

CORRECTION

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# Correction to: Effects of implementing a postabortion care strategy in Kinshasa referral hospitals, Democratic Republic of the Congo

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## Correction to: *Reprod Health* (2021) 18:76

<https://doi.org/10.1186/s12978-021-01130-x>

Following publication of the original article [1] two errors have been identified in the abstract and the plain English summary.

The incorrect and correct information is listed below; the changes are shown in **bold**.

### Incorrect

#### Abstract

The implementation of PAC strategy in Kinshasa referral hospitals has resulted in the utilization of WHO recommended uterine evacuation method MVA (29.3% more in the experimental structures,  $p=0.025$ ), a **significant** decline in sharp-curettage (19.3% less,  $p=0.132$ ), and a decline in the duration of hospitalization of patients admitted for PAC (1 day less,  $p=0.020$ ).

#### Plain English summary

The implementation of PAC strategy in Kinshasa referral hospitals has resulted in the utilization of WHO recommended uterine evacuation method MVA (29.3% more in the experimental structures,  $p=0.025$ ),

a **significant** decline in sharp-curettage (19.3% less,  $p=0.132$ ), and a decline in the duration of hospitalization of patients admitted for PAC (1 day less,  $p=0.020$ ).

### Correct

#### Abstract

The implementation of PAC strategy in Kinshasa referral hospitals has resulted in the utilization of WHO recommended uterine evacuation method MVA (29.3% more in the experimental structures,  $p=0.025$ ), a **non-significant** decline in sharp-curettage (19.3% less,  $p=0.132$ ), and a decline in the duration of hospitalization of patients admitted for PAC (1 day less,  $p=0.020$ ).

#### Plain English summary

The implementation of PAC strategy in Kinshasa referral hospitals has resulted in the utilization of WHO recommended uterine evacuation method MVA (29.3% more in the experimental structures,  $p=0.025$ ), a **non-significant** decline in sharp-curettage (19.3% less,  $p=0.132$ ), and a decline in the duration of hospitalization of patients admitted for PAC (1 day less,  $p=0.020$ ).

The original article can be found online at <https://doi.org/10.1186/s12978-021-01130-x>.

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1. Ishoso DK, Tshefu A, Delvaux T, Dramaix M, Mukumpuri G, Coppieters Y. Effects of implementing a postabortion care strategy in Kinshasa referral hospitals, Democratic Republic of the Congo. *Reprod Health*. 2021;18:76. <https://doi.org/10.1186/s12978-021-01130-x>.

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