



SDI Review Form 1.6

Journal Name:	Journal of Cancer and Tumor International
Manuscript Number:	2015_JCTI_17286
Title of the Manuscript:	Aggressive Recurrent Giant Cell Tumor of Distal Ulna with Pulmonary Metastasis: A Case Report
Type of the Article	Case Study

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound.

To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)



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PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Compulsory REVISION comments	– Lack of oncological evaluation after surgery for indication to chemotherapy or (less suitable) surgical treatment of lung metastases. – Lack of past pathological history and family history of the patient. – Lack of histology of lung lesions. – Better explanation of surgical indication (anemia? pain? international guidelines?)	We did not performed chemotherapy because GCT was a benign tumour, the metastases lession was asymptomatic when patient presented to our hospital, and spontaneous regression of pulmonary metastases in GCT was reported in literatures. We have included this in our discussion We have added past history and family history of the patient We did not performed biopsy on lung lession The indication for surgery was written more in discussion.
Minor REVISION comments	– Better English (few grarmmatical mistakes) – Other mistakes (es. Fig 3-4 > Fig. 4: A and B)	We have corrected the grammatical errors we found
Optional/General comments	- Stress more the distal ulnar localization because only few cases are described in the literature	This is one of the rare case of recurrent distal ulna GCT