chronic diseases over a long period of time through a holistic multidisciplinary evaluation, including the wider SES and psychological influences on the individual, over the lifespan. In the case of IPF, this approach may be crucial for understanding its onset, evolution, and complex gene–environment interactions. The development of modern tools such as mobile health devices and remote sensors enables an exposomic approach through the generation of big data, which can be implemented in IPF registries. To sum up, to accurately investigate IPF, it is important to take into account the impact of air pollution, occupational exposure, and SES in patient registries, and to apply these factors through the lens of the exposome. This approach is closely connected with multidisciplinary research involving population epidemiology, environmental justice, and science and technology studies examining patients' living conditions. ■

Author disclosures are available with the text of this letter at www.atsjournals.org.

Lucile Sesé, M.D.*
Hôpital Avicenne
Bobigny, France
and
INSERM et Sorbonne Université
Paris, France

Catherine Cavalin, Ph.D.
IRISSO-CNRS
Paris, France
and
LIEPP-Sciences Po
Paris, France

Jean-François Bernaudin, M.D., Ph.D.
Hôpital Avicenne
Bobigny, France
and
UMR 1272 INSERM et Université Paris13
Bobigny, France

Isabella Annesi Maesano, M.D., Ph.D., D.Sc.
INSERM et Sorbonne Université
Paris, France

Hilario Nunes, M.D., Ph.D.
Hôpital Avicenne
Bobigny, France
and
UMR 1272 INSERM et Université Paris13
Bobigny, France

*Corresponding author (e-mail: lucile.sese@aphp.fr).

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Erratum: Lung Ultrasound for Critically Ill Patients

The article by Mojoli and colleagues (1), published in the March 15, 2019, issue of the *Journal*, contained incomplete disclosure information for two of the authors. Dr. Francesco Mojoli and Dr. Silvia Mongodi have supplied corrected conflict of interest disclosure forms, which may be accessed from the Supplements link in the online article. The updated disclosure summaries, which previously stated that the authors had nothing to disclose, are included below:

Dr. Mojoli reports personal fees from Hamilton Medical; personal fees from General Electric Healthcare, outside the submitted work; and at the time of this amendment, a consultancy agreement between University of Pavia and Hamilton Medical, outside the submitted work, is upcoming.

Dr. Mongodi reports personal fees from General Electric Healthcare, outside the submitted work. ■

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1. Mojoli F, Bouhemad B, Mongodi S, Lichtenstein D. Lung ultrasound for critically ill patients. *Am J Respir Crit Care Med* 2019;199:701–714.