

Author Affiliations: Center for the Study of Aging and Human Development, Duke University Medical Center, Durham, North Carolina (Cohen); New Cortland Center for Transitions and Health, University of Pennsylvania School of Nursing, Philadelphia (Naylor); City of Hope Comprehensive Cancer Center, Duarte, California (Hurria).

Corresponding Author: Harvey Jay Cohen, MD, Duke University Medical Center, PO Box 3003, Durham, NC 27705 (harvey.cohen@duke.edu).

Conflict of Interest Disclosures: The authors have completed and submitted the ICMJE Form for Disclosure of Potential Conflicts of Interest. Dr Hurria reported serving as a consultant to GTX and Seattle Genetics and receiving grants from Celgene and GlaxoSmithKline. No other disclosures were reported.

Disclaimer: The authors are responsible for the content of this article, which does not necessarily represent the views of the Institute of Medicine.

1. Levit L, Balogh E, Ganz P. *Delivering High-Quality Cancer Care: Charting a New Course for a System in Crisis*. Washington, DC: National Academies Press; 2013.

2. National Research Council. *Safe and Effective Medicines for Children: Pediatric Studies Conducted Under the Best Pharmaceuticals for Children Act and the Pediatric Research Equity Act*. Washington, DC: National Academies Press; 2013.

CORRECTIONS

Incorrect Number of Excluded Patients Reported in the Text and Figure: In the Original Investigation entitled "Association of Testosterone Therapy With Mortality, Myocardial Infarction, and Stroke in Men With Low Testosterone Levels" published in the November 16, 2013, issue of *JAMA* (2013;310[17]:1829-1836. doi:10.1001/jama.2013.280386), incorrect data appeared. The second paragraph of the Results section should have read, "We excluded the following patients from this cohort: 2798 patients who had initiated testosterone prior to coronary angiography; 1301 patients who had missing coronary anatomy data or whose coronary anatomy was categorized as other; 128 patients who had testosterone prescribed after MI because treatment decisions after an event were likely to be different and because coronary anatomy data to assess coronary disease severity were not uniformly available; 112 patients who had started testosterone prior to having a testosterone level checked; 100 patients who were women; 17 patients with hematocrit levels higher than 50%; 12 patients with PSA levels of 4.0 ng/mL or higher; and 9996 patients who had total testosterone levels of 300 ng/dL or higher." Figure 1 should have included "1301 Missing

coronary anatomy," "128 Had testosterone therapy prescribed after myocardial infarction or stroke," and "100 Women" in the box listing excluded patients. This article has been corrected online.

Error in Patient Page: In the Patient Page entitled "New Guidelines for Treatment of High Blood Pressure in Adults" published in the February 5, 2014, issue of *JAMA* (2014;311[5]:538. doi:10.1001/jama.2013.286206), an error occurred. In the right-hand column, first paragraph, the first sentence should read "Recommendations 1 and 3 above represent changes from common practice." This article has been corrected online.

Guidelines for Letters

Letters discussing a recent *JAMA* article should be submitted within 4 weeks of the article's publication in print. Letters received after 4 weeks will rarely be considered. Letters should not exceed 400 words of text and 5 references and may have no more than 3 authors. Letters reporting original research should not exceed 600 words of text and 6 references and may have no more than 7 authors. They may include up to 2 tables or figures but online supplementary material is not allowed. All letters should include a word count. Letters must not duplicate other material published or submitted for publication. Letters not meeting these specifications are generally not considered. Letters being considered for publication ordinarily will be sent to the authors of the *JAMA* article, who will be given the opportunity to reply. Letters will be published at the discretion of the editors and are subject to abridgement and editing. Further instructions can be found at <http://jama.com/public/InstructionsForAuthors.aspx>. A signed statement for authorship criteria and responsibility, financial disclosure, copyright transfer, and acknowledgment and the ICMJE Form for Disclosure of Potential Conflicts of Interest are required before publication. Letters should be submitted via the *JAMA* online submission and review system at <http://manuscripts.jama.com>. For technical assistance, please contact jama-letters@jamanetwork.org.

Section Editor: Jody W. Zylke, MD, Senior Editor.