
ERRATA

Policy Statement—Immunization for *Streptococcus pneumoniae* Infections in High-Risk Children. *Pediatrics*. 2014;134(6):1230–1233

An error occurred in the AAP policy statement “Immunization for *Streptococcus pneumoniae* Infections in High-Risk Children” published in the December 2014 issue of *Pediatrics* (2014;134[6]:1230–1233). In Table 1 (p 1231), the rows were incorrectly formatted. In the Condition column, the row for “Congenital or asplenia or splenic dysfunction” should have an X under “Recommended” for PCV13 and should have an X under “1 Dose” and “Repeated Dose^b” for PPSV23. The electronic version of the statement that is posted online has been corrected.

doi:10.1542/peds.2015-0451

Romitti et al. Prevalence of Duchenne and Becker Muscular Dystrophies in the United States. *Pediatrics*. 2015;135(3):513–521

Production errors occurred in the print edition of the article by Romitti et al, titled “Prevalence of Duchenne and Becker Muscular Dystrophies in the United States” published in the March 2015 issue of *Pediatrics* (2015;135[3]:513–521; doi:10.1542/2014-2044).

On page 516, under Results paragraph 1, on lines 1–10, this reads: “Overall, 707 (83.7%) of the 845 pooled cases (ie, all sites combined) were classified as definite; case status for 82.0% of definite cases was based on DNA analysis demonstrating a dystrophin mutation (Table 1). Among the 765 definite and probable cases, most were non-Hispanic white (57.6%), diagnosed with DMD (79.6%), and the only case in the family (78.6%);” This should have read: “Overall, 707 (83.7%) of the 845 pooled cases (ie, all sites combined) were classified as definite (Table 1); case status for 82.0% of definite cases was based on DNA analysis demonstrating a dystrophin mutation (data not shown). Among the 765 definite and probable cases, most were non-Hispanic white (57.6%), diagnosed with DMD (71.0%), and the only case in the family (78.6%);”

On page 517, under Results paragraph 3, on lines 17–19, this reads: “Prevalence for all age groups combined was 1.12 for DMD and 0.26 for BMD;” This should have read: “Prevalence for all age groups combined was 1.02 for DMD and 0.36 for BMD;”

On page 518, under Discussion paragraph 3, on lines 8–12, this reads: “It also was less comparable to other studies of original data, which reported prevalence of DBMD among all male individuals in the population.” This should have read: “It also was less comparable to other studies of original data on prevalence of DBMD among all male individuals in the population.”

doi:10.1542/peds.2015-0652

Betancourt et al. HIV and Child Mental Health: A Case-Control Study in Rwanda. *Pediatrics*. 2014;134(2):e464–e472

An error occurred in the article by Betancourt et al, titled “HIV and Child Mental Health: A Case-Control Study in Rwanda” published in the August 2014 issue of *Pediatrics* (2014;134[2]: e464–e472; doi:10.1542/peds.2013-2734). On page e464, in the abstract under the heading Results, lines 24–25 read: “These results remained significant after controlling for contextual variables.” This should have read: “After controlling for contextual variables, there were no significant differences on mental

health outcomes across groups, reflecting a potential explanatory role of factors such as daily hardships, caregiver depression, and HIV-related stigma.”

doi:10.1542/peds.2015-0753

Weitzman, Wegner, the Section on Developmental and Behavioral Pediatrics, Committee on Psychosocial Aspects of Child and Family Health, Council on Early Childhood, and Society for Developmental and Behavioral Pediatrics. Promoting Optimal Development: Screening for Behavioral and Emotional Problems. *Pediatrics*. 2015;135(2):384–395

An error occurred in the American Academy of Pediatrics clinical report, titled “Promoting Optimal Development: Screening for Behavioral and Emotional Problems” published in the February 2015 issue of *Pediatrics* (2015;135[2]:384–395). Reference 45 should be “King TM, Tandon SD, Macias MM, et al. Implementing developmental screening and referrals: lessons learned from a national project. *Pediatrics*. 2010;125(2):350–360”. We regret the error.

doi:10.1542/peds.2015-0904

Butler et al. Growth Charts for Non-growth Hormone Treated Prader-Willi Syndrome. *Pediatrics*. 2015;135(1):e126-e135

An error occurred in the article by Butler et al, titled “Growth Charts for Non-growth Hormone Treated Prader-Willi Syndrome” published in the January 2015 issue of *Pediatrics* (2015;135[1]:e126–e135; doi:10.1542/peds.2014-1711).

On page e129, Fig 1, A and B, the third percentile line is missing for both the male and female subjects. This line is lower but closely parallels the other percentile lines.

In the Figure Legend for Fig 1, this reads: “(male subjects [upper] and female subjects [lower])”. This should have read: “(male subjects [left] and female subjects [right])”.

doi:10.1542/peds.2015-0926

Betancourt et al. HIV and Child Mental Health: A Case-Control Study in Rwanda. *Pediatrics*. 2014;134(2):e464-e472

Pediatrics 2015;135;945

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Betancourt et al. HIV and Child Mental Health: A Case-Control Study in Rwanda. *Pediatrics*. 2014;134(2):e464-e472

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The online version of this article, along with updated information and services, is located on the World Wide Web at:

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