. The correction to the paragraph is as follows, indicated in bold type:

In this journal issue, Cohn and colleagues summarize the current information around this phenomenon of myocardial injury after noncardiac surgery, or MINS.1 Consistent with the literature, they define MINS as an acute rise and/or fall in troponin (above the assay’s upper limit of normal) at any point in the 30 days following noncardiac surgery. Importantly, MINS is an umbrella term that can indicate either an MI or other myocardial injury due to ischemia. An MI exists if there are clinical signs of ischemia and/or objective evidence of infarction on imaging.

Reference