

## ERRATUM

The following are corrections for errors that occurred in *JINS*, Vol. 14, No. 2, March 2008. In the article titled “Visual Hemispatial Neglect, Re-assessed,” pp. 243–256, by Alexandra List et al., there were errors in Tables 3 and 5, and in Figures 6 and 7.

### Table 3 (Page 251):

1. In row PT5, six numerical values, from Column “CS” in Sessions 1 to “CS” in Session 2, should have been shifted over one column to the right. Those six values, shown in boldface, are now in their correct columns respectively.
2. In the table footnotes, the tasks **SS**, **FS**, and **CS**, should not have had the word “scores” included in their definition. These terms, shown in boldface, are now in their correct format.

**Table 3.** Testing session times: age (years) and delays post-stroke (days) for each patient

Patient	Experiment 2					Experiment 3								
	Session 1			Session 2		Session 3								
	Age	SS	FS	CS	SS delay until adaptive	Age	SS	FS	CS	SS delay until adaptive	Age	SFS	CS	Delay between CS sessions
PT1	84	104	111	111	7	84	363	378	378	15	85	658	658	547
PT2	59	104	111	111	7	59	359	367	367	8	60	702	702	591
PT3	72	119	119	119	0	73	512	512	512	0				
PT4	85	228	228	228	0	85	423	423	423	0				
PT5	61	260	265		<b>5</b>	<b>62</b>	<b>400</b>	<b>426</b>	<b>426</b>	<b>26</b>				
PT6	45	38		38	0						46	373	373	335
PT7	53	360	360	360	0						53	501		
PT8	72	289	289	289	0						73	584	584	295
PT9	77	388	391	391	3						78	643	643	252
PT10	80	665	665	665	0						81	994	994	329
PT11	71	947	947	947	0						72	1241	1241	294
PT12	37	949	949	949	0						38	1277	1277	328
PT13	48	1247	1247	1247	0						49	1495	1495	248
PT14	49	1250	*1250	1250	0						50	*1509	1509	259
PT15	53	648	648		0						56	1648	1648	
PT16	75	*1198	1202	1202	4									
PT17	84	17		24	7									
PT18	78	18		18	0									
PT19	61	83	83	83	0									
PT20	65	132	132	132	0									
PT21	73	890	890	890	0									
PT22	56	975	975	975	0									
PT23	88	1161		1161	0									

Note. Blank cells denote that the test was not performed for that patient in that session. Performance that was excluded as an outlier ( $> 3 SD$  from the group mean) is indicated with an asterisk (\*). **SS = Standard Search; FS = Feature Search; CS = Conjunction Search; SFS = Scattered Feature Search.**

**Table 5 (Page 254):** In the FSS row, the interval “+30 ms” should have had a **double-dagger** instead of a **double asterisk**.

**Table 5.** Experiment 2 results when calculating TPTs from means of eight or four reversals and medians of eight reversals

Task	Mean of 8 reversals	Mean of 4 reversals	Median of 8 reversals	Paired-comparison	Mean of 8 reversals	Mean of 4 reversals	Median of 8 reversals
FSS	+24 ms ‡	+26 ms ‡	<b>+30 ms ‡</b>	FSS vs. CSS	*	*	*
CSS	+366 ms *	+370 ms *	+392 ms *	FSS LHD vs. RHD	¬	¬	¬
				CSS LHD vs. RHD	*	*	*

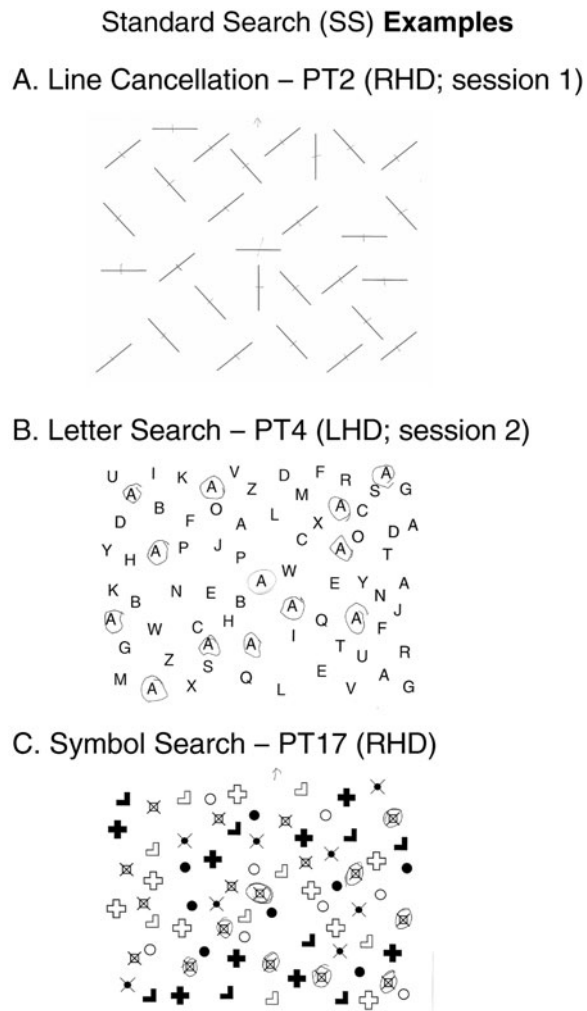
Note. Each task is tested in one-sample *t* tests vs. 0, and against one another in paired-comparisons. TPTs = threshold presentation times; FSS = Feature Search Scores; CSS = Conjunction Search Scores; LHD = left hemisphere damage; RHD = right hemisphere damage.

\**p* < .05.

‡ .05 < *p* < .10.

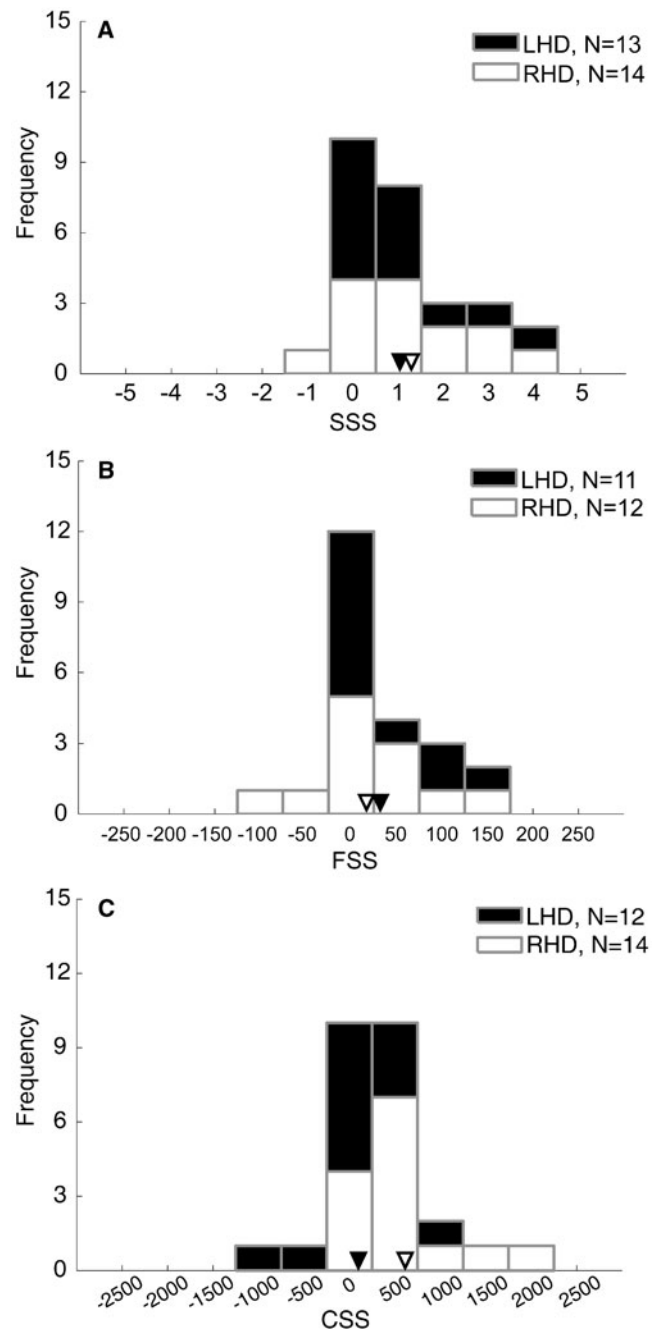
¬ *t* value < 1.0.

**Figure 6 (Page 248):** The corrected items are printed in boldface



**Fig. 6.** Three standard fixed-measure paper-and-pencil search tasks [adapted from the Standardized Comprehensive Assessment of Neglect (SCAN); McGlinchey-Berroth et al., 1996]. Each was presented on letter-sized paper, aligned with participant’s midline such that items were evenly distributed on the left and right sides. The experimenter marked the central demonstration item before participants searched for the remaining lines in (A) the line cancellation task, the remaining target letter “A”s in (B) the letter search task, or the remaining **target symbols** (as) in (C) the symbol search task. As is shown, lines were “cancelled,” that is, marked with a pen stroke, whereas target letters and symbols were circled. Three different patients’ performance is shown, and marked with the side of their lesion (RHD = right hemisphere damage; LHD = left hemisphere damage). Asymptomatic performance is illustrated in (A) the line cancellation task, that is, no lines were missed. Right-sided neglect (i.e., more right- than left-sided misses) is illustrated in (B) the letter search task. Note that the patient omitted one target on the right side, and three on the left side. This patient’s score for the letter search task would be 2 (three contralesional misses minus one ipsilesional miss). Left-sided neglect (i.e., more than left- than right-sided misses) is illustrated in (C) the symbol search task. Note that the patient omitted six targets on the left side and two on the right side. This patient’s score for the symbol search would be 4 (six contralesional misses minus two ipsilesional misses).

**Figure 7 (Page 252):** The labels for the three sections A, B, and C were missing.



**Fig. 7.** Histograms of patient performance on (A) the fixed-measure Standard Search task, (B) the adaptive Feature Search task, and (C) the adaptive Conjunction Search task. In all plots, positive values indicate contralesional scores (i.e., hemispatial neglect), whereas negative values indicate ipsilesional scores. No differences between contralesional and ipsilesional target detection result in 0 scores. In each plot, data were sorted into 11 bins spanning: 1 item (A), 50 ms (B), and 500 ms (C). Data are shaded according to the patient’s lesion side, as are mean scores (indicated by downward-pointing arrows). SSS = Standard Search score; FSS = Feature Search score; CSS = Conjunction Search score; RHD = right hemisphere damage; LHD = left hemisphere damage.

Cambridge University Press and the Editor regret the inconvenience that these errors may have caused.