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Corrections and clarifications

Health professionals' and service users' interpretation of screening test results: experimental study

A reader spotted an error in this paper by Ros Bramwell and colleagues (*BMJ* 2006;333:284-6, 5 Aug). The abstract should say that only 34% (not 43%) of obstetricians correctly estimated the probability that a positive screening test result meant that a baby actually had Down's syndrome.

Book review

In Alex Paton's book review (of David Craig's *Plundering the Public Sector: How New Labour are Letting Consultants Run Off with £70 Billion of our Money*), we somehow failed to make a couple of requested changes to this article (*BMJ* 2006;333:266, 29 Jul). In the second paragraph, the stated earnings of management consultants from the UK government were lower—by a factor 10—than they should have been. They apparently earn £10 000-£25 000 a week. At the end of the third paragraph, the figure of 23 million refers to attendances (not admissions). In addition, we have spotted that we mucked about with the spelling of "minuscule" in the time honoured way.

Serum cholesterol, haemorrhagic stroke, ischaemic stroke, and myocardial infarction: Korean national health system prospective cohort study

A careless keystroke during the editorial process interfered with our electronic tagging and resulted in the "conclusion" disappearing from the abstract of this paper by Shah Ebrahim and colleagues (*BMJ* 2006;333:22-5, 1 Jul). The error did not occur in the printed journal but occurred in all of the electronic versions except the abridged pdf. These versions have now been corrected.

Mortality after Staphylococcus aureus *bacteraemia in two hospitals in Oxfordshire, 1997-2003: cohort study*

Oversights during our editing and proofreading of the abridged version of this research paper by David H Wyllie and colleagues (*BMJ* 2006;333:281-4, 5 Aug) resulted in the same figure being published twice (both online and in the printed version). Figure 2 is correct, but figure 1 is wrong. For the correct figure 1, please see the abridged version online, which has now been corrected (http://bmj.bmjjournals.com/cgi/reprint_abr/333/7562/281).

A randomised controlled trial of management strategies for acute infective conjunctivitis in general practice

The conclusion is wrong in the main text of this paper by Hazel A Everitt and colleagues (*BMJ* 2006;333:321-4, 12 Aug). It should say: "Compared with immediate antibiotics [not "Compared with no initial offer of antibiotics"] delayed prescribing had the advantage of reduced antibiotic use, no evidence of medicalisation, similar symptom control, and reduced reattendance for eye infections." The conclusion published in the abstract is correct.