



SDI Review Form 1.6

PART 1:

Journal Name:	<u>Ophthalmology Research: An international Journal</u>
Manuscript Number:	2013_OR_5295
Title of the Manuscript:	Panophthalmitis masquerading as ocular melanoma-an eye opener
Type of the Article	Case study

General guideline for Peer Review process is available in this link:

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

- This form has total 7 parts. Kindly note that you should use all the parts of this review form.



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PART 2: 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	Line 14: 99m TC mibi Line 17: ocular tumor instead of melanoma Line 25: mibi tracer Line 26: possibility of malignant ocular tumor Line 67: mibi tracer Line 68: tumor instead of melanoma Line 73: rheumatoid instead of rhemuatoid Line 79: neovascularization Line 128-135: to Discussion. Line 136-137: there are similar cases previously reported (e.g. Raghuram AR, While A, Harry J. Infective panophthalmitis simulating malignant melanoma of the choroid in a patient with myelodysplasia. <i>Eye (Lond)</i>. 1993;7 (Pt 3):476-7.). Further literature revision is necessary.	Corrected in the manuscript Regarding the reviewer's comment on line 136-137, we submit the article referred to : "In the case presented it would appear that in association with the myelodysplasia, the low platelet count led to the development of hemorrhagic retinal detachment which clinically simulated malignant melanoma of the choroid. The low white cell count ,pre-existing valvular heart disease and recent corticosteroid treatment were all predisposing factors in the the development of infective endocarditis. The panophthalmitis presumably was metastatic." In our patient the blood counts and peripheral smear was normal. There were no signs of immunosuppression.
Minor REVISION comments	Line 55: a description of ultrasound A should be made Line 71: glucose instead of sugar	



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<u>Optional/General</u> comments	Line 38: sarcoidosis and tuberculosis should be cited Line 73: tuberculin test and chest X-ray to tuberculosis evaluation	
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