

## ERRATA

### **RSV Policy Statement —Updated Guidance for Palivizumab Prophylaxis Among Infants and Young Children at Increased Risk of Hospitalization for Respiratory Syncytial Virus Infection. *Pediatrics* 2014;134(2):415–420**

An error occurred in the policy statement from the American Academy of Pediatrics titled “Updated Guidance for Palivizumab Prophylaxis Among Infants and Young Children at Increased Risk of Hospitalization for Respiratory Syncytial Virus Infection” published in the August 2014 issue of *Pediatrics* (2014;134[2]:415–420). On pages 417–418, the last sentence in the section titled **Use of Palivizumab in the Second Year of Life** should read: “A second season of palivizumab prophylaxis is recommended only for preterm infants born at <32 weeks, 0 days’ gestation who required at least 28 days of oxygen after birth and who continue to require supplemental oxygen, chronic systemic corticosteroid therapy, or **diuretic** therapy within 6 months of the start of the second RSV season.” Bronchodilator therapy has been removed as a consideration for prophylaxis in the second RSV season.

We regret this error.

doi:10.1542/peds.2014-2783

### **Veres et al. Duodenal Ulceration in a Patient With Celiac Disease and Plasminogen I Deficiency: Coincidence or Cofactors? *Pediatrics*. 2011;128(5):e1302–e1306**

An error occurred in the article by Veres et al, titled “Duodenal Ulceration in a Patient With Celiac Disease and Plasminogen I Deficiency: Coincidence or Cofactors?” published in the November 2011 issue of *Pediatrics* (2011;128[5]:e1302–e1306; doi:10.1542/peds.2010-2251). On page e1302, the list of authors reads: “Gabor Veres, MD, PhD,<sup>a</sup> Ilma Korponay-Szabó, MD, PhD,<sup>b</sup> Erika Maka, MD,<sup>c</sup> Tibor Glasz, MD, PhD,<sup>d</sup> Petar Mamula, MD,<sup>e</sup> Maria Papp, MD, PhD,<sup>f</sup> Antal Dezsöfi, MD, PhD,<sup>a</sup> and Andras Arató, MD, Dsc<sup>a</sup>”.

The list of authors should have read: “Gabor Veres, MD, PhD,<sup>a</sup> Ilma Korponay-Szabó, MD, PhD,<sup>b</sup> Erika Maka, MD,<sup>c</sup> Tibor Glasz, MD, PhD,<sup>d</sup> Petar Mamula, MD,<sup>e</sup> Maria Papp, MD, PhD,<sup>f</sup> Antal Dezsöfi, MD, PhD,<sup>a</sup> Volker Schuster, MD,<sup>g</sup> Katrin Tefs, PhD,<sup>g</sup> and Andras Arató, MD, Dsc<sup>a</sup>”.

The author affiliations should have included: “<sup>g</sup>Children’s Hospital, University of Leipzig, Germany”.

doi:10.1542/peds.2014-2897

### **Charach et al. Interventions for Preschool Children at High Risk for ADHD: A Comparative Effectiveness Review. *Pediatrics*. 2013;131(5):e1584–e1604**

An error occurred in the article by Charach et al, titled “Interventions for Preschool Children at High Risk for ADHD: A Comparative Effectiveness Review” published in the May 2013 issue of *Pediatrics* (2013;131[5]:e1584–e1604; doi:10.1542/peds.2012-0974). Starting on page e1592, under the PATS heading within the Results section, this reads: “Methylphenidate improved core parent-rated and teacher-rated ADHD symptoms during the within-subject crossover titration phase with a mean optimal single dose of 0.7 +/- 0.4 mg/kg, and with a mean optimal total daily dose of 14.2 +/- 8.1 mg/kg/day.”

This should have read: “Methylphenidate improved core parent-rated and teacher-rated ADHD symptoms during the within-subject crossover titration phase with

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*Pediatrics* 2014;134;1221

DOI: 10.1542/peds.2014-2783

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