



SDI FINAL EVALUATION FORM 1.1

PART 1:

Journal Name:	Cardiology and Angiology: An International Journal
Manuscript Number:	2014_CA_10845
Title of the Manuscript:	Imaging of congenital subclavian artery to subclavian vein fistula in a newborn

PART 2:

FINAL EVALUATOR'S comments on revised paper (if any)	Authors' response to final evaluator's comments
Authors have done their best possible to make the corrections as much as possible. However I have the following few comments An example of Vancouver is given below Anastacio MM, Castillo-Sang M, Smith TW, Saad N, Lawton JS. Iatrogenic left internal thoracic artery to left subclavian vein fistula after excimer laser pacemaker lead extraction. J Thorac Cardiovasc Surg 2012;143:35-7. Write et al when more than 6 authors Candidate should follow the example above He was born delivered via a spontaneous vertex at 34 weeks gestation with a birth weight of 1.8 kg Change to He was delivered via a spontaneous vertex at 34 weeks gestation with a birth weight of 1.8 kg In the case report session, physical examination must come before investigation and treatment Authors should please explain the abbreviations they are using at first instance before using it subsequently Please the candidate should channel his discussion based on A, History B, Physical examination C, Investigation D, Treatment modalities Please they should relate their discussion with the index patient. Comparing literatures cited with patient's case will be worthwhile	References were update as the reviewer requested, DOI and PMID were removed. Only one reference which contain more than 7 references and was changed Requested correction done This part was done before the patient admitted in our hospital. It was done in the hospital which referred the child to our facility. So, it came before examination which took place in our hospital. All the abbreviations were checked and explained when used at first instance. We tried our best to follow the reviewer instruction. We did some changes and the discussion looked more related to our case than before.