



SDI Review Form 1.6

Journal Name:	Ophthalmology Research: An International Journal
Manuscript Number:	2015_OR_17730
Title of the Manuscript:	Bilateral Endogenous Endophthalmitis As An Initial Presentation of <i>Klebsiella Pneumoniae</i> Bacteremia in Advanced Hepatocellular Carcinoma
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	1- Please clarify the setting for this case.	Thank you for your kind suggestions. I have changed the first sentence of presentation of case to "A 55 year-old Malay gentleman, presented to the emergency department of a tertiary hospital in the city he lived in," (Lines 26,27).
<u>Minor</u> REVISION comments	1-Please added some points for differentiation from other simulating diseases.	Thank you again for pointing this out. I have added "painful" to the abstract (1st sentence of under presentation of case) and line 27. I have also inserted: - To lines 31-35, "The past medical history and family history was negative for autoimmune conditions nor thyroid dysfunction. Prior to this episode, he denied similar episodes of painful red eye in the past, and there was no history of any eye trauma, contact lens use or eye surgery. Premorbidly, our patient did not have any vision problems, and has never undergone treatment for diabetic retinopathy either." - To lines 39-40, "Both corneas were edematous, and there was no evidence of infiltrates or gross keratic precipitates." - This helps to distinguish endogenous from exogenous endophthalmitis or bilateral non-infectious pan uveitis.
<u>Optional/General</u> comments	Non	