

CORRECTION

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# Correction to: Awareness and current implementation of drug dosage adjustment by pharmacists in patients with chronic kidney disease in Japan: a web-based survey

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**Correction to: BMC Health Serv Res 14, 615 (2014)**  
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Following publication of the original article [1], the authors identified an error in the column **p value** in Table 5. They erroneously listed the **p-value** for working experience as "0.616", but the correct value is "0.0616". The correct table is given below.

The original article [1] has been updated.

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## Reference

1. Kondo Y, et al. Awareness and current implementation of drug dosage adjustment by pharmacists in patients with chronic kidney disease in Japan: a web-based survey. *BMC Health Serv Res.* 2014;14:615.

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**Table 5** Factors influencing implementation of ADDR by community pharmacists

| Factor  | Odds ratio | 95% Confidence interval | p value |
|---|------------|-------------------------|---------|
| Routinely receive prescriptions from nephrologists                          |            |                         |         |
| No  | (ref)      | 1.16–8.44               | 0.0247  |
| Yes   | 3.12       |                         |         |
| Experience with adverse drug events caused by inappropriate dosage          |            |                         |         |
| No  | (ref)      | 1.00–15.3               | 0.0498  |
| Yes   | 3.92       |                         |         |
| Work experience   |            |                         |         |
| <5 years  | (ref)      | 0.96–6.02               | 0.0616  |
| ≥5 years  | 2.40       |                         |         |
| Awareness of need for pharmacists to check dosage of renally excreted drugs | 4.44       | 2.52–7.81               | <0.001  |

Predictors: duration of work experience, Routinely dispense prescriptions from nephrologists, obstacle to implementation of ADDR, awareness of pharmacotherapy for CKD patients