Author's response to reviews

Title: The role of cross sectional imaging in the management of acute pyogenic inguinal abscess - extrapelvic versus intrapelvic origin

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Author's response to reviews: see over
March 20, 2012

Prof. Philippa Harris, PhD
Executive Editor
BMC-series Journals
BioMed Central

Dear Professor Harris:

We would like to re-submit our manuscript entitled ‘The role of cross sectional imaging in the management of acute pyogenic inguinal abscess - extrapelvic versus intrapelvic origin’ for consideration for publication in the BMC-infectious disease. This paper has not been published elsewhere.

All co-authors have read and agreed with the content of the manuscript. This study was approved by institutional review board. All authors have made substantial contributions to all of the following: (1) the conception and design of the study, or acquisition of data, or analysis and interpretation of data, (2) drafting the article or revising it critically for important intellectual content, (3) final approval of the version to be submitted.

This manuscript has been previously as MS: 8753431387234970. We are appreciated for the constructive suggestions from reviewers. Point to Point response to the reviewer’s opinions was listed in the ‘Revision Note’. Briefly, we have addressed the final point listed by Reviewer 1 by adding an axial view of CT scan. The name of the
specific IRB with reference number was included in the manuscript. The personal details were removed from the Figure legends. We hope you will find this revision improved and meet the standard of the journal.

Thanks for your consideration.

With best regards,

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Revison Note:

Reviewer's report (Daphne Theodorou)

Comment

Manuscript now appears improved.

One simple comment: Figure 1. I am not sure the abscess is located at the adductor m, or subcutaneous soft tissue. Axial images would confirm exact site.

Response

We are appreciated for the reviewer’s recognition. In the Figure 1., we added axial view as Figure 1B to better demonstrate the involvement of the investion fasica of the adductor m.