



CORRECTION

Correction to: Value of Primary Rectal Tumor PET/MRI in the Prediction of Synchronic Metastatic Disease

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The authors would like to correct the following:

- 1) In the Methods section under “Study Participants” (paragraph 2), the first sentence states “203 consecutive participants (median age 62 years; range, 33–87 years) with biopsy-proven rectal adenocarcinoma (up to 15 cm from the anal verge assessed by rigid proctoscopy) underwent whole-body ¹⁸F-FDG PET/MRI in a referral cancer center and were eligible for inclusion.” The last sentence states “Overall, 101 patients were included in the final study.”

The correct sentence should be “Between November 2016 and April 2018, 203 consecutive participants (median age 62 years; range, 33–87 years) with biopsy-proven rectal adenocarcinoma (up to 15 cm from the anal verge assessed by rigid proctoscopy) in a referral cancer center were eligible for inclusion. Overall, 101 patients underwent wholebody ¹⁸F-FDG PET/MRI and were included in the final study.”

- 2) In the Methods section under “Pelvic MRI” (paragraph 1), the third sentence states “The MRF status was positive

if the circumferential resection margin was less than or equal to 1 mm from tumor, mesorectal node, or deposit”.

The correct sentence should be “The MRF status was positive if the circumferential resection margin was less than or equal to 1 mm from tumor, extramural venous invasion, or deposit.”

- 3) In the Methods section under “Pelvic MRI” (paragraph 2), the first sentence states “For regional (mesorectal and internal iliac) nodal MRI staging (mrN — nodal status on MRI), the malignant criteria were based on size and morphology (round shape, irregular border, and/or heterogeneous signal) according to the European Society of Gastrointestinal and Abdominal Radiology guidelines”.

The correct sentence should be “For mesorectal nodal MRI staging (mrN — nodal status on MRI), the malignant criteria were based on morphology (irregular border, and/or heterogeneous signal). For iliac nodal staging, the malignant criteria were based on size and morphology.”

- 4) In the Methods section under “Pelvic MRI” (paragraph 2), the last sentence states “A positive lymph node was considered for the following: (a) short-axis diameter greater than or equal to 9 mm; (b) short-axis diameter of 5–8 mm and two or more morphologically

suspicious characteristics; (c) short-axis diameter of less than 5 mm and three morphologically suspicious characteristics; and (d) all mucinous lymph nodes (any size)".

The correct sentence should be "A positive mesorectal node was considered for the following: (a) irregular border and/or heterogenous signal. A positive lateral node was considered for the following: (a) irregular border

and/or heterogenous signal; (b) short-axis diameter greater than or equal to 7mm".

The authors regret these errors.

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