PLOS ONE

CORRECTION

Correction: Anatomical Variations in the Sinoatrial Nodal Artery: A Meta-Analysis and Clinical Considerations

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The image for Fig 1 is incorrect. Please see the corrected Fig 1 here.

Citation: Vikse J, Henry BM, Roy J, Ramakrishnan PK, Hsieh WC, Walocha JA, et al. (2016) Correction: Anatomical Variations in the Sinoatrial Nodal Artery: A Meta-Analysis and Clinical Considerations. PLoS ONE 11(3): e0150051. doi:10.1371/journal.pone.0150051

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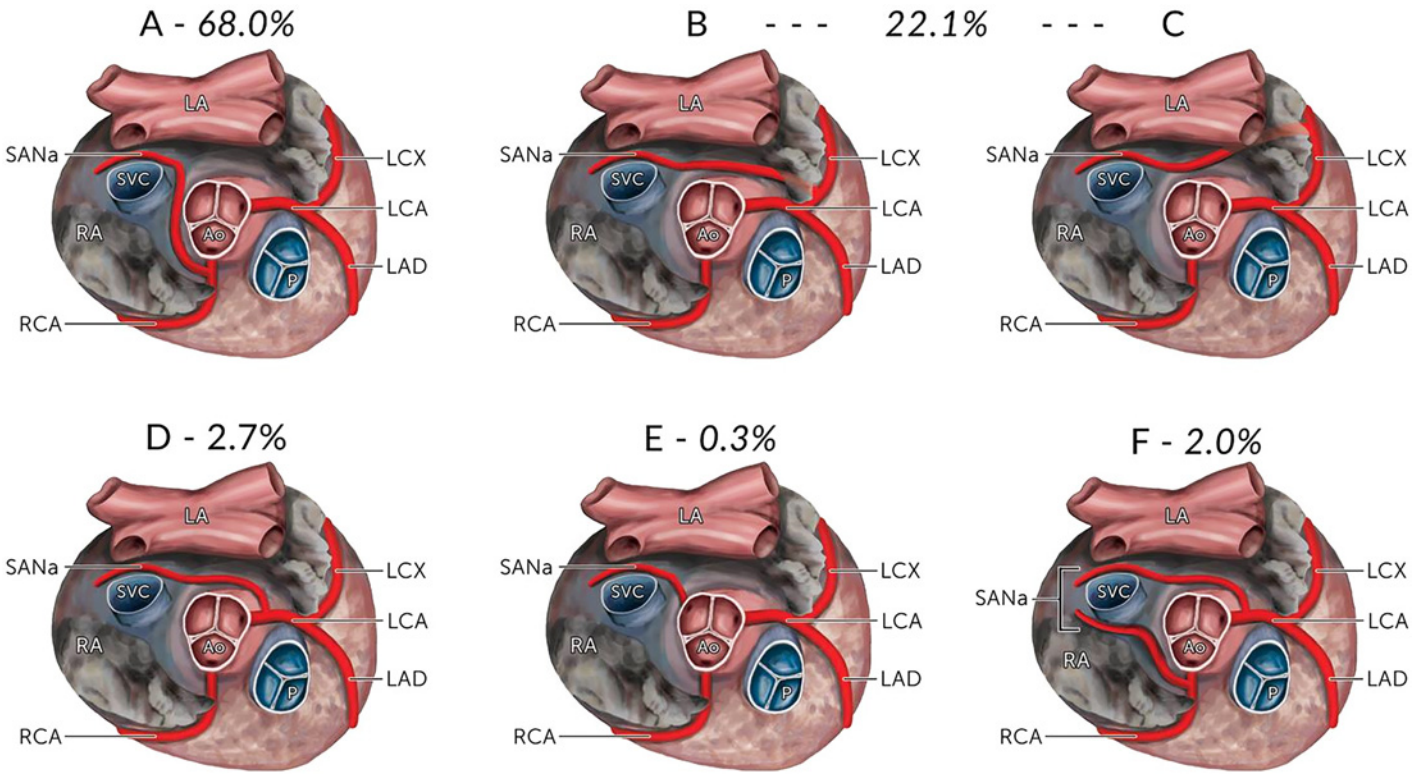

Fig 1. The various origins of the sinoatrial nodal artery (SANa) as seen from a superior view with their calculated pooled prevalence in the overall population. (A) From the Right Coronary Artery; (B) From the Left Circumflex Artery (proximal); (C) From the Left Circumflex Artery (distal); (D) From the Left Coronary Artery; (E) From the Aorta; (F) Dual origin from the Right Coronary Artery and the Left Circumflex Artery. The prevalence rates for B and C are reported as a combined rate. LA, Left Atrium; RA, Right Atrium; SVC, Superior Vena Cava; Ao, Aorta; P, Pulmonary Trunk; RCA, Right Coronary Artery; LCA, Left Coronary Artery; LCX, Left Circumflex Artery; LAD, Left Anterior Descending Artery; SANa, Sinoatrial Nodal Artery.

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Reference

1. Vikse J, Henry BM, Roy J, Ramakrishnan PK, Hsieh WC, Walocha JA, et al. (2016) Anatomical Variations in the Sinoatrial Nodal Artery: A Meta-Analysis and Clinical Considerations. PLoS ONE 11(2): e0148331. doi:10.1371/journal.pone.0148331 PMID: 26849441