In the first publication of “*Streptococcus pyogenes* pbp2x Mutation Confers Reduced Susceptibility to β -Lactam Antibiotics” by Vannice et al., the statement “Intermediate levofloxacin resistance was also detected in the

isolate from patient E (MIC = 4 μ g/mL)” incorrectly references Supplementary Table 1. This statement should have referenced Table 1, and the article has been updated to reflect this change. The publisher regrets this error.

DOI: 10.1093/cid/ciz1208

An error appeared in the 15 January 2020 issue of the journal [Mehraj V, Ramendra R, Isnard S, et al. Circulating (1 $\rightarrow$ 3)- β -D-glucan Is Associated With Immune Activation During Human Immunodeficiency Virus Infection. *Clin Infect Dis* 2020;

70(2):232–241. <https://doi.org/10.1093/cid/ciz1212>]. The last name of the ninth author should be “Costiniuk” [not “Costiniuk”]. The publisher regrets this error.

DOI: 10.1093/cid/ciaa058

The following error appeared in the corrected proof publication of this article [Shields RK, McCreary EK, Marini RV, et al. Early Experience With Meropenem-Vaborbactam for Treatment of Carbapenem-resistant Enterobacteriaceae Infections. *Clin Infect Dis* <https://doi.org/10.1093/cid/ciz1131>].

In the first paragraph of the article, it currently states “Meropenem-vaborbactam was associated with fewer severe treatment-emergent

adverse events (TEAEs; 17/50 [34%] vs 7/25 [28%]) and renal-related TEAEs (2/50 [4%] vs 6/25 [24%]) than BAT.”

It should correctly state “Meropenem-vaborbactam was associated with fewer severe treatment-emergent adverse events (TEAEs; 7/50 [14%] vs 7/25 [28%]) and renal-related TEAEs (2/50 [4%] vs 6/25 [24%]) than BAT.”

The author regrets this error.

DOI: 10.1093/cid/ciaa060