
Errata

The March 10, 2016, article by Asselin et al, entitled “Cardioprotection and Safety of Dexrazoxane in Patients Treated for Newly Diagnosed T-Cell Acute Lymphoblastic Leukemia or Advanced-Stage Lymphoblastic Non-Hodgkin Lymphoma: A Report of the Children’s Oncology Group Randomized Trial Pediatric Oncology Group 9404,” (J Clin Oncol 34:854-862, 2016), contained errors.

In the Abstract, under results, the 5-year EFS for dexrazoxane group was incorrectly given as 76.7% when it should have been 77.2%. The sentence should have read as, “The 5-year event-free survival (with standard error) did not differ between groups: **77.2%** (2.7%) for the dexrazoxane group versus 76.0% (2.7%) for the doxorubicin-only group (P = .9).”

Also in the results section, the n in the doxorubicin-alone group was incorrectly given as 55, but should have been: “The mean left ventricular fractional shortening, wall thickness, and thickness-to-dimension ratio z scores measured 3 years after diagnosis were worse in the doxorubicin-alone group (n = **79-84**) per group;”

In table 2, the numbers of induction failures were swapped between two regimens Doxorubicin Alone and Doxorubicin +

Dexrazoxane. They were incorrectly given as 13 and 17, but should have been given as **17 for Doxorubicin Alone** and **13 for Doxorubicin + Dexrazoxane**. The number of relapses for the “other” category was incorrectly given as 7 and 16, but it should have been **9 and 18**. The secondary malignant neoplasm for Doxorubicin + Dexrazoxane was incorrectly given as, “8: n = 2 AML, n = 2 astrocytoma, n = 2 GBM, n = 1 medulloblastoma papillary carcinoma (thyroid),” however, it should have been given as ““8: n = 2 AML, n = 2 astrocytoma, n = 2 GBM, n = 1 **each** medulloblastoma, papillary carcinoma (thyroid).” Total events were given as 62, 69, and 131 but should have been **66, 67, and 133**.

In the discussion section, first sentence, the 10-year EFS rate was incorrectly given as 74%, but should have been **75.2%** as correctly stated in the Disease Outcomes section.

The online version has been corrected in departure from the print. The authors apologize for the errors.

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The September 10, 2016, article by Chagtai et al, entitled “Gain of 1q As a Prognostic Biomarker in Wilms Tumors (WTs) Treated With Preoperative Chemotherapy in the International Society of Paediatric Oncology (SIOP) WT 2001 Trial: A SIOP Renal Tumours Biology Consortium Study” (J Clin Oncol 34:3195-3203), was published with the wrong Open Access license.

The article was published under the Gold CC-BY Open Access license, but the open access icon lock doesn’t appear at the issue level.

Also, on the full text page, it should mention the OA license (**Licensed under the Creative Commons Attribution 4.0 License: <http://creativecommons.org/licenses/by/4.0/>**).

It should also have had the correct Gold CC BY **license information** under the author list in the Abstract tab, the Full Text tab, and the PDF tab.

The online version has been corrected in departure from the print. *Journal of Clinical Oncology* apologizes for the error.

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The February 20, 2017, article by Kehl et al, entitled “Access to Accredited Cancer Hospitals Within Federal Exchange Plans Under the Affordable Care Act” (J Clin Oncol 35:645-651, 2017), was published with an error.

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