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Name of journal: *World Journal of Gastrointestinal Endoscopy*

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Answering reviewers

Dear Editor,

We have revised our manuscript and addressed all reviewer queries. In particular, the results in the abstract have been supplemented and the standard deviation given for the mean of the patient age. A few general improvements have also been made. Changes to the text have been highlighted as per the guidelines. The manuscript and references have also been formatted in accordance with your recommendations. We hope you find it of a sufficiently high standard. We would be happy to revise further if required.

This is our Response to Reviewers:

Thank you for reviewing our manuscript.

Reviewer 2:

"The paper maybe not very interesting for gastroenterologist."

Reviewer 3:

"While the results of this study may be of little importance in clinical practice, this manuscript is well written."

Landmarks to determine caecal intubation and therefore completion of colonoscopy are of paramount importance to any endoscopist. Although it is common knowledge that multiple landmarks are used to determine colonoscopy completion, study of the individual components that lead to this judgement are infrequent. Our study proves that the triradiate fold, one commonly cited landmark, is uncommonly seen and its presence is subjective. In addition, many endoscopy programs and registries still have the triradiate fold listed as a valid determinant of caecal intubation. Our study quantifies the poor reliability of the triradiate fold.

"1. The "Results" section of abstract is insufficient in information (Page2). Please add some information. "

This has been addressed in the manuscript.

"2. The average age of included patients should be written with standard deviation (Page5)."

This has been addressed in the manuscript.

Reviewer 4

"Minor note, please check is it "triradiate" or "tri-radiate" ?"

It is triradiate according to the Merriam-Webster Dictionary.

Thank you again for considering our manuscript in the World Journal of Gastrointestinal Endoscopy.

Sincerely yours,

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