

Nigrovic et al. The Effect of Observation on Cranial Computed Tomography Utilization for Children After Blunt Head Trauma. *Pediatrics*. 2011;127(6):1067–1073

Errors occurred in this article by Nigrovic et al, titled “The Effect of Observation on Cranial Computed Tomography Utilization for Children After Blunt Head Trauma” published in the June 2011 issue of *Pediatrics* (2011 Jun;127[6]:1067–1073; doi:10.1542/peds.2010-3373).

On page 1067, under the Abstract Results section, line 12, the copy reads: “0.66”. This should have read: “0.67”.

On page 1070, under the Results section, column 2, line 3, this copy reads “0.66”. This should have read: “0.67”.

On page 1070, under the Results section, column 2, line 9, this copy reads “0.81”. This should have read: “0.82”.

Other errors appeared on page 1069, under Table 1, on the Severe injury mechanism row. The corrected table appears below.

	Observation, % <i>n</i> = 5433	No Observation %, <i>n</i> = 34 680	Difference in Rates, %	95% CI
Vomiting	21.0	11.9	9.1	8.0 to 10.3
Age <2 years	30.7	24.5	6.2	4.9 to 7.5
Altered mental status ^a	16.7	12.2	4.5	3.4 to 5.6
Severe injury mechanism ^b	17.9	14.3	3.6	2.5 to 4.7
Loss of consciousness	17.3	15.1	2.2	1.1 to 3.3
Seizure	1.3	1.2	0.1	−0.2 to 0.5
Clinical evidence of skull fracture ^c	3.1	3.0	0.1	−0.4 to 0.5
Nonfrontal scalp hematoma	18.4	18.5	−0.1	−1.2 to 1.0

doi:10.1542/peds.2014-1008

Rodgers et al. Incidental Findings in Children With Blunt Head Trauma Evaluated With Cranial CT Scans. *Pediatrics*. 2013;132(2):e356–e363

Errors occurred in this article by Rodgers et al, titled “Incidental Findings in Children With Blunt Head Trauma Evaluated With Cranial CT Scans” published in the August 2013 issue of *Pediatrics* (2013 Aug;132[2]:e356–e363; doi:10.1542/peds.2013-0299).

On page e359, under Table 2, two numbers on the Severe mechanism of injury row were incorrect. The correct table appears below.

	Patients With Incidental Findings (<i>n</i> = 654)	Patients Without Incidental Findings (<i>n</i> = 15 177)	Percentage Difference in Rates (95% CI)
Median age (IQR), y	8.6 (2.3–14.2)	8.2 (2.5–14.0)	
Male, %	69	63	6% (2 to 9)
GCS of 15, %	87	87	0% (−3 to 3)
Severe mechanism of injury, ^a %	22	23	−1% (−4 to 2)
Clinically important TBI, ^b %	3	5	−2% (−3 to 0)
Neurosurgery, %	0.3	1	−1% (−1 to 0)
Discharged from the hospital from ED, %	67	74	−7% (−11 to −3)

On page e360, under Table 3, the Category III number on the Severe mechanism of injury row was incorrect. The correct table appears below.

	Category I: Immediate Evaluation/Treatment (<i>n</i> = 22)	Category II: Appropriate Timely Follow-up (<i>n</i> = 173)	Category III: Benign, Follow-up Based on Symptoms (<i>n</i> = 459)
Median age (IQR), y	9.3 (3.0 to 13.6)	5.6 (0.9 to 12.7)	10.1 (3.2 to 14.2)
Male, %	64	68	69
GCS score of 15, %	86	91	85
Severe mechanism of injury, ^a %	36	19	22
Clinically important TBI, ^b %	5	2	3
Discharged from the hospital from ED, %	41	71	66

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