

PEER-REVIEW REPORT

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Reviewer's code: 05923354

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Scientific quality	[<input checked="" type="radio"/>] Grade A: Excellent [<input type="radio"/>] Grade B: Very good [<input type="radio"/>] Grade C: Good [<input type="radio"/>] Grade D: Fair [<input type="radio"/>] Grade E: Do not publish
Language quality	[<input checked="" type="radio"/>] Grade A: Priority publishing [<input type="radio"/>] Grade B: Minor language polishing [<input type="radio"/>] Grade C: A great deal of language polishing [<input type="radio"/>] Grade D: Rejection
Conclusion	[<input checked="" type="radio"/>] Accept (High priority) [<input type="radio"/>] Accept (General priority) [<input type="radio"/>] Minor revision [<input type="radio"/>] Major revision [<input type="radio"/>] Rejection
Re-review	[<input checked="" type="radio"/>] Yes [<input type="radio"/>] No
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SPECIFIC COMMENTS TO AUTHORS

Dear Authors, Congratulations on your work in presenting this manuscript. The case presented makes a real contribution to the knowledge of ways to diagnose Klippel Trenaunay syndrome early using ultrasonography as a non-invasive method. The described ultrasonographic aspects can guide the diagnosis in utero. The fact that there is hypertrophy of one extremity, the difference between the length of the bones of the extremities, cystic lesions of the internal organs raises the suspicion of the presence of Klippel Trenaunay syndrome. These characteristics of the fetus were followed in the case presented. Ultrasonography revealed dilation of the vascular system of the right lower limb with very intense vascular signal and limb hypertrophy. The case is very well presented, concise and at the same time consistent. Each section is correctly presented. The discussions are well done and compare the results obtained with other reports in the literature. The images are revealing and the references are in accordance with the presented subject.