

12. Milner MR, Van Syoc D. Multiple sclerosis and clinically isolated syndrome (Mar. 16). In: Air Force waiver guide. Wright-Patterson AFB (OH): U.S. Air Force School of Aerospace Medicine; 2018:568–576. [Accessed 6 Feb. 2018]. Available from <http://www.wpafb.af.mil/afrl/711hpw/USAFSAM/>.
13. Naval Aerospace Medical Institute. 10.6. Multiple sclerosis. In: U.S. Navy aeromedical reference and waiver guide. Pensacola (FL): Naval Aerospace Medical Institute; 2017. [Accessed 6 Feb. 2018]. Available from <http://www.med.navy.mil/sites/nmoc/nami/arwg/Pages/AeromedicalReferenceandWaiverGuide.aspx>.
14. Rotstein DL, Healy BC, Malik MT, Chitnis T, Weiner HL. Evaluation of no evidence of disease activity in a 7-year longitudinal multiple sclerosis cohort. *JAMA Neurol.* 2015; 72(2):152–158.
15. Thompson AJ, Banwell BL, Barkhof F, Carroll WM, Coetzee T, et al. Diagnosis of multiple sclerosis: 2017 revisions of the McDonald criteria. *Lancet Neurol.* 2017; 17(2):162–173.
16. U.S. Army Aeromedical Activity. Multiple sclerosis (ICD9 340). In: Flight surgeon's aeromedical checklists. Aeromedical policy letters. Ft. Rucker (AL): U.S. Army Aeromedical Activity; 2014. [Accessed 6 Feb. 2018]. Available from http://glwach.amedd.army.mil/victoryclinic/documents/Army_AP_Ls_28may2014.pdf.
17. Vargas DL, Tyor WR. Update on disease-modifying therapies for multiple sclerosis. *J Investig Med.* 2017; 65(5):883–891.
18. Zinger H, Grossman A, Assa A, Barel O, Barenboim E, Levite R. Return to flight with multiple sclerosis: aeromedical considerations. *Aviat Space Environ Med.* 2011; 82(1):61–64.

Erratum

Lerner DJ, Chima RS, Patel K, Parmet AJ. Ultrasound Guided Lumbar Puncture and Remote Guidance for Potential In-Flight Evaluation of VIIP/SANS. *Aerospace Med Hum Perform.* 2019; 90(1):58–62. DOI: <https://doi.org/10.3357/AMHP.5170.2019>

There is an error in the terminology used in the above article. The term "seated lordotic" is used three times in the article, once in the Abstract Results Section; once in the last sentence of the first paragraph of the Methods section; and in the first sentence of the Results section in the body of the report. The correct terminology should be the "seated exaggerated kyphotic" position.

The authors sincerely apologize for this error and any inconvenience it may cause.