Errata

The article "Impact of prothrombin time—International Normalized Ratio on outcome of patients with septic shock receiving polymyxin B cartridge hemoperfusion" by Mitsuru Ishizuka, MD, Kazuma Tago, MD, and Keiichi Kubota, MD, which appeared in *Surgery* 2014;156:168-75, was published with errors. The word "acetate" was used mistakenly. The word "lactate" should replace all occurrences of the word "acetate." The results and conclusions of the article are not changed. *Surgery* and the authors apologize for the oversight.

In the article "Toronto Orthopedic boot camp III: Examining the efficacy of student-regulated learning during an intensive, laboratory-based surgical skills course" by Ranil R. Sonnadara, Shawn Garbedian, Oleg Safir, Carween Mui, Polina Mironova, Markku Nousiainen, Peter Ferguson, Benjamin Alman, William Kraemer, and Richard Reznick, which appeared in *Surgery* 2013;154:29-33, we regret to report that there is an error with the analysis of the pretest data that was caused by an error in a spreadsheet formula that was carried into the final analysis. Furthermore, error values that we identify as standard deviation are in fact standard error.

We have rerun the analysis using the correct data. Our results are not substantially affected by the error, and our conclusions remain the same.

We apologize to the journal and the readership for these errors.

The results section of the abstract should read as follows:

RESULTS

Before the start of the skills course, there were no differences in performance scores between the 2 groups. On completion of the skills course, mean GRS for the 4 operative skills tasks were greater for the SL group compared with the IL group: [mean ± SE] SL, 3.95 ± 0.14; IL, 3.43 ± 0.14; $F(1,10) = 5.78$ $P < .05$. A similar pattern of results was revealed by the checklists scores, with the SL group outperforming the IL group: SL, 95.0 ± 2.1; IL, 86.4 ± 2.1; $F(1,10) = 8.43$; $P < .02$.

The results section should read as follows:

Pretest. An analysis from the global rating scores revealed no significant performance difference on the GRS average for the 4 stations between the 2 groups before the TOBC program: [mean ± SE] SL = 2.91 ± 0.17; IL = 2.86 ± 0.17; P = n.s. The mean pretest checklists also revealed no differences between the groups before TOBC training: SL = 64.8 ± 2.9; IL = 66.1 ± 2.9; P = n.s.

Posttest. On completion of the TOBC programs, both groups showed significant improvement, with performances on the postcourse skills test being rated much more highly than on the pretest. Mean GRS scores revealed SL residents were being rated more highly by our expert evaluators [mean ± SE] (3.95 ± 0.14) than their IL counterparts (3.43 ± 0.14): $F(1,10) = 5.78$, $P < .05$. A similar effect was seen in the checklist data with SL residents (95.0 ± 2.1) being scored more highly than the IL group (86.4 ± 2.1): $F(1,10) = 8.43$; $P < .02$.

Visual inspection of data from individual stations using both post-test GRS and checklists scores revealed that SL residents consistently outperformed IL residents across all stations (Fig). The greatest difference in improvement for both groups was observed on the wedge cut station, where the SL mean difference checklist score was 36.3, and the IL mean difference checklist score was 29.8. The least difference in improvement for both groups was observed in the wound closure task, where the SL mean difference checklist score was 11.1, and the IL mean difference score was 2.9.

In the article "Orthopedic boot camp II: Examining the retention rates of an intensive surgical skills course" by Ranil R. Sonnadara, Shawn Garbedian, Oleg Safir, Markku Nousiainen, Benjamin Alman, Peter Ferguson, William Kraemer, and Richard Reznick, which appeared in *Surgery* 2012;151:803-807, we regret to report that there is an error in the analysis of the checklist and global

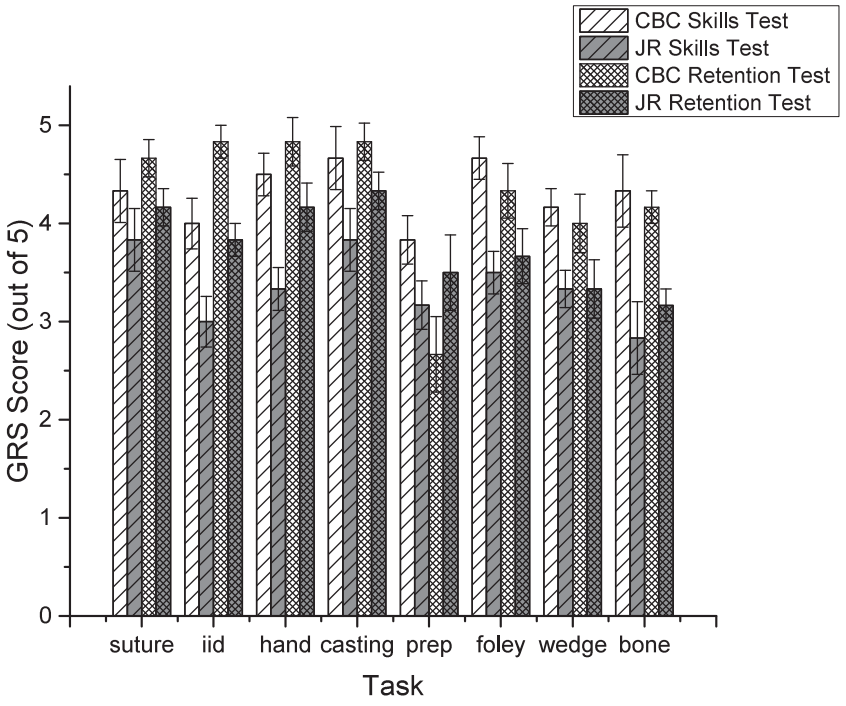

Fig 4.

rating scale (GRS) data from the first skills test—some participants who only participated in the first test and not the retention test were not properly excluded from the analysis when their data should have been excluded completely. Furthermore, one station that was not present in the retention test was not properly excluded. We also note an error wherein we stated that "CBC residents were scored lower on the hand washing station of the retention test," when in fact this was true for the prepping station.

We have rerun the analysis using the correct data. Our results are not significantly affected by the error, and our conclusions remain the same. We apologize to the journal and the readership for these errors.

The results section from the abstract should read as follows: The mean global rating scale score for the competency-based curriculum (CBC) group immediately after the skills course was 4.3, which was maintained 6 months later. There were no significant performance differences between the CBC and senior resident (SR) groups. Both the CBC and SR groups performed significantly better than the junior resident (JR) group (mean GRS 3.8; $F[2, 15] = 12.3$, $P < .001$).

The corrected results section should read as follows: Checklist data from the first skills test revealed significant differences between the groups with the CBC residents performing better than the JR residents [mean ± SE] (JR = 74.7 ± 0.9, CBC = 91.3 ± 0.9; main effect of group $F[1,10] = 169.3$, $P < .01$). Visual inspection of the data revealed large differences between the groups on the orthopedic-specific tasks such as bone wedge cutting (JR = 62.5, CBC = 86.1), instrument identification (JR = 70.4, CBC = 83.3), and bone drilling / screw insertion (JR = 62.7, CBC = 87.3).

Similar results were observed in the GRS data. GRS scores from the first skills test revealed that the performance of CBC residents was rated substantially greater than JR residents [mean ± SE] (JR = 3.4 ± 0.1, CBC = 4.3 ± 0.1; main effect of group $F[1,10] = 72.5$, $P < .01$). As with the checklist data, visual inspection of the GRS data revealed large differences in scores for the orthopedic-specific skills of bone wedge cutting (JR = 3.3, CBC = 4.2), instrument identification (JR = 3.0, CBC = 4.0), and bone drilling / screw insertion (JR = 2.8, CBC = 4.3). Other basic operative skills of wound closure (JR = 3.8, CBC = 4.3) and hand washing (JR = 3.3, CBC = 4.5) were found to have differences favoring the CBC residents.

Retention test data, collected 6 months after completion of the skills course, revealed that although the scores of JR residents improved (GRS score at 1 month = 3.4 ± 0.1, GRS at 7

months = 3.8 ± 0.1, $P < .01$), there was no significant decrease in the scores of the CBC residents (GRS score at 1 month = 4.3 ± 0.1, GRS at 7 months = 4.3 ± 0.1, P = n.s.; see Fig 2). There was a significant effect of training (JR = 3.8 ± 0.1, CBC = 4.3 ± 0.1, SR = 4.4 ± 0.1; main effect of group $F[2, 15] = 12.3$, $P < .001$; Fig 3). Post-hoc analysis using Tukey's Honestly Significant Differences test showed that there was no significant difference between the scores of the CBC and SR residents and that both CBC and SR residents were scored more highly than the JR residents. Visual inspection of the individual stations revealed that the largest improvement for both the CBC and JR residents was in instrument identification (see Fig 4). Similar patterns can be seen in the checklist data (JR = 78.7 ± 1.2, CBC = 88.8 ± 1.2, SR = 85.4 ± 1.2; main effect of group $F[2, 15] = 17.6$, $P < .01$). Retention rates for 3 CBC residents were retested 18 months after the completion of the TOBC course. Visual inspection of the data revealed no decline in performance, although our sample size is too small at present to formally examine this.

We include new Fig 4, which reflects the proper data.

In the article "Orthopedic boot camp: Examining the effectiveness of an intensive surgical skills course" by Ranil R. Sonnadara, Aaron Van Vliet, Oleg Safir, Benjamin Alman, Peter Ferguson, William Kraemer, and Richard Reznick, which appeared in *Surgery* 2011;149:745-749, we incorrectly identified, as standard deviation, values that were in fact standard error.

This error alters neither the outcomes of our analysis nor our conclusions.

We apologise to the journal and the readership for the error.

The proper tables are:

Table I. Mean scores among all stations (calculated from checklists and converted to a percentage) on the pretest and post-test separated by group

Group	*Pretest (SE)*	P *value*	*Post-test (SE)*	P *value*
On service	70.1 (2.4)	.442	78.9 (1.5)	<.01
Off service	67.4 (2.4)		78.6 (1.5)	
ISL	72.1 (2.7)		92.3 (1.7)	

P value shown is for comparison between all groups for pretests and post-tests.
ISL, Intensive skills lab; *SE*, standard error.

Table II. Mean GRS scores among all stations on the pretest and post-test separated by group

Group	*Pretest (SE)*	P *value*	*Post-test (SE)*	P *value*
On service	2.82 (0.15)	.507	3.44 (0.07)	<.01
Off service	2.65 (0.15)		3.36 (0.07)	
ISL	2.91 (0.17)		4.33 (0.08)	

P value shown is for comparison between all groups for pretests and post-tests.
ISL, Intensive skills lab; *SE*, standard error.