

CORRIGENDUM

Impact of ART on pregnancies in California: an analysis of maternity outcomes and insights into the added burden of neonatal intensive care

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Following publication, the authors noticed the fourth and fifth columns of Table 4 were incorrect. Additionally, there was a mistake in the Gestational age column, second 'Twins' row. Lastly,

the source of the information should have been 'NICU Admission Records, Department of Pediatrics, Chief Executive Officer'.

The corrected table appears below.

Table 4. Infant characteristics and hospital and physician charge ratios for 82 infants born after ART/AI

	<i>Birth weight (g)</i>	<i>Gestational age (weeks)</i>	<i>Hospital stay (days)</i>	<i>Hospital charges ratio (x fold)</i>	<i>Physician charges ratio (x fold)</i>
	<i>Mean ± 1 s.d. (median)</i>	<i>Mean ± 1 s.d. (median)</i>	<i>Mean ± 1 s.d. (median)</i>	<i>Mean ± 1 s.d. (median)</i>	<i>Mean ± 1 s.d. (median)</i>
Singletons	2553.8 ± 660.1 (2601)	35.6 ± 3.1 (37)	19.1 ± 21.7 (14)	36.7 ± 57.8 (2.8)	12.9 ± 20.2 (2.6)
Twins	2284.2 ± 687.2 (2348)	34.1 ± 3.6 (35)	21.5 ± 30.6 (5)	33.3 ± 66 (3.1)	18.5 ± 34.7 (3.3)
Triplets	1235.7 ± 421.1 (1324)	29.7 ± 2.6 (30)	60.9 ± 37.2 (59)	151.5 ± 96.2 (156.5)	88.0 ± 57.0 (75.9)

Abbreviations: AI, artificial insemination; ART, assisted reproductive technology; NICU, neonatal intensive care unit. Source: NICU Admission and Discharge Records, Office of Finance Loma Linda University Children's Hospital and Department Senior Administrator. Medians are denoted in italics.