

CORRECTION

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Correction: Patient-derived organoids for precision oncology: a platform to facilitate clinical decision making

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Following publication of the original article [1], the authors reported that Figs. 4 and 5 were erroneously transposed. The original article [1] has been corrected.

The online version of the original article can be found at <https://doi.org/10.1186/s12885-023-11078-9>.

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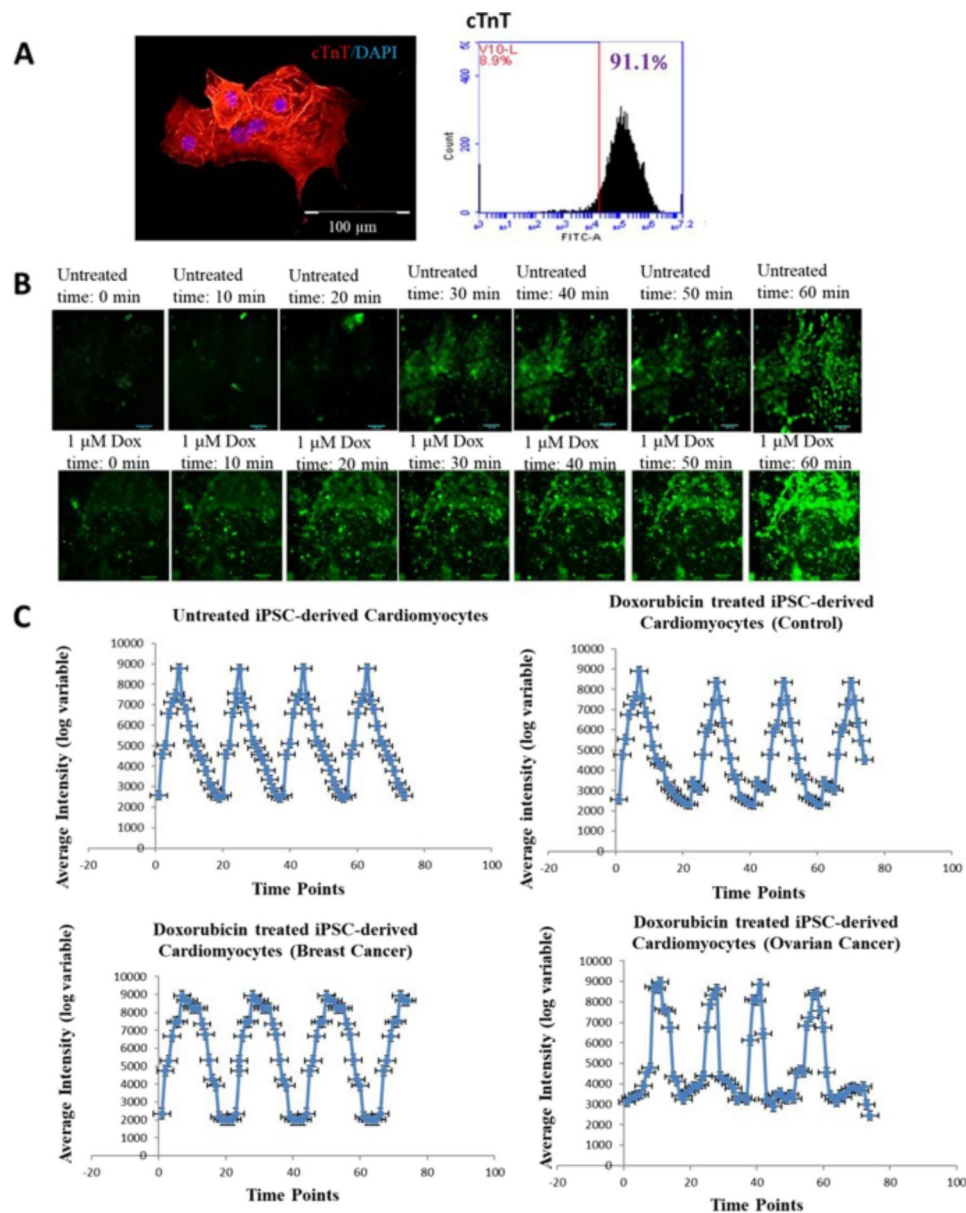
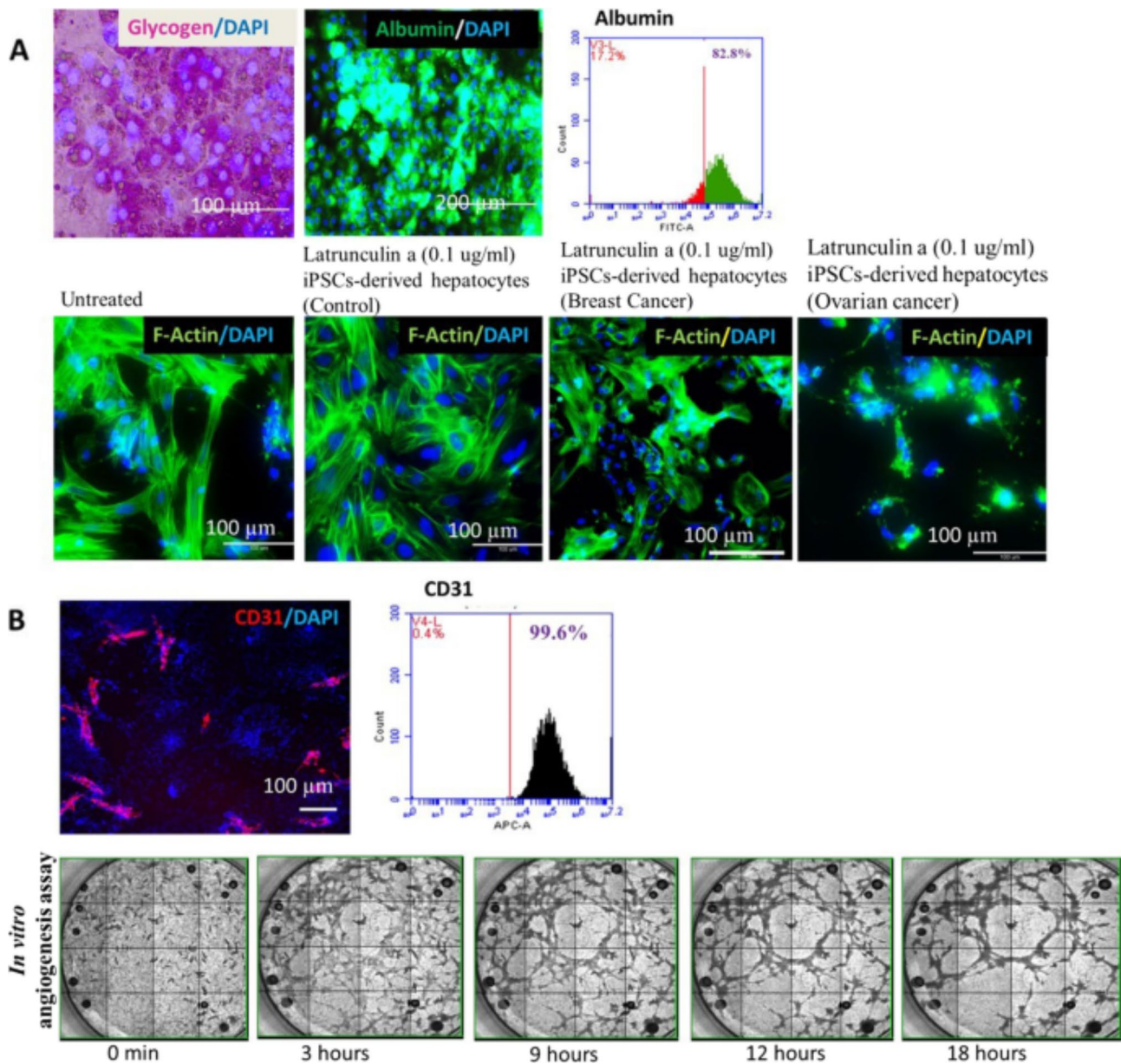


Fig. 4 **A** Expression of cardiac marker cardiac troponin (green-cTnT) in iPSCs-derived cardiomyocytes with nucleus (blue) was observed. Flowcytometry analysis showed more than 80% expression of cardiac troponin in iPSCs-derived Cardiomyocytes. **B** Representative calcium-flux signal traces (average fluorescence intensities) for cardiotoxic compound-Doxorubicin. Traces shown are typical phenotypic responses including unaffected regular Ca^{2+} flux patterns, and affected doxorubicin treated iPSC-derived cardiomyocytes (Control, Ovarian cancer and Breast cancer) patterns, Scale bar: 100 µm. **C** Representative calcium-flux signal traces (average fluorescence intensities) for chemotherapeutic cardiotoxic drugs. Traces shown are typical phenotypic responses including untreated regular Ca^{2+} flux patterns, and treated doxorubicin patterns



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References

1. Chitrangi S, Vaity P, Jamdar A, et al. Patient-derived organoids for precision oncology: a platform to facilitate clinical decision making. *BMC Cancer*. 2023;23:689. <https://doi.org/10.1186/s12885-023-11078-9>.