

## CORRECTION Open Access

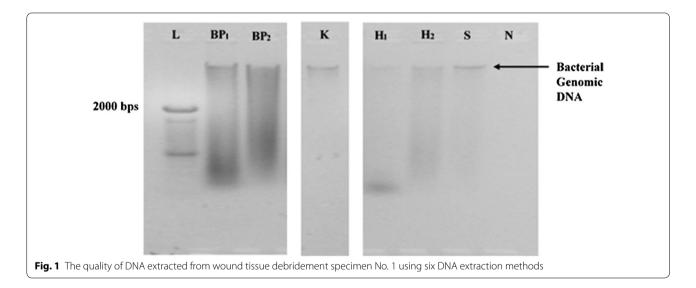
# Correction to: Evaluation of the impact of six different DNA extraction methods for the representation of the microbial community associated with human chronic wound infections using a gel-based DNA profiling method

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### Correction to: AMB Expr (2017) 7:179

### https://doi.org/10.1186/s13568-017-0477-z

Following publication of the original article (Dilhari et al. 2017), the authors identified an error in Figs. 1 and 3. The corrected figures are given below.



The original article can be found online at https://doi.org/10.1186/s1356 8-017-0477-z.

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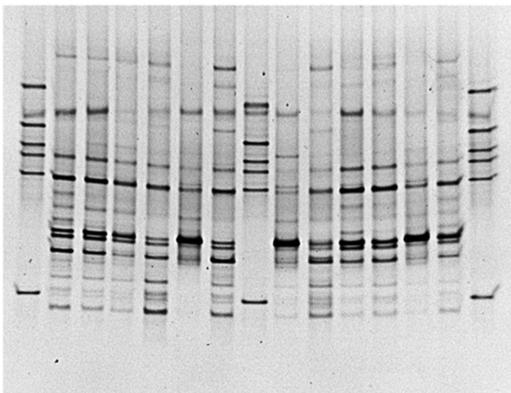


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STES and Phe/chloroform (BP1) a
STES and Phe/chloroform (BP1) b
TN150 and Phe/chloroform (BP2) a
TN150 and Phe/chloroform (BP2) b
Heat treating in distilled water (H1) a
DNA extraction tissue kit (K) a
L
Heat treating in aqueous NaOH (H2) a
Heat treating in aqueous NaOH (H2) a
Heat treating in aqueous Salting out method (S) a
Salting out method (S) b
L



**Fig. 3** A comparison of DGGE profiles of PCR amplified bacterial 16S rRNA gene for the specimen No: 1. DNA was extracted using six different DNA extraction methods using 25 mg of wound tissue debridement specimen no. 1. Bacterial fingerprinting profile is based on 30–55% denaturing gradient. "L" lanes represent the in house bacterial reference panel which includes *S. aureus, Acinetobacter* spp, Group B *Streptococcus* spp., *E. faecalis*, Group A *Streptococcus* spp. and *E. coli* from top to bottom respectively. Other lanes show bacterial fingerprinting profile of each extraction method in duplicate (**a, b**) for the specimen No. 1, collected from a subject with a chronic wound

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### Reference

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