CORRECTION



Correction to: The postoperative shorter meniscal width was the risk factor of lateral meniscal extrusion in the middle portion for juvenile and adolescent knees with discoid lateral meniscus

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Authors would like to correct the errors in figure legend and figures of Figs. 1 and 2. Correct version of Figs. 1 and 2 updated here.

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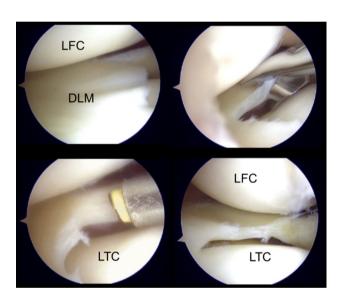


Fig. 1 Arthroscopic saucerization alone. After partial meniscectomy, the central margin was treated by a radio frequency to prevent regeneration of meniscus. *LFC* lateral femoral condyle, *DLM* discoid lateral meniscus, *LTC* lateral tibial condyle

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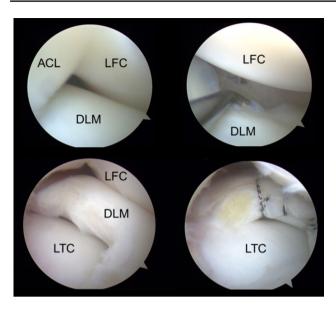


Fig. 2 Arthroscopic saucerization with meniscal repair. In this case, discoid lateral meniscus (DLM) showed the tear of the posterior meniscocapsular junction (anterocentral type) in the upper right figure. Following minimum partial meniscectomy in the lower left figure, the meniscus was repaired by various suture techniques. The remained meniscus was translated peripherally by suturing like the lower right figure because of the discontinuity and inhomogeneity of the collagen. *LFC* lateral femoral condyle, *DLM* discoid lateral meniscus, *ACL* anterior cruciate ligament, *LTC* lateral tibial condyle

