



Erratum to radical antegrade modular pancreatosplenectomy versus standard distal pancreatosplenectomy for pancreatic cancer, a dual-institutional analysis

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Radical antegrade modular pancreatosplenectomy versus standard distal pancreatosplenectomy for pancreatic cancer, a dual-institutional analysis

Since the publication of our manuscript “Radical antegrade modular pancreatosplenectomy versus standard distal pancreatosplenectomy for pancreatic cancer, a dual-institutional analysis” in *CCO* recently (Manuscript ID: CCO-20-6), we have received a few important comments about the description of RAMPS in the manuscript from Prof. Steven Strasberg who first described this surgical procedure. After reviewing the data with Prof. Jin and his group in Changhai Hospital, we want to submit this correction letter to publish an erratum in *CCO*.

In page 2, the last sentence of the first paragraph in the introduction section: “Classically, RAMPS involves division of the pancreatic neck, dissection of the celiac lymph nodes, posterior dissection just anterior to the adrenal gland usually including Gerota’s fascia, and splenectomy (9).” We need to delete “usually”.

In page 2, the last sentence of the first paragraph in the methods section: “All RAMPS procedures included N1 lymphadenectomy (including celiac lymph nodes) and resection of Gerota’s fascia for posterior RAMPS, components that were not routinely performed in DPS.” We need to delete “for posterior RAMPS”.

We want to emphasize the resection of Gerota’s fascia is a core element of RAMPS. Any procedure without resection of Gerota’s fascia should not be referred to as a RAMPS procedure. We appreciate the sincere comments from Prof. Strasberg which improves our publication as we strive to deliver the most accurate data to our surgical community.

The authors regret the errors.

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