

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

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Title: Pheochromocytoma with delayed tumor thrombus detection in renal vein: A case report

Reviewer's code: 03253728

Position: Editorial Board

Academic degree: MAMS, MBBS

Professional title: Associate Professor

Reviewer's Country/Territory: India

Author's Country/Territory: China

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Reviewer chosen by: AI Technique

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Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

This tumor is rarer than tumors that invade the inferior vena cava (IVC) or renal vein, and only a few cases of -----have been reported in the literature. Please provide references or this comments. What were the clinical complaints of the patient? Why did he go for an ultrasound abdomen examination? Was first surgery also a robotic one? If not why? "Given the anatomic differences of the left and the right adrenal vessels, nephrectomy is recommended when the tumor is on the left"- please explain it. Why did not you go for CT angiography to assess the vessels at the time of first surgery? This may have diagnosed the thrombus at the junction of renal vein and the IVC. Please comment. Please mention as to how you would have avoided this problem at the time of first surgery. Was there any way out? Why is nephrectomy necessary when the tumor is on the left side? If this happens on right, is nephrectomy not needed? Please comment. Conclusion can be rephrased. For example- "pheochromocytoma is a rare tumor, and metastatic tumor involving renal vein and IVC is even rarer". It may be your language. My line is just a suggestion.