

Errata

Effectors of Visual Search Efficacy on the Allegheny Plateau, *WEM* 21:188-201, Chiacchia KB and Houlahan HE, inadvertently stated on p. 196 “. . . we did observe a general negative correlation between time and ESW val-

ues . . .,” in fact, as can be seen by the positive correlation values that followed, and the positive slopes in Figure 9, the researchers observed a positive correlation between time and ESW.

In Luks AM, McIntosh SE, Grissom CK, Auerbach PS, Rodway GW, Schoene RB, Zafren K, Hackett PH, Wilderness Medical Society Consensus Guidelines for the Prevention and Treatment of Acute Altitude Ill-

ness, *WEM* 21:147-155, an important aspect of classifying risk was omitted in **Table 3** on page 149. We sincerely regret the error and submit the corrected **Table 3**.

Table 3. Risk Categories for Acute Mountain Sickness

<i>Risk Category</i>	<i>Description</i>
Low	<ul style="list-style-type: none"> ● Individuals with no prior history of altitude illness and ascending to ≤ 2800 m; ● Individuals taking ≥ 2 days to arrive at 2500-3000 m with subsequent increases in sleeping elevation < 500 m/day and an extra day for acclimatization every 1000 m
Moderate	<ul style="list-style-type: none"> ● Individuals with prior history of AMS and ascending to 2500-2800 m in 1 day ● No history of AMS and ascending to > 2800 m in 1 day ● All individuals ascending > 500 m/day (increase in sleeping elevation) at altitudes above 3000 m but with an extra day for acclimatization every 1000 m
High	<ul style="list-style-type: none"> ● History of AMS and ascending to ≥ 2800 m in 1 day ● All individuals with a prior history of HAPE or HACE ● All individuals ascending to > 3500 m in 1 day ● All individuals ascending > 500 m/day (increase in sleeping elevation) above > 3000 m without extra days for acclimatization ● Very rapid ascents (eg. < 7 day ascents of Mt. Kilimanjaro)

AMS, Acute mountain sickness; HACE, High altitude cerebral edema; HAPE, High altitude pulmonary edema

Notes:

- Altitudes listed in the table refer to the altitude at which the person sleeps
- Ascent is assumed to start from elevations < 1200 m
- The risk categories described above pertain to unacclimatized individuals