

factors, given that only female Labrador Retrievers are known to have been affected to date. Furthermore, the response of dogs with PLIMFD to immunomodulatory treatment supports an immune-mediated etiopathogenesis. On the basis of their shared histologic features, PLIMFD and erythema multiforme may be in the same spectrum of disease. However, the striking clinical characteristics, apparent breed predilection, follicular-oriented cytotoxic dermatitis, and marked parakeratosis associated with PLIMFD would appear to define it as a unique clinical disease. Submission of fresh skin biopsy specimens for metagenomic analysis and genetic testing of sera from affected individuals may further elucidate the pathogenesis and genetics of this emerging syndrome. Although the histologic lesions of PLIMFD are readily apparent, a lack of awareness of this rare and poorly understood condition by both clinicians and pathologists may lead to prolonged implementation of inappropriate treatment. The pres-

ence of follicular-oriented transepidermal cytotoxic dermatitis and parakeratosis in a Labrador Retriever should prompt consideration for PLIMFD.

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References

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Erratum: Effect of serum total protein concentration on early-life health and growth of dairy calves

In the article “Effect of serum total protein concentration on early-life health and growth of dairy calves” (*J Am Vet Med Assoc* 2020;257:80-86), the Results section of the abstract should read as follows: “STP concentration was associated with the incidences of death, diarrhea, pneumonia, and whether a calf received IV fluid therapy. In general, the incidence of adverse health events decreased as STP concentration increased to 6.0 g/dL and plateaued at STP concentrations between 6.0 and 8.5 g/dL. For Holsteins, the ADG increased as STP concentration increased, although the death rate increased at STP concentrations > 8.5 g/dL.” The Conclusions and Clinical Relevance section of the abstract should read as follows: “Results suggested that, for neonatal dairy calves, an STP concentration between 6.0 and 8.5 g/dL was optimal for health and growth. Calves with an STP concentration < 5.0 g/dL should be considered at high risk for adverse health events, and Holstein calves with an STP concentration > 8.5 g/dL should be considered at risk for death.” Finally, the weights and ADG information provided in Table 4 were reported in pounds instead of kilograms. Table 4 should read as follows:

Table 4—Frequency distribution and LSM ± SE body weight at facility arrival and ADG for 3,214 calves from Table 1 stratified on the basis of breed and STP concentration category.

STP concentration category (g/dL)	Holstein			Jersey			Crossbred		
	No. of calves	Weight at facility arrival (kg)	ADG (kg/d)	No. of calves	Weight at facility arrival (kg)	ADG (kg/d)	No. of calves	Weight at facility arrival (kg)	ADG (kg/d)
< 5.0	34	38.7 ± 0.2	0.61 ± 0.03	7	27.8 ± 0.5	0.60 ± 0.05	2	30.7 ± 0.8	0.67 ± 0.08
> 5.0-5.5	118	39.3 ± 0.2	0.65 ± 0.02	8	28.0 ± 0.4	0.62 ± 0.05	4	32.4 ± 0.5	0.58 ± 0.06
> 5.5-6.0	274	39.6 ± 0.2	0.66 ± 0.02	28	28.7 ± 0.4	0.60 ± 0.03	17	32.7 ± 0.4	0.59 ± 0.03
> 6.0-8.5	2,272	39.0 ± 0.2	0.68 ± 0.02	219	28.3 ± 0.2	0.59 ± 0.02	201	32.4 ± 0.2	0.64 ± 0.02
> 8.5	22	37.8 ± 0.3	0.68 ± 0.03	4	27.9 ± 0.5	0.59 ± 0.06	4	30.8 ± 0.6	0.65 ± 0.06