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CORRIGENDUM

Time Savings Using a Digital Workflow versus a Conventional for Intraocular Lens Implantation in a Corporate Chain Hospital Setting [Corrigendum]

Rombold F, Niederdellmann C, Pariti R, Khayat B. Clin Ophthalmol. 2024;18:113-119.

On page 113, Abstract, Results subheading, "The digital cataract workflow resulted in shorter mean (\pm standard deviation [SD]) preoperative assessments with lesser variability among individual assessments than the existing workflow (14.15 \pm 1.86 vs 21.41 \pm 1.18 min, respectively); with a time saving of 35%" should have been "The digital cataract workflow resulted in shorter mean (\pm standard deviation [SD]) preoperative assessments with lesser variability among individual assessments than the existing workflow (14.15 \pm 1.18 vs 21.41 \pm 2.26 min, respectively); with a time saving of 35%".

On page 115, Results section, Preoperative Assessments, 2^{nd} paragraph, "The overall mean (±SD) process time for the preoperative assessments was reduced in the digital cataract workflow (14.15 [±1.86] min) compared to the existing conventional workflow (21.41 [±1.18] min) with an overall time saving of approximately 35% (Table 1)" should have been "The overall mean (±SD) process time for the preoperative assessments was reduced in the digital cataract workflow (14.15 [±1.18] min) compared to the existing conventional workflow (21.41 [±1.18] min) compared to the existing conventional workflow (21.41 [±1.18] min) compared to the existing conventional workflow (21.41 [±2.26] min) with an overall time saving of approximately 35% (Table 1)".

On page 116, Table 1, Preoperative assessments[#] row, the standard deviation values in the 3rd and 4th columns were flipped in error, 14.15 ± 1.86 should be 14.15 ± 1.18 and 21.41 ± 1.18 should be 21.41 ± 2.26 .

The authors apologize for any inconvenience caused by these errors and for any confusion that may have arisen as a result. They would like to assure the readers that these corrections do not affect the results or conclusions of the paper.

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