

Correction to: “Sumatera Task Force – A Field Report of Final-Year Medical Student Deployment in Flash Flood Disaster Response”

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Original article: Allatib A, Shidqi HF, Ilmi AAM, Kabbani MR, Muzakki R, Dewi DAR. Sumatera Task Force – A Field Report of Final-Year Medical Student Deployment in Flash Flood Disaster Response. The ASEAN Journal of Military and Preventive Medicine. 2026;3(2). doi:10.47353/ajmpm.v3i2.68.

Correction

Following publication of the above article, the Editorial Office received a post-publication concern regarding the accuracy and attribution of Reference 22.

The journal initiated a post-publication editorial review. The authors were asked to clarify the reference in question, review the complete reference list, verify the relationship between individual citations and the claims they supported, and identify any additional inaccuracies requiring correction.

The authors subsequently submitted a formal response, an itemised reference-verification report, and a revised manuscript. The Editorial Board also conducted an independent audit of the published references and citation–claim relationships.

The review confirmed the concern regarding Reference 22 and identified additional bibliographic inaccuracies and citation–claim mismatches in the originally published article. The article has therefore been formally corrected.

Reference 22

Reference 22 in the original article contained incorrect author attribution and an incorrect publication year.

The correct reference is:

Mutlu İN, Kısa Toğrul E, Uzgören Kazanç HC, Kılıç K, Soysal M. Improving last-mile delivery in humanitarian logistics by solving a two-echelon routing problem with portering and infrastructure disruptions. OPSEARCH. Published online 19 January 2026. doi:10.1007/s12597-025-01082-x.

The cited publication concerns humanitarian last-mile logistics optimisation and did not investigate the Aceh Tamiang deployment described in the article. Accordingly, the original wording implying that helicopter payload limitations directly caused shortages of oral rehydration salts and antifungal medication has been removed.

The corrected article now distinguishes mission-specific field observations from the general humanitarian logistics literature and states that the available operational records do not permit a direct causal relationship between delivery constraints and medicine shortages to be established.

Additional Reference and Citation Corrections

The post-publication review identified additional bibliographic inaccuracies involving author attribution, publication year, journal information, volume or article details, and DOI assignment. Where the underlying publication was genuine and relevant, the bibliographic information has been corrected. Where a source did not support the specific claim for which it had been cited, the relevant statement has been removed, revised, or supported by a more appropriate source.

- the methodological reference previously attributed to CONSORT-EHEALTH has been replaced with an appropriate source for qualitative descriptive methodology;
- an incorrect DOI associated with Indonesian Health Law No. 17 of 2023 has been removed and the legislation is now cited from an official legal source;
- incorrect author attributions in several references have been corrected;
- the statement that senior medical students had disaster-triage performance comparable with emergency physicians has been removed because the cited source did not establish such a comparison;
- the statement that systematic reviews of the Haiti and Nepal earthquakes demonstrated the effectiveness of supervised senior medical students has been removed;
- the outcome of a disaster-medicine training study has been corrected from an unsupported claim regarding clinical decision-making to the reported outcome of disaster literacy;
- legal and regulatory arguments have been revised and supported, where applicable, by primary legal or regulatory sources;
- unsupported numerical requirements attributed to the WHO Emergency Medical Team framework have been removed; and
- recommendations regarding first-wave specialist deployment are now explicitly presented as recommendations arising from the authors' field experience rather than as WHO requirements.

Correction of Patient Encounter Estimate

The originally published article reported approximately 240 patient encounters per day and an estimated total of 3,840 encounters.

Following review of their operational records, the authors clarified that the relevant clinical health-post operations in Aceh Tamiang were conducted from 11 to 17 December 2025, representing seven days of clinical operations.

The corrected article therefore reports an estimated total of approximately 1,680 patient encounters, based on approximately 240 encounters per day during this seven-day period.

These figures are described in the corrected article as aggregate operational-logbook estimates rather than counts from a verified individual patient register.

Other Factual and Interpretive Corrections

- correction of the wording concerning health facilities in the OCHA report from “damaged” to “affected”;
- removal of an unsupported estimate concerning additional physician requirements;
- clarification that shortages of ORS, zinc, and topical antifungal medication were field observations rather than outcomes proven to have been caused by a particular transport modality;
- revision of epidemiological, diagnostic, logistical, and legal statements where the original wording exceeded the evidence provided by the cited source; and
- clearer distinction between published evidence, field observations, and the authors' own interpretations or recommendations.

Use of Generative Artificial Intelligence

During the post-publication review, the authors disclosed that generative artificial intelligence tools had been used during manuscript preparation, including in drafting text and in the assembly and formatting of the reference list.

The authors acknowledged that adequate source-by-source verification of the reference list had not been undertaken before the original submission.

The corrected article now contains an explicit statement describing this use. The authors report that the references in the revised version were subsequently checked against publisher records, DOI resolution, and indexed metadata, and they accept full responsibility for the content of the article and its references.

Effect on the Article

Following the post-publication editorial review and the authors' corrections, the article is now more explicitly framed as a single-team descriptive field report.

The corrected article does not claim comparative effectiveness of final-year medical student deployment and does not establish causal relationships between operational factors and clinical or logistical outcomes.

The central descriptive account of the deployment and the delivery of supervised health services during the Aceh Tamiang disaster response remains unchanged. However, several interpretations, supporting references, quantitative statements, and recommendations have been revised to more accurately reflect the available evidence and the limitations of the report.

The journal determined that these issues required a formal correction rather than silent amendment of the published record.

A corrected version of the article will be published and linked to this notice. The originally published version will remain part of the journal archive.

The Editorial Board thanks the individual who brought the citation concern to the journal's attention and the authors for their cooperation with the post-publication review.

The authors regret the inaccuracies in the originally published version. The journal regrets that these issues were not identified before publication.