



SDI Review Form 1.6

Journal Name:	Journal of Cancer and Tumor International
Manuscript Number:	Ms_JCTI_22486
Title of the Manuscript:	Granulocytic sarcoma mimicking carcinoma of ovary, a rare case report
Type of the Article	Case Report

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	1. The title of the report should be improved. This is because the report describes a corrected misdiagnosis which is the focus. The case is rare not only due to the location of granulocytic sarcoma (GS) in ovary, but also the association with chronic myeloid leukaemia (CML). Current title does not show this focus correctly. 2. Figures: the legends of all figures should be improved with more information about the instrument used and images, especially figure 2 and 3 in which some important information are missing including tissue/cell strain method, magnification times of the lens, relation between figure 2 and 3. Normally here figure 3 should be a part of figure 2 and the location of figure 3 in figure 2 should be shown. Moreover, in the text FNAC is said to be guided by CT, but in the legend it is said to be guided by USG. Which one is correct? Please specify. 3. It is stated that a complete response of 6-month imatinib treatment in patient supports the diagnosis of GS by CT scan both in Case report part and Discussion part. Because this is an important conclusion, the authors must present their evidence, such as the CT-scan image they mentioned. 4. In Discussion part, a number of newer reference articles are missing such as PMID 24293891,	1) The Title was changed: "Granulocytic sarcoma as a rare entity in association with chronic myelogenous leukaemia mimicking carcinoma of ovary, a rare case report" 2) Figure-2. USG guided FNAC was conducted. Changes made in figure 2 & 3. 3) Post imatinib CT-scan image was added 4) Few new references were added 5) GS mimics with carcinoma of ovary. At that time, stage I ovarian carcinoma is suspected. A table is added showing similarities and differences between GS and epithelial carcinoma of ovary. 6) In the present case FNAC helps in the diagnosis, but biopsy will be more helpful.



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	10857884, 1863196, 15160970, 17446109, 24086883, and 10838454 (Pubmed) involving GS of ovary and the application of FNAC in GS diagnosis. The authors should perform a thorough literature searching. 5. The previous misdiagnosis is due to the mimicking between GS and carcinoma of ovary. In which stage of carcinoma of ovary then? Please specify. Thus, a table listing the similarity (mimicking) between GS and carcinoma of ovary is desired. This summary is important for future readers. 6. In the end of the case report, the authors suggest that patient with CML in ovary should be evaluated the possibility of GS. How about the diagnostic methods, FNAC or others? Please specify.	
<u>Minor</u> REVISION comments	1. FNAC is suggested to be listed as key words. 2. Introduction part: the age of the patient should be 31 years, not 38.	1) FNAC is added in key words 2) In introduction part, the age of the patient is changed to 31 years
<u>Optional/General</u> comments	Grammar check	checked