

5/12/2014

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 10439-review.doc).

**Title:** Transthoracic Echo: A Sensitive Tool for Detecting Cardiac Extension of Renal Cell Carcinoma?

**Author:** Michelle Bejarano, Yara Leticia Cameron, Theodore Koutlas, Assad Movahed

**Name of Journal:** *World Journal of Clinical Cases*

**ESPS Manuscript NO:** 10439

The manuscript has been improved according to the suggestions of reviewers:

1 Format has been updated

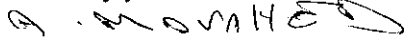
2 Revision has been made according to the suggestions of the reviewer

- (1) The manuscript is well written but illustration of the MRI and CT findings is necessary.
  - a. CT scan chest revealing IVC thrombus was included. An MRI chest was not performed.
- (2) References can not be present in the Abstract.
  - a. Deleted references in abstract.
- (3) Missing references in the text.
  - a. Deleted references that are not referenced in the text.
- (4) Reference number is not uniform in presentation.
  - a. Corrected reference number layout.
- (5) Is echocardiography superior to multi-slice CT?
  - a. In this case echocardiography was superior, which may be due to the following Homogenous and constant contrast in any cardiac chamber is necessary to ensure reliable evaluation by CTA. The right atrium receives blood from three sources, the superior vena cava, the inferior vena cava and the coronary sinus. As a result contrast in the right atrium is not homogenous and therefore image quality may not be optimal for evaluation right atrium by CTA. This could explain why CTA in our case could not identify the thrombus.

3 References and typesetting were corrected.

Thank you again for publishing our manuscript in the *World Journal of Clinical Cases*

Sincerely yours,



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