"Predictors of mortality for patients with COVID-19 pneumonia caused by SARS-CoV-2: a prospective cohort study." Rong-Hui Du, Li-Rong Liang, Cheng-Qing Yang, Wen Wang, Tan-Ze Cao, Ming Li, Guang-Yun Guo, Juan Du, Chun-Lan Zheng, Qi Zhu, Ming Hu, Xu-Yan Li, Peng Peng and Huan-Zhong Shi. *Eur Respir J* 2020; 55: 2000524.

The above-mentioned article has been corrected according to the amendments outlined below; the amendments have been discussed in the accompanying correspondence articles published in this issue of the *European Respiratory Journal* [1, 2].

In the Abstract, the description that originally read: "Univariate and multivariate logistic regression analysis revealed that age ⩾65 years (OR 3.765, 95% CI 1.146–17.394; p=0.023), pre-existing concurrent cardiovascular or cerebrovascular diseases (OR 2.464, 95% CI 0.755–8.044; p=0.007), $CD3^+CD8^+$ T-cells ⩽75 cells·μL^{-1} (OR 3.982, 95% CI 1.132–14.006; p<0.001) and cardiac troponin I ⩾0.05 ng·mL^{-1} (OR 4.077, 95% CI 1.166–14.253; p<0.001) were associated with an increase in risk of mortality from COVID-19 pneumonia." has been corrected to: "Univariate and multivariate logistic regression analysis revealed that age ⩾65 years (OR 3.765, 95% CI 1.201−11.803; p=0.023), pre-existing concurrent cardiovascular or cerebrovascular diseases (OR 2.464, 95% CI 1.279–4.747; p=0.007), $CD3^+CD8^+$ T-cells ⩽75 cells·μL^{-1} (OR 3.982, 95% CI 1.761–9.004; p<0.001) and cardiac troponin I ⩾0.05 ng·mL^{-1} (OR 4.077, 95% CI 1.778–9.349; p<0.001) were associated with an increase in risk of mortality from COVID-19 pneumonia."

The table has also been amended and re-formatted for clarity. The new version is reproduced below.

TABLE 4 Multivariate logistic regression analysis of mortality risk factors for patients with severe acute respiratory infection

Variables	OR (95% CI)	p-value
Age ⩾65 years	3.765 (1.201–11.803)	0.023
Cardiovascular or cerebrovascular diseases	2.464 (1.279–4.747)	0.007
$CD3^+D8^+$ T-cells ⩽75 cells·μL^{-1}	3.982 (1.761–9.004)	<0.001
Cardiac troponin I ⩾0.05 ng·mL^{-1}	4.077 (1.778–9.349)	<0.001

In the Methods section, the sentence that originally read: "The information for all patients, including demographic data, clinical characteristics, laboratory parameters and outcomes, were collected prospectively." Has been corrected to: "The information for all patients, including demographic data, clinical characteristics, laboratory parameters and outcomes, were collected prospectively upon hospital admission."

In the Discussion section, the sentences that originally read: "As of midnight on 24 March 2020, the numbers of Chinese confirmed COVID-19 pneumonia cases and deaths were 81 218 and 3281, respectively, indicating that the overall death rate from COVID-19 pneumonia was 4% [17]." and "As mentioned, the overall death rate from COVID-19 pneumonia was 4% [17], and most deceased patients were older people with underlying illness [8–10]." Have been corrected to: "As of midnight on 24 March 2020, the numbers of Chinese confirmed COVID-19 pneumonia cases and deaths were 81 218 and 3281, respectively, indicating that the confirmed case fatality rate from COVID-19 pneumonia was 4% [17]." and "As mentioned, the confirmed case fatality rate from COVID-19 pneumonia was 4% [17], and most deceased patients were older people with underlying illness [8–10]."

References
1 Yang H-J, Zhang Y-M, Yang M, *et al.* Predictors of mortality for patients with COVID-19 pneumonia caused by SARS-CoV-2. *Eur Respir J* 2020; 56: 2002439.
2 Du R-H, Liang L-R, Yang C-Q, *et al.* Predictors of mortality for patients with COVID-19 pneumonia caused by SARS-CoV-2. *Eur Respir J* 2020; 56: 2002961