

before any clinical component of their course; recent recommendations that all applicants to medical school should be screened, and immunised if appropriate, have far-reaching implications and have provoked controversy.^{17 18}

In conclusion, among invasive cardiologists in the United Kingdom there is clear scope for improvement in vaccine uptake, particularly in completion of the immunisation regimen. Screening of patients, as recommended, should also be performed. Careful practice to avoid needle stick injury should continue and immunisation should also be offered to nursing and other ancillary staff caring for patients undergoing invasive cardiac procedures.

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- 5 Department of Health. Immunisation against infectious diseases. London: HMSO, 1992:110-9.
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- 18 Kingman S. Hepatitis B status must be known for medical school. *BMJ* 1994;308:876.

CORRECTIONS

Failure of "effective" treatment for heart failure to improve normal customary activity. *J T Walsh, R Andrews, A Evans, A J Cowley (Br Heart J 1995;74: 373-6).*

Exercise ventilation after balloon dilatation of the mitral valve. *A P Banning, N P Lewis, J S Elborn, R J C Hall (Br Heart J 1995;74:386-9).*

We regret that the incorrect volume number was given in the strap lines and at the foot of the abstracts of these papers. The correct volume number is 74.

Permanent pacemaker practice at a Scottish district general hospital between 1987 and 1994. *J G Doherty, F Dawson, F Kerr*

We regret that an error appeared in the second sentence of the discussion on page 477 of this article (*Br Heart J* 1995;73:475-8) which should have read, "Our average implantation rate over the 79 months (130/million population/year) compares with the United Kingdom national 1989 value of 148/million population/year."⁵

NOTICES

The 1996 Annual General Meeting of the **British Cardiac Society** will take place at the Scottish Exhibition & Conference Centre, Glasgow from 7 to 9 May.

The **Fourth Annual Molecular Symposium at UCL Medical School on Ischaemic Preconditioning and Adaptation to Ischaemia** will take place on 12 December 1995 in London. For further information please contact Jan Wenley, Symposium Administrator, Department of Molecular Pathology, 46 Cleveland Street, London W1P 6DB (tel: +44 171 380 9343; fax: +44 171 387 3310).