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## **SDI FINAL EVALUATION FORM 1.1**

## PART 1:

Journal Name:	Journal of Cancer and Tumor International
Manuscript Number:	Ms_JCTI_40034
Title of the Manuscript:	Carotid Body Tumour a Challenging Management: Rare Case Report in Baghdad Radiation
	Oncology Center, Medical City, Baghdad, Iraq
Type of Article:	Case Report

## PART 2:

FINAL EVALUATOR'S comments on revised paper (if any)	Authors' response to final evaluator's comments
This case report has improved however there are still many corrections to be made.	Dear Dr,
Abstract:	I very glad to hear from you.
Case presentation; the statement 'she was complaining of hypertension should be she complained of	I correct and complete every points and comments you mentions, so I send
, low grade fever is not a complaint rather 'fever'	revised paper to you.
She was observed to have gradual onset of growing and pulsating lump	
At October 2012 should be changed to 5 years later the lesion became larger and she started feeling	Thanks with regard
pulsation on lying	
Workup; 'slide' not slid	Ahmed
Conclusion over 40 years of working in this field we have only seen about 3 cases of cbts	
Management of this tumor is challenging whether it is treated by surgery or by radiotherapy.	
The main step in its management is by excluding other tumors that can be found in this region	
Introduction	
Line 25; should be three types of types of cbts have been described	
Line 34-its management must involve thorough evaluation	
Line 39- duplex or Doppler	
Case presentation	
Line 45- You don't need to write date	
Line 48- she consulted many doctors and clinics	
Line 51- 2 weeks prior to her presentation to Baghdad radiation oncology center	
Line 52- the mass rapidly increased in size	
Physical examination	
Line 57-change& to and, and mobility which is transversely than vertically	
Line 58- she complain of	
CT scan of neck	
Line 73- no infiltration into adjacent structure seen (delete it)	
Carotid angiography of neck Line 81- comparism not compares	
Line 83- upper neck	
Line 85- upper neck Line 88- histopathology done in 2012 showed	
Treatment	
Line 96- in size	
Line 98- as this was a recurrent case	
Discussion	
Line 120- which allows for discrimination between	
Line 140- patient should be adequately followed up	