

World Journal of *Radiology*

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ORIGINAL ARTICLE

Prospective Study

- 1 Computed tomography as primary postoperative follow-up after laparoscopic Roux-en-Y gastric bypass
Delko T, Mattiello D, Koestler T, Zingg U, Potthast S

CORRECTION

- 7 Correction to "Asymmetrically hypointense veins on T2*w imaging and susceptibility-weighted imaging in ischemic stroke" [*World J Radiol* 2013; 5(4): 156-165]
Jensen-Kondering U, Böhm R

ABOUT COVER

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Correction to "Asymmetrically hypointense veins on T2*w imaging and susceptibility-weighted imaging in ischemic stroke" [*World J Radiol* 2013; 5(4): 156-165]

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CORRECTION

Correction to: Jensen-Kondering U, Böhm R. Asymmetrically hypointense veins on T2*w imaging and susceptibility-weighted imaging in ischemic stroke. *World J Radiol* 2013; 5(4): 156-165 PMID: 23671751 DOI: 10.4329/wjr.v5.i4.156^[1].

Results

Third paragraph: (1) ($n = 17441$ patients) should read ($n = 441$ patients) instead; (2) ($n = 4111$ patients) should read ($n = 111$ patients) instead.

Fourth paragraph: (1) (> 6 h, $n = 15579$ patients) should read (> 6 h, $n = 579$ patients) instead; (2) (≤ 6 h = 11337 patients) should read (≤ 6 h = 337 patients) instead; (3) (170 patients) should read (180 patients) instead.

Table 3

Conventional MRI, column 2: 11 (242) should read 11 (81) instead.

Discussion

Figure 1A: χ^{Dhb} 0.4-0.5 should read χ^{Dhb} normal instead.

Figure 1B: χ^{Dhb} 0.7-1 should read χ^{Dhb} elevated instead.

REFERENCES

- 1 **Jensen-Kondering U**, Böhm R. Asymmetrically hypointense veins on T2*w imaging and susceptibility-weighted imaging in ischemic stroke. *World J Radiol* 2013; **5**: 156-165 [PMID: 23671751 DOI: 10.4329/wjr.v5.i4.156]

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