

CORRECTION

Open Access



# Correction to: Exploring the efficacy of an electronic symptom assessment and self-care intervention to preserve physical function in individuals receiving neurotoxic chemotherapy

Robert Knoerl<sup>1\*</sup>, Edie Weller<sup>2</sup>, Barbara Halpenny<sup>3</sup> and Donna Berry<sup>4</sup>

**Correction to: Knoerl et al. *BMC Cancer* (2018) 18:1203**  
<https://doi.org/10.1186/s12885-018-5093-z>

Following publication of the original article [1], the authors reported that the chemotherapy dosages in the footnote of Table 1 should be in mg, and not mg/m<sup>2</sup>.

The footnote for Table 1 should read as follows:

This table describes the demographic characteristics of the patients at baseline.

<sup>a</sup>To compare distribution of cancer diagnosis for intervention versus control, the diagnoses with < 10 observations are grouped together into another category (i.e., esophageal, testicular, gastrointestinal, miscellaneous, sarcoma, bladder, gastric, pancreatic and unknown primary).

<sup>b</sup>For participants receiving multiple neurotoxic chemotherapy agents, dose category was determined based on the highest dose of one of the specific agents they were receiving.

<sup>c</sup>Paclitaxel < 700 mg; Oxaliplatin < 800 mg; Docetaxel < 300 mg; Cisplatin < 300 mg.

<sup>d</sup>Paclitaxel 700–1400 mg; Oxaliplatin 800–1000 mg; Docetaxel 300–600 mg; Cisplatin 300–600 mg.

<sup>e</sup>Paclitaxel > 1400 mg; Oxaliplatin > 1000 mg; Docetaxel > 600 mg; Cisplatin > 600 mg.

<sup>f</sup>Neurotoxic chemotherapy dose reduction due to other symptom-related causes included fatigue, pain, skin changes, bowel problems, or breathing problems.

## Author details

<sup>1</sup>Phyllis F. Cantor Center for Research in Nursing and Patient Care Services, Dana-Farber Cancer Institute, 450 Brookline Avenue, LW 517, Boston, MA 02215, USA. <sup>2</sup>Biostatistics and Research Design Core, Institutional Centers for Clinical and Translational Research, Boston Children's Hospital, 21 Autumn Street Suite 313, Boston, MA 02215, USA. <sup>3</sup>Phyllis F. Cantor Center for Research in Nursing and Patient Care Services, Dana-Farber Cancer Institute, 450 Brookline Avenue, LW 521, Boston, MA 02215, USA. <sup>4</sup>Phyllis F. Cantor Center for Research in Nursing and Patient Care Services, Dana-Farber Cancer Institute, 450 Brookline Avenue, LW 518, Boston, MA 02215, USA.

Received: 1 May 2019 Accepted: 1 May 2019

Published online: 13 May 2019

## Reference

1. Knoerl et al. *BMC Cancer* (2018) 18:1203. Exploring the efficacy of an electronic symptom assessment and self-care intervention to preserve physical function in individuals receiving neurotoxic chemotherapy. <https://doi.org/10.1186/s12885-018-5093-z>.

\* Correspondence: [Robert\\_Knoerl@DFCI.harvard.edu](mailto:Robert_Knoerl@DFCI.harvard.edu)

<sup>1</sup>Phyllis F. Cantor Center for Research in Nursing and Patient Care Services, Dana-Farber Cancer Institute, 450 Brookline Avenue, LW 517, Boston, MA 02215, USA

Full list of author information is available at the end of the article

