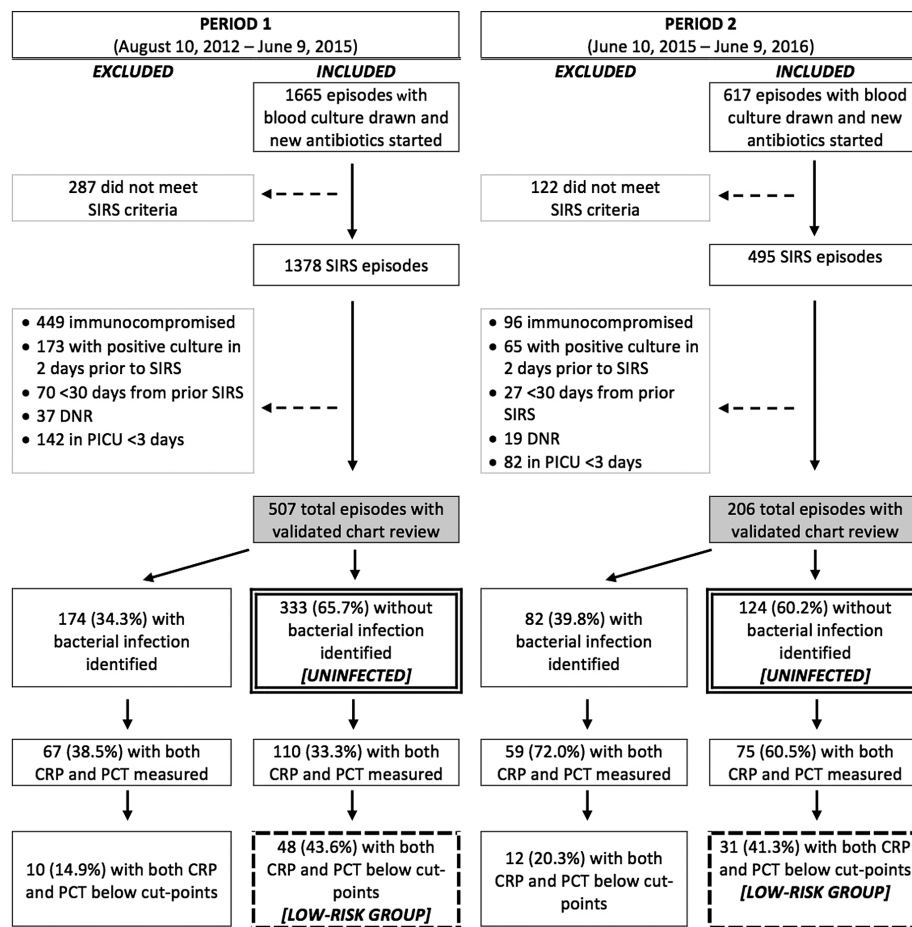


CORRIGENDUM

An error appeared in the following article published in the *Journal of the Pediatric Infectious Diseases Society*: Downes KJ, Fitzgerald JC, Schriver E et al. Implementation of a Pragmatic Biomarker-Driven Algorithm to Guide Antibiotic Use in the Pediatric Intensive Care Unit: the Optimizing Antibiotic Strategies in Sepsis (OASIS) II Study. *Journal of*

the Pediatric Infectious Diseases Society 2018; doi:10.1093/jpids/piy113. Figure 1, upon publication, contained the abbreviation “PCR” for “polymerase chain reaction.” This was incorrect, as the abbreviation should have been “PCT” for “procalcitonin.” This has now been corrected online. The author regrets the error.



Gray boxes highlight all eligible SIRS episodes that underwent chart review to identify the presence/absence of infection.

Double-barred boxes highlight episodes without bacterial infection identified (uninfected). Uninfected episodes were the target of the intervention. Episodes in these boxes are used for primary comparisons in the manuscript, including segmented regression analyses.

Hashed boxes represent subset of uninfected episodes with both biomarkers below the algorithm’s cut-points (low-risk group). Episodes in these boxes are used for comparisons of unadjusted excess length of therapy (LOT) and days of therapy (DOT) pre- and post-intervention.

Figure 1.