
CORRECTIONS

Author Correction

The July 1, 2010, article by Jackson et al, entitled “Quality of Nonmetastatic Colorectal Cancer Care in the Department of Veterans Affairs” (J Clin Oncol 28:3176–3181, 2010), contained errors.

In the Abstract, in the last sentence under Results, 64.9 was given as the mean number of days between definitive surgery and start of adjuvant chemotherapy, and 444.1 was given as the mean number of days between definitive surgery and follow-up colonoscopies, whereas it should have been 64.8 and 444.2 days, respectively, as follows:

“The mean number of days between major treatment events included the following: 26.6 days (standard deviation [SD], 38.2; median, 20 days) between diagnosis and initiation of treatment (in stages II to III disease); **64.8** days (SD, 54.9; median, 50 days) between definitive surgery and start of adjuvant chemotherapy (in stages II to III disease); and **444.2** days (SD, 182.1; median, 393 days) between definitive surgery and follow-up colonoscopies (in stages I to III disease).”

In the Results section, the third sentence of the third paragraph indicated that 73.5% of patients received adjuvant FU-based chemotherapy, whereas it should have been 73.4%, as follows: “The majority of patients also had appropriate referral to a medical oncologist (in stages II to III, 77.5%), adjuvant FU-based chemotherapy (in stage III, **73.4%**), and preoperative CT scan of the abdomen and pelvis (in stages II to III, 72.1%).”

Also in the Results section, in the first sentence of the fourth paragraph, 64.9 was given as the mean number of days between definitive surgery and start of adjuvant chemotherapy, and 444.1 was given as the mean number of days between

definitive surgery and follow-up colonoscopy, whereas it should have been 64.8 and 444.2 days, respectively, as follows: “The mean number of days between major treatment events included the following: 26.6 days (SD, 38.2; median, 20 days) between diagnosis and initiation of treatment, including surgery, radiotherapy, or chemotherapy (in stages II to III); **64.8** days (SD, 54.9; median, 50 days) between definitive surgery and start of adjuvant chemotherapy (in stages II to III disease who received adjuvant chemotherapy); and **444.2** days (SD, 182.1; median, 393 days) between definitive surgery and follow-up colonoscopy (in patients with stages I, II, and III disease who had a follow-up colonoscopy).”

In Table 2, 73.5 was given as the percentage of patients who received adjuvant FU or capecitabine after definitive surgical resection (second-to-last row of the last column), whereas it should have been 73.4.

In Table 3, 64.9 was given as the mean number of days from definitive surgery to the start of adjuvant chemotherapy (second row of the fourth column), whereas it should have been 64.8. In the last row of the third column, 644 was given as the number of patients undergoing surveillance colonoscopy who qualified for the study sample, whereas it should have been 682. Also, in the last row of the fourth column, 444.1 was given as the mean number of days from definitive surgical resection to surveillance colonoscopy, whereas it should have been 444.2.

The authors apologize to the readers for the mistakes.

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Journal Correction

The July 10, 2010, article by Casper et al, entitled “Allogeneic Hematopoietic Stem-Cell Transplantation in Patients With Hematologic Malignancies After Dose-Escalated Treosulfan/Fludarabine Conditioning” (J Clin Oncol 28:3344–3351, 2010), contained typographical errors.

In Figures 1-4, the last rate in each table was erroneously labeled as 7200d, whereas it should have been 720d. *Journal*

of Clinical Oncology apologizes to the authors and readers for the mistakes.

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