

Dear Reviewers:

Thank you so much for reviewing our manuscript timely and carefully. You have given us lots of good suggestions. We have revised our paper according to your comments. Followed are our replies to your comments.

Reviewer #1:

Comment 1. the abstract is too long for a case report.

Answer 1:

I have shortened the abstract section in the revised manuscript

Comment 2. during the introduction part you claimed that "atypical symptoms may result in the wrong diagnosis and an inappropriate treatment plan". please provide several of these uncommon presentation.

Answer 2:

I have modified it as "However, in addition to the typical symptoms, Rb could also be presented with other atypical symptoms, such as conjunctival edema, pseudohypopyon in the anterior chamber ,and secondary intraocular hypertension which may result in the wrong diagnosis and an inappropriate treatment plan."

Comment 3. during the introduction you didn't say anything regarding the management while you mentioned and discussed about it during the foregoing sections of case presentation and discussion

Answer 3:

I have supplemented the treatment of Rb in the introduction as "Current treatment of Rb include cryotherapy, laser photocoagulation, systemic

chemotherapy, enucleation, and local chemotherapy through intraocular, peribulbar and ophthalmic artery interventional approaches."

Comment 4: the foregoing article may help you. (<https://doi.org/10.1155/2021/9745701>) please use it in your manuscript.

Answer 4:

I have read this article in detail and included it as the ninth reference in my manuscript.

Comment 5. I revised the manuscript grammatically using track changes. please find the attached.

Answer 5:

It has been modified in red font in the text.

Reviewer #2:

Comment 1 .Was a genetic exam performed to exclude mutation of RB ?

Answer 1:

This patient was treated in our hospital ten years ago, and no tumor genetic examination was performed on this patient at that time.

Comment 2 .Why a brain MRI was not performed?

Answer 2:

The patient's brain and orbital CT showed no abnormality. In order to save the patient's medical expenses, we did not do further brain MRI at that time.

Comment 3. Discussion is complete and informative. I would suggest creating a table with a recap of RB stage and the treatment for each stage

Answer3: This manuscript focuses on the diagnosis of occult RB, and less on treatment. Detailed RB stage and recommended treatment methods for each stage are already available in the sixteenth reference at the end of our manuscript.

Comment 4. This case is not completely novel and to make it more complete I suggest adding a literature review of previously published similar cases.

Answer 4:

I have supplemented the literature review in the discussion as “**More than 3 dozen Rb patients older than 10 years of age have been reported in literature. Singh et al. gave a review of 24 cases till 2011. Domínguez-Varela IA et al. also described one case each in 2021. All were sporadic and like our patient, unilateral**”

We do appreciate your work in reviewing this paper. we hope these careful changes can make this paper more scientific and readable, and we really hope you can reconsider acceptance of this paper, because it really stands for our efforts and do contribute to the research of RB.

Sincerely yours

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