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Corrigendum

Corrigendum to “Blend to Limit Oxygen in ECMO: A Randomised Controlled Registry (BLENDER) trial: Study protocol and statistical analysis plan” [Crit Care Resuscit 25 (2023) 118–125]

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The authors regret that in our paper “Blend to Limit Oxygen in ECMO: A Randomised Controlled Registry (BLENDER) Trial: Study Protocol and Statistical Analysis Plan” by Burrell et al, published in Critical Care and Resuscitation, PMID: 37876374, the primary outcome of ‘ICU-free days to day 28’ was mistakenly listed as ‘ICU-free days at day 60’.

‘ICU-free days to day 60’ is a secondary outcome. Although most patients are expected to cease ECMO support before 28 days, where patients remain on ECMO beyond this time, the oxygen intervention strategy will continue to be delivered for up to 60 days of ECMO support.

The listing of ‘ICU-free days at day 60’ as the primary outcome was a typographic error. Funding was obtained (MRFF APP1152270), the trial was powered, and initial protocol written with the stated aim that ‘ICU-free days to day 28’ be the primary outcome assessed. The trial is listed on [ClinicalTrials.gov](https://clinicaltrials.gov) as NCT03841084 with ‘ICU-free days to day 28’ as the primary outcome.

Wherever relevant throughout the paper, the primary outcome of ‘ICU-free days to day 28’ has now been corrected, included editing of section 2.10 *Sample size calculation* and clarification of oxygen strategy intervention delivery. Power calculations, sample size estimations and all other aspects of the trial protocol, interventions and reporting of results remain unchanged.

The authors would like to apologise for any inconvenience caused.

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