

Erratum to: Cardiopulmonary Exercise Testing – Methodological Aspects

Erratum zu: Spiroergometrie – Methodische Aspekte

Erratum

In 2022, in the published Clinical Review of Winkert K and Kirsten J two main references had not been cited.

The publication therefor has now been corrected. The following references had been inserted into the article and cited two times within the article:

(33) **GLAAB T, TAUBE C.** Practical guide to cardiopulmonary exercise testing in adults. *Respir Res.* 2022; 23: 9. doi:10.1186/s12931-021-01895-6

(34) **GLAAB T, SCHMIDT O, FRITSCH J.** Spiroergometrie kompakt – Physiologie, Durchführung und Auswertung [Guidance to the Interpretation of Cardiopulmonary Exercise Testing]. *Pneumologie.* 2020; 74: 88-102. German. doi:10.1055/a-1069-0611

Both references had been inserted to table 3 and within the main text in section CPET Preparation – Ergometer and Protocol Selection:

„For the necessary ex-ante estimation of a patient's exercise capacity and the selection of a suitable exercise protocol, one of several useful options is the „staircase question“ (6, 17, 33, 34) shown in (table 3).“

Table 3

Protocol selection by staircase question (6, 17, 33, 34).

“HOW MANY FLOORS CAN YOU WALK UP QUICKLY WITHOUT STOPPING?”

One floor is equivalent to approximately 50 W, corresponding to easy hiking, playing golf, etc., suggesting a workload rate increment of 5 W/min.

Two floors are equivalent to approximately 100 W, corresponding to Nordic walking, cycling on a flat track, gardening etc., suggesting a workload rate increment of 10 W/min.

Three floors are equivalent to approximately 125-150 W, corresponding to swimming, mountain hiking, etc., suggesting a workload rate increment of 15 W/min

Four floors are equivalent to approximately 200 W (similar to running at ≥ 10 km/h). Suggested workload increment is 20 W/min.

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