had serum samples that were either positive or equivocal. The low prevalence of antibodies to *C. burnetii* in the participants in our study (3/97) indicates that most were very unlikely to have had contact with the organism. If the results are true positives, the source of the infection was quite likely outside of New Zealand. However, considering the heavy exposures associated with the cultivation and harvesting of RHDV in live rabbits and the known infectivity of Q fever, *C. burnetii* was not likely to have been introduced inadvertently to New Zealand at the same time as RHDV.

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**References**


**Corrections, Vol. 8, No. 10**

In the article, “Investigation of Bioterrorism-Related Anthrax, United States, 2001: Epidemiologic Findings” by Daniel B. Jernigan et al., errors occurred in the listing of the members of the Anthrax Epidemiologic Investigation Team on page 1019. Additional members of the National Anthrax Epidemiologic Investigation Team are:


We regret any confusion these errors may have caused.