ERRATA

Update in the Treatment of Venous Thromboembolism

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The publisher regrets a dosage error in Table 1 in the above article in *Seminars in Respiratory and Critical Care Medicine*, Volume 29, Number 1, 2008, p. 42.

Dosage should state q.d. (once daily) not q.i.d. (four times daily).

Table 1 with the correct dosage appears below.

Table 1 Evidence-Based Therapies Available in the United States for the Treatment of Venous Thromboembolism**

LMWH	Dose	Comments
Dalteparin	100 IU/kg SQ b.i.d. or 200 IU SQ q.d.	FDA-approved using q.d. dose for long-term therapy in cancer patients with DVT (25% dose reduction after 1st month of treatment)
Enoxaparin	1.0 mg/kg SQ b.i.d. (studied in outpatients with/without PE) 1.5 mg/kg SQ q.d. (studied in inpatients with/without PE)	FDA-approved
Tinzaparin	175 IU/kg SQ q.d. (acute treatment of DVT with/without PE)	FDA-approved for treatment; studies done in hospitalized patients
PENTASACCHARIDE		
Fondaparinux	7.5 mg SQ q.d.	FDA-approved for treatment of both DVT and PE (use 5 mg SQ q.d. for <50 kg and 10 mg SQ q.d. for >100 kg)
UFH		
SQ (non–dose adjusted)	333 IU/kg SQ initially, followed by 250 IU/kg SQ q12h	Nonmonitored dose as per Kearon et al.[16] Should be reserved as second-line therapy because published experience is limited.
IV (weight-based nomogram)	80 U/kg initial bolus, followed by 18 U/kg/h maintenance	Use weight-based nomogram, adjusted to achieve aPTT 1.5 to 2.5 $\times$ control.

**At least 5-day overlap with vitamin K antagonist until stable international normalized ratio (>2.0) achieved.
aPTT, activated partial thromboplastin time; DVT, deep vein thrombosis; IV; FDA, U.S. Food and Drug Administration; intravenous; LMWH, low molecular weight heparin; PE, pulmonary embolism; SQ, subcutaneous; UFH, unfractionated heparin.

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