



Erratum to ‘Minimizing Diagnostic Error: The Importance of Follow-Up and Feedback’, *The American Journal of Medicine* (2008) Vol 121 (5A), S38-S42

Gordon D. Schiff, MD

Division of General Medicine, Brigham and Women’s Hospital, Boston, Mass.

The publisher regrets that two of the Tables in the published version of this study were incorrectly titled. **Table 2** should be titled “Expanded paradigms in diagnosis”, not “Limitations of using successful or failed “treatment response” as an indicator for diagnostic error”; **Table 3** should read “Limitations of using successful or failed

“treatment response” as an indicator for diagnostic error”, not “Factors complicating assessment of treatment response”. The Tables with their correct titles are shown below.

The publisher would like to apologise for any inconvenience or confusion caused by this error.

Table 2 Expanded paradigms in diagnosis

- Diagnosis of severity/acuity
 - Failure to recognize patient need to be hospitalized or sent to ICU
- Diagnosis of complication
 - Assessing sequelae of a disease, drug, or surgery
- Diagnosis of a recurrence
 - What follow-up surveillance is required and how to interpret results
- Diagnosis of cure or failure to respond
 - When can clinician feel secure vs worry if symptoms don’t improve
 - When should “test-of-cure” be done routinely
- Diagnosis of a misdiagnosis
 - When should a previous diagnosis be questioned and revised

ICU = intensive care unit.

Table 3 Limitations of using successful or failed “treatment response” as an indicator for diagnostic error

- Patients who respond to a nonspecific/nonselective drug (e.g., corticosteroids) despite a wrong diagnosis
- Patients who fail to respond to therapy despite the correct diagnosis
- Varying time intervals for expected response
 - When does a clinician decide a patient is/is not responding
- Interpretation of partial responses
- How to incorporate known variations in response
 - Timing
 - Degree
- Role of surrogate (e.g., lab test or x-ray improvement) vs actual clinical outcome
- Timing of repeat testing to check for patient response
 - When and how often to repeat an x-ray or blood test
- Role of mitigating factors
 - Self-limited illnesses
 - Placebo response
 - Naturally relapsing and remitting courses of disorders

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Corresponding author: Gordon D. Schiff, MD

E-mail address: gschiff@partners.org