group, all participants had negative test results. Additionally, in all participants, positive donor tissue viral load was low and therefore infectivity was unlikely.

In summary, we still conclude that the risk of transmission through corneal transplant seems low, but the possibility cannot be completely excluded. Thus, corneal tissue from SARS-CoV-2–positive donors or donors with associated symptoms are not currently permitted for transplant.

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CORRECTION

Error in Group Author Listing: The Brief Report “Ocular Lesions Other Than Stings Following Yellow-Legged Hornet (Vespa velutina nigrithorax) Projections, as Reported to French Poison Control Centers,”1 that was published in the January 2021 issue, has been corrected to include the nonauthor collaborator names in a supplement.


Error in Group Author Listing: The Brief Report “Pediatric Eye Injuries by Hydroalcoholic Gel in the Context of the Coronavirus Disease 2019 Pandemic,”1 which was published in the March 2021 issue, has been corrected to include the nonauthor collaborator names in a supplement.


Error in a Supplement: In the article titled “Refractive Outcomes After Immediate Sequential vs Delayed Sequential Bilateral Cataract Surgery,” published online July 1, 2021, and also in the August 2021 issue of JAMA Ophthalmology,1 there was a formatting error in Supplement 2 listing the IRIS Research Analytic Center Consortium members. The supplement was corrected online.