

ESPS Peer-review Report**Name of Journal:** World Journal of Radiology**ESPS Manuscript NO:** 9598**Title:** Peripheral primitive neuroectodermal tumor (PNET) of the kidney presenting with pulmonary tumor embolism**Reviewer code:** 02823001**Science editor:** Song, Xiu-Xia**Date sent for review:** 2014-02-20 16:29**Date reviewed:** 2014-03-05 10:19

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input checked="" type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

To Authors: The manuscript describes a very interesting presentation of a rare tumor. Also, the images provided nicely correlate with the clinical presentation. The main limitation of the manuscript currently is the poor syntax of the main text. Currently, I would not recommend for publication until the format and syntax of the manuscript improves considerably. With that being said, the case is very interesting and should be published. Please refer to the attached document for corrections/suggestions.

ESPS Peer-review Report

Name of Journal: World Journal of Radiology

ESPS Manuscript NO: 9598

Title: Peripheral primitive neuroectodermal tumor (PNET) of the kidney presenting with pulmonary tumor embolism

Reviewer code: 00289422

Science editor: Song, Xiu-Xia

Date sent for review: 2014-02-20 16:29

Date reviewed: 2014-03-24 20:25

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input checked="" type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

Case report: The following sentence "Ultrasound abdomen showed a heteroechoic right renal mass with right renal vein thrombus" needs correction as follows: Abdominal Ultrasound showed a heterogeneous right renal mass and right renal vein thrombus. The fig. 1A is not a nephrographic phase...it is an early (arterial phase) of corticomedullary differentiation (as it is correctly stated in the figure legend). Discussion The following statement is not correct: "The corticomedullary phase while not as good for tumor detection, serves to assess the retroperitoneum for direct spread to the renal vein, IVC" The corticomedullary phase is in fact an arterial phase, and opacification of the veins is not achieved so as to estimate possible filling defects-thrombus. The authors should also discuss on the two previously published case reports and emphasize the similarities or differences. It would also be important to discuss on the differential diagnosis by imaging between plain thrombus and neoplastic thrombus.