



SDI Review Form 1.6

Journal Name:	Ophthalmology Research: An International Journal
Manuscript Number:	2014_OR_13780
Title of the Manuscript:	Third Ventricular Ependymoma mimicking Foster Kennedy Syndrome- 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)
<u>Compulsory</u> REVISION comments		
<u>Minor</u> REVISION comments	This is a rare case with Foster Kennedy syndrome secondary to supratentorial ependymoma. This paper is well-written, but there are some points to be improved. Optical coherence tomography is more proper than fundus photo to detect the mild optic disc atrophy. How about the visual field test? Are there any other findings suggesting the presence of raised intracranial pressure, such as spontaneous venous pulsation?	We thank the reviewer for their comments. With regards to the revisions :- 1) We agree with the reviewer that optical coherence tomography is the more superior imaging method compared to fundus photography, however this modality is not available in our institution and was thus not performed. 2) The visual field test findings have been included in the text. We were unable to perform the Humphrey VF as patient was not able to sit up and she felt unwell during the test. We could only perform clinical confrontation test for her. 3) There was no spontaneous venous pulsation noted in both fundi.
<u>Optional/General</u> comments		