

On page 170, in the list of authors, the first author should have been Donna Jo Naploli. The corrected list of authors should have read: Donna Jo Napoli, PhDa, Nancy K. Mellon, MSb, John K. Niparko, MDb, Christian Rathmann, PhDc, Gaurav Mathur, PhDd, Tom Humphries, PhD, Theresa Handley, BAA, Sasha Scambler, PhD, and John D. Lantos, MDb

The updated list of author affiliations should have read: aSwarthmore College; bThe River School, Washington, District of Columbia; cDepartment of Otolaryngology, University of Southern California; dInstitute for German Sign Language and Communication of the Deaf, University of Hamburg; eGraduate School, Gallaudet University; fDepartment of Education Studies, University of California at San Diego; gKing’s College London; and hChildren’s Mercy Hospital

Also on page 170, the abstract appeared as follows: “Every year, 10 000 infants are born in the United States with sensorineural deafness. Deaf children of hearing (and nonsigning) parents are unique among all children in the world in that they cannot easily or naturally learn the language that their parents speak. These parents face tough choices. Should they seek a cochlear implant for their child? If so, should they also learn to sign? As pediatricians, we need to help parents understand the risks and benefits of different approaches to parent–child communication when the child is deaf. The benefits of learning sign language clearly outweigh the risks. For parents and families who are willing and able, this approach seems clearly preferable to an approach that focuses solely on oral communication.”

This should have read: “Every year, 10 000 infants are born in the United States with sensorineural deafness. Deaf children of hearing (and nonsigning) parents are unique among all children in the world in that they cannot easily or naturally learn the language that their parents speak. These parents face tough choices. Should they seek a cochlear implant for their child? If so, should they also learn to sign? As pediatricians, we need to help parents understand the risks and benefits of different approaches to parent–child communication when the child is deaf.”

The online version of the article reflects these changes.

doi:10.1542/peds.2015-2443


1. On page e1358, in the section on Malathion (0.5%), the second-to-last sentence should have read: “Safety and effectiveness of malathion lotion have not been established in children younger than 6 years, and the product is not recommended.” (instead of “…the product is contraindicated”).