

CORRECTION

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Correction: Tuberculous ciliary body granuloma initially diagnosed as bullous retinal detachment: a case report

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Correction: *BMC Ophthalmol* 24, 236 (2024)
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In this article [1], due to a typesetting error, the panels in the legends of Figs. 2, 3 and 4 appeared incorrectly.

The order of Figs. 2, 3 and 4 remains the same, and the correct legends are provided below:

Figure 2 Ultrasonography(B-scan) at the time of initial diagnosis showed thickening of the sclera and hyper-echoic banding in the temporal and inferior quadrants, consistent with retinal detachment (2A). Eight months after stopping treatment, the retina was completely reattached (2B)

Figure 3 OCT at the time of initial diagnosis revealed subretinal fluid in the macula OS(3A). One month later, OCT revealed significant resolution in the subretinal

fluid (3B). Seven months after treatment, OCT showed minimal residual fluid in the fovea. (3C)

Figure 4 UBM at the time of initial diagnosis revealed a lesion with ciliary body granulomatous inflammation measuring 9.25*1.67*12.92 mm (4A). Seven months after treatment, UBM showed a significant reduction in the size of the ciliary body granuloma to approximately 7.82*0.75*2.54 mm (4B). Eight months after stopping treatment, UBM suggested that the size of the ciliary body granuloma was 1.96*0.23*1.16 mm (4C)

The original article has been updated.

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References

1. Zhu J, Xu H, Chang Q, et al. Tuberculous ciliary body granuloma initially diagnosed as bullous retinal detachment: a case report. *BMC Ophthalmol*. 2024;24:236. <https://doi.org/10.1186/s12886-024-03503-9>.

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