

## 2020 ESC Guidelines on Atrial Fibrillation accepts diagnosis of AFib with a 1L ECG device as well

| Recommendations  | Class <sup>a</sup> |
|--|--------------------|
| <p><b>Recommendations for diagnosis of AF</b></p> <ul style="list-style-type: none"> <li>ECG documentation is required to establish the diagnosis of AF.</li> <li><b>A standard 12-lead ECG recording or a single-lead ECG tracing of &gt; 30 s showing heart rhythm with no discernible repeating P waves and irregular RR intervals (when atrioventricular conduction is not impaired) is diagnostic of clinical AF.</b></li> </ul>  | I                  |
| <p><b>Recommendations for screening to detect AF</b></p> <p>When screening for AF it is recommended that:</p> <ul style="list-style-type: none"> <li>The individuals undergoing screening are informed about the significance and treatment implications of detecting AF.</li> <li>A structured referral platform is organized for screen-positive cases for further physician-led clinical evaluation to confirm the diagnosis of AF and provide optimal management of patients with confirmed AF.</li> <li><b>Definite diagnosis of AF in screen-positive cases is established only after the physician reviews the single-lead ECG recording of ≥ 30 s or 12-lead ECG and confirms that it shows AF.</b></li> </ul> | I                  |

## 2020 ESC Guidelines on Atrial Fibrillation puts an emphasis on the screening in case of lifestyle risks or age

| Recommendations  | Class <sup>a</sup> | Level <sup>b</sup> |
|--|--------------------|--------------------|
| Opportunistic screening for AF by pulse taking or ECG rhythm strip is recommended in patients >_65 years of age. <sup>1,2,3,4</sup>  | I                  | B                  |
| It is recommended to interrogate pacemakers and implantable cardioverter defibrillators on a regular basis for AHRE. <sup>5,6</sup>  | I                  | B                  |
| <p><b>When screening for AF it is recommended that:<sup>7,8</sup></b></p> <ul style="list-style-type: none"> <li>The individuals undergoing screening are informed about the significance and treatment implications of detecting AF.</li> <li>A structured referral platform is organized for screen-positive cases for further physician-led clinical evaluation to confirm the diagnosis of AF and provide optimal management of patients with confirmed AF.</li> <li>Definite diagnosis of AF in screen-positive cases is established only after physician reviews the single-lead ECG recording of &gt;_30 s or 12-lead ECG and confirms that it shows AF.</li> </ul> | I                  | B                  |
| Systematic ECG screening should be considered to detect AF in individuals aged >_75 years, or those at high risk of stroke. <sup>9,10,11</sup>   | Ila                | B                  |

### References

a. Class of recommendation

b. Level of evidence

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