

Authors reputations to the reviewers of Manuscript no: 32853

For Reviewer's code: 02664504

COMMENTS TO AUTHORS

Few corrections required. highlighted in the manuscript file

A: Thanks for your revision. For your comments on the **Lasser and Greenberger protocols**, we did not get your concern clearly as these are not our own methods. However, we emphasized the text with capitalizations and spacing as the data are derived from their corresponding previous citations in literature and are included in the ACR recommendations as well as ESUR recommendations.

For the procedural infograph, our aim was to supplement the manuscript with a simplified visual enhancer that the practicing radiologist and/or staff involved in deal with contrast can simply follow for easy clinical applicability. It starts with the emphasis on checking the feasibility of non-contrast study to address the clinical question, if adequate no need to run a contrast-enhanced study. Otherwise, when contrast study is needed the in-charge staff has to screen for the risk factors and consider the medico-legal caveats of contrast media administration. Then he/she would consider the history of previous reactions to contrast media with subsequent recommendations in one limb and the renal condition of the patient in the other limb and manage accordingly.

For Reviewer's code: 00227360

COMMENTS TO AUTHORS

This is a nice review revisiting the essentials and tips of contrast agents for safe practices. The article actually covers two types of contrast agents: radiographic and MR contrast agents with different molecular structures and mechanisms for side effects. The authors, however, mixed them together and treat them as a whole. Thus, the readers may be unaware of the differences between the two types of contrast agents.

A: Thanks for time and efforts you have payed to review the manuscript. We got your consideration with interest. The main derive to write these review is to become a manual for clinical practice for every radiologist or staff in-charge dealing with contrast materials as we noticed along our daily practices. So, we have preferred to get focused on this topic. Besides, the differences between both types of contrast agents are

extensively covered in different parts of literature yet they have common clinical presentations of hypersensitivity reactions.

For Reviewer's code: 02346872

COMMENTS TO AUTHORS

The authors reviewed several aspects of radiographic and MR contrast agents. Such as epidemiology of CM reactions, pathogenesis of CM hypersensitivity, adverse reactions to contrast media, populations with special considerations. The authors emphasized that radiologists as well as faculty staffs dealing with radiographic and MR contrast media have to be well oriented with the potential CM hypersensitivity reactions, high-risk groups liable to develop it and their early recognition. They have to be ready to implement prompt and effective management planes to deal with these reactions should it emerge. This review is very useful for the implication of MR contrast agents.

A: We are appreciating your compliments and we owe to your efforts in revision of our manuscript.

Thanks again for all reviewers who had spent their times in revising our manuscript.

Authors