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## ERRATA

### **Schilling, et al. Vitamin D Status in Abused and Nonabused Children Younger Than 2 Years Old With Fractures. *Pediatrics*. 2011;127(5):835–841**

Two errors occurred in this article by Schilling et al, entitled “Vitamin D Status in Abused and Nonabused Children Younger Than 2 Years Old With Fractures” published in the May 2011 issue of *Pediatrics* (2011;127:835–841; doi:10.1542/peds.2010-0533).

On page 838, under the Fracture Etiology heading, paragraph 2, line 10, this reads: “and nonabused children (5% vs 9%.” This should have read: “and nonabused children (5% vs 8%.”

On page 839, in Table 5, under the Rib Fractures, Absent,  $n = 94$  column heading, the first entry reads: “4(5).” This should have read: “5(5).”

doi:10.1542/peds.2011-1367

### **Ackerman, et al. A Review of the Effects of Prenatal Cocaine Exposure Among School-Age Children. *Pediatrics*. 2010;125(3):554–565**

Two errors occurred in this article by Ackerman et al entitled “A Review of the Effects of Prenatal Cocaine Exposure Among School-Age Children” published in the March 2010 issue of *Pediatrics* (2010;125:554–565; doi:10.1542/peds.2009-0637).

On page 562, in Table 6, the 6th entry under the Control column heading reads: “Not reported” and the 6th entry under the Other Effects/Comments column heading reads “PCE associated with long-term changes in brain composition, which were related to performance on neuropsychological tests; limited sample size and covariate control.” The entry under the Control column should have read: “Groups matched on gender, handedness, IQ, prematurity, age, race, and caregiver stability. Statistical control on A, M, T”; and the entry under the Comments column should have read: “PCE associated with long-term changes in brain composition, which were related to performance on neuropsychological tests; limited sample size.”

On page 563, the final sentence reads: “However, most studies have lacked covariate control, raising concerns about potential confounds.” The sentence should have read: “Although many studies matched comparison groups, sample sizes were small and often lacked statistical control, emphasizing the need for replication.” These changes do not alter the findings reported in the original manuscript.

doi:10.1542/peds.2011-1619

### **Paul, et al. Increased Odds of Necrotizing Enterocolitis After Transfusion of Red Blood Cells in Premature Infants. *Pediatrics*. 2011;127(4):635–641**

Several errors occurred in this article by Paul et al, titled “Increased Odds of Necrotizing Enterocolitis After Transfusion of Red Blood Cells in Premature Infants” published in the April, 2011 issue of *Pediatrics* (2011;127:635–641; doi:10.1542/peds2010-3178).

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## ERRATA

On page 635, under the heading Abstract, this reads: “NEC occurred after 33 (1.4%) of 2315 total transfusions.” This should have read: “NEC occurred after 33 (0.5%) of 6484 transfusions.”

On page 638, under the heading Results, paragraph 4, line 2, this reads: “The study cohort received a total of 2315 PRBC transfusions. NEC developed within 48 hours after 1.4% (33 of 2315) of these transfusions, which accounted for 27% (33 of 122) of all NEC cases.” This should have read: “The study cohort received a total of 6484 PRBC transfusions. NEC developed within 48 hours after 0.5% (33 of 6484) of these transfusions, which accounted for 27% (33 of 122) of all NEC cases.”

On page 638, under the heading Discussion, paragraph 1, line 8, this reads: “NEC occurred after 1.4% of all transfusions, and 27% of NEC cases in the study sample occurred temporally within 48 hours of transfusion.” This should have read: “NEC occurred after 0.5% of all transfusions, and 27% of NEC cases in the study sample occurred temporally within 48 hours of transfusion.”

On page 639, under the heading Discussion, paragraph 1, line 12, this reads: “Furthermore, in our sample both the rate of NEC and the proportion of NEC after transfusion, 1.4% and 27% respectively, were similar to the proportions, 0.8% and 35% described by Mally et al.” This should have read: “Furthermore, in our sample both the rate of NEC and the proportion of NEC after transfusion, 0.5% and 27% respectively, were similar to the proportions, 0.8% and 35% described by Mally et al.”

doi:10.1542/peds.2011-1953

### **Policy Statement—Children, Adolescents, Obesity, and the Media. *Pediatrics*. 2011;128(1):201–208**

An error occurred in the American Academy of Pediatrics policy statement “Children, Adolescents, Obesity, and the Media” originally published online June 27, 2011 and published in the July 2011 issue of *Pediatrics* (2011;128:201–208; DOI: 10.1542/peds.2011-1066). On page 204, middle column, third line, a new Recommendation No. 5 should have begun at “Pediatricians should work with their state chapters, the AAP, parent and public health groups, and the White House<sup>120</sup> to do the following:” and included all four subsequent bulleted paragraphs. We regret the error.

doi:10.1542/peds.2011-1970

**Paul, et al. Increased Odds of Necrotizing Enterocolitis After Transfusion of Red Blood Cells in Premature Infants. *Pediatrics*. 2011;127(4):635-641**

*Pediatrics* 2011;128;593

DOI: 10.1542/peds.2011-1953

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The online version of this article, along with updated information and services, is located on the World Wide Web at:

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