ERRATUM

Erratum to: A Randomized Clinical Trial of Alcohol Care Management Delivered in Department of Veterans Affairs Primary Care Clinics Versus Specialty Addiction Treatment

David W. Oslin, MD^{1,2}, Kevin G. Lynch, PhD², Stephen A. Maisto, PhD^{3,4}, Larry J. Lantinga, Ph.D.^{3,4}, James R. McKay, PhD^{1,2}, Kyle Possemato, Ph.D.^{3,4}, Erin Ingram, B.A.¹, and Michael Wierzbicki, MS⁵

¹Mental Illness Research, Education and Clinical Center at the Philadelphia VA Medical Center, University of Pennsylvania, Philadelphia, PA, USA;

²Department of Psychiatry, University of Pennsylvania Perelman School of Medicine, Philadelphia, PA, USA; ³Department of Psychology, Syracuse University, Syracuse, NY, USA; ⁴Center for Integrated Healthcare, Department of Veterans Affairs, VISN2, Syracuse, NY, USA; ⁵Department of Biostatistics and Epidemiology, Perelman School of Medicine, University of Pennsylvania, Philadelphia, PA, USA.

J Gen Intern Med 31(4):449

DOI: 10.1007/s11606-015-3419-y

© Society of General Internal Medicine 2015

Erratum to: J Gen Intern Med

DOI: 10.1007/s11606-013-2625-8

Within the abstract of the original publication, the following statement contains a technical error.

KEY RESULTS: The ACM condition had a significantly higher proportion of participants engaged in treatment over the 26 weeks [OR=5.36, 95 % CI = (2.99, 9.59)]. The percentage of heavy drinking days were significantly lower in the ACM condition [OR=2.16, 95 % CI= (1.27, 3.66)], while overall abstinence did not differ between groups.

Correction: KEY RESULTS: The ACM condition had a significantly higher proportion of participants engaged in treatment over the 26 weeks [OR=6.97, 95 % CI = (4.04, 12.05)]. The percentage of heavy drinking days were significantly lower in the ACM condition [OR=2.16, 95 % CI=(1.27, 3.66)], while overall abstinence did not differ between groups.