- Blachard RJW, Morrow IM, Sutherland JB. Treatment of liver tumors with yttrium-90 microspheres alone. J Can Assoc Radiol 1989;40:206-210.
- Houle S, Yip T-K, Shepherd FA, et al. Hepatocellular carcinoma: pilot trial of treatment with <sup>90</sup>Y microspheres. *Radiology* 1989;172:857-860.
- Herba MJ, Illescas FF, Thirlwell MP, et al. Hepatic malignancies: improved treatment with intraarterial <sup>90</sup>Y. Radiology 1989:169:311–314.
- Zeissman HA, Thrall JH, Yang PJ, et al. Hepatic arterial perfusion scintigraphy with Tc<sup>99m</sup> MAA. *Radiology* 1984;152:167-172.
- Sasaki Y, Imaoka S, Hasegawa Y, et al. Changes in distribution of hepatic blood flow induced by intra-arterial infusion of angiotensin II in human hepatic cancer. Cancer 1985;55:311-316.
- Gray BN, Burton MA, Kelleher DK, Anderson J, Klemp P. Selective internal radiation (SIR) therapy for treatment of liver metastases: measurement of response rate. J Surg Oncol 1989;42:192–196.
- Goldberg JA, Thomson JAK, Bradnam MS, et al. Angiotensin II as a
  potential method of targeting cytotoxic-loaded microspheres in patients
  with colorectal liver metastases. Br J Cancer 1991;64:114-119.
- Goldberg JA, Bradnam MS, Kerr DJ, et al. Arteriovenous shunting of microspheres in patients with colorectal liver metastases: errors in assessment due to free pertechnetate, and the effect of angiotensin II. Nucl Med Commun 1987;8:1033-1046.

## **ERRATUM**

MIRD Pamphlet No. 14 "A Dynamic Urinary Bladder Model for Radiation Dose Calculations," appearing on pages 783–802 of the May 1992 issue of *JNM* contains results that are incorrect owing to an error in the computer code used in the calculations.

This error was discovered after publication of the pamphlet; the magnitude of the error introduced in the published results depends upon the radionuclide as well as the specific model parameters; however, the published values are, on average, approximately 40% lower (ranging from less than 10% to greater than 60% lower). In addition, typographical errors were identified in the expressions involving the model description.

The pamphlet describes a dynamic urinary bladder model developed to provide physiologically realistic features for bladder wall dose calculation, incorporates expanding bladder contents, and allows for variable urine entry rate, initial bladder contents volume, residual volume and first void time. Radiation dose estimates are calculated for the bladder wall surface for 11 radiopharmaceuticals. Extensive tables and graphs are presented for the dose to the bladder wall surface as a function of the variable parameters.

The MIRD Committee recognizes the importance of rectifying this situation. A revised Pamphlet No. 14, under preparation, will provide corrections and also take the opportunity to expand the list of radiopharmaceuticals presented. The availability and mode of distribution of this revision will be announced through the *Journal*. To assist the nuclear medicine community in the use of the dynamic bladder model, a computer code has been installed at the Radiation Internal Dose Information Center, Oak Ridge Institute for Science and Education, Oak Ridge, Tennessee 37831. At this time, interested individuals may obtain the corrected tables for any of the published radiopharmaceuticals by direct contact with Oak Ridge (Michael G. Stabin at 615-576-3449).

The MIRD Committe sincerely regrets any inconvenience caused through errors in the publication.