Once you have Acrobat Reader open on your computer, click on the Comment tab at the right of the toolbar:

This will open up a panel down the right side of the document. The majority of tools you will use for annotating your proof will be in the Annotations section, pictured opposite. We've picked out some of these tools below:

1. **Replace (Ins) Tool** – for replacing text.
   - Strikes a line through text and opens up a text box where replacement text can be entered.
   - **How to use it**
     - Highlight a word or sentence.
     - Click on the Replace (Ins) icon in the Annotations section.
     - Type the replacement text into the blue box that appears.

2. **Strikethrough (Del) Tool** – for deleting text.
   - Strikes a red line through text that is to be deleted.
   - **How to use it**
     - Highlight a word or sentence.
     - Click on the Strikethrough (Del) icon in the Annotations section.

3. **Add note to text** Tool – for highlighting a section to be changed to bold or italic.
   - Highlights text in yellow and opens up a text box where comments can be entered.
   - **How to use it**
     - Highlight the relevant section of text.
     - Click on the Add note to text icon in the Annotations section.
     - Type instruction on what should be changed regarding the text into the yellow box that appears.

4. **Add sticky note** Tool – for making notes at specific points in the text.
   - Marks a point in the proof where a comment needs to be highlighted.
   - **How to use it**
     - Click on the Add sticky note icon in the Annotations section.
     - Click at the point in the proof where the comment should be inserted.
     - Type the comment into the yellow box that appears.
5. **Attach File Tool** – for inserting large amounts of text or replacement figures.

- Inserts an icon linking to the attached file in the appropriate place in the text.

**How to use it**
- Click on the **Attach File** icon in the Annotations section.
- Click on the proof to where you’d like the attached file to be linked.
- Select the file to be attached from your computer or network.
- Select the colour and type of icon that will appear in the proof. Click OK.

---

6. **Drawing Markups** Tools – for drawing shapes, lines and freeform annotations on proofs and commenting on these marks.

- Allows shapes, lines and freeform annotations to be drawn on proofs and for comment to be made on these marks.

**How to use it**
- Click on one of the shapes in the Drawing Markups section.
- Click on the proof at the relevant point and draw the selected shape with the cursor.
- To add a comment to the drawn shape, move the cursor over the shape until an arrowhead appears.
- Double click on the shape and type any text in the red box that appears.
Intrapulmonary arteriovenous anastomoses with right to left shunting represents a phenomenon not generally recognized in the clinical setting. A recent publication noted this as being associated with cerebral embolism. Detection of an intrapulmonary shunt by peripheral vein saline contrast injection was described as occurring more often in patients with cryptogenic neurological events compared to controls. This “physiologic” shunt phenomenon has created interest in the echocardiography community as to its potential clinical ramifications for cryptogenic neurological events and also in divers with unexplained decompression sickness.

As described in this “mini-series” of review articles, opening of intrapulmonary shunts at rest, during exercise or with hypoxia may have a role in not only determining pulmonary gas exchange efficiency but have clinical relevance in cerebral embolism or decompression sickness. The paper Embryology and Anatomy of Intrapulmonary Shunts, by McMullan and Riemer describes the embryology and anatomy of intrapulmonary shunts during normal growth and development, and also with several altered states, such as with the Glenn superior cavopulmonary anastomosis and with liver disease. In Clinical Consideration for Techniques to Detect and Quantify Blood Flow through Intrapulmonary Arteriovenous Anastomoses: Lessons from Physiological Studies, Duke et al. describe methodologies used to detect these shunts in both animal studies and in humans. Evaluation may be performed at rest or during exercise, with arterial hypoxemia or while breathing 100% oxygen. The paper Intra-Pulmonary Shunt and SCUBA Diving: Another Risk Factor? By Madden, Dujic, and Ljubkovic describe the unique physiological conditions that exist for divers and how intrapulmonary shunting may be a potential way that venous gas embolism may occur, and lead to “unexplained” decompression sickness.

It is the intent of this “mini-series” to make the echo community aware of the dynamic nature of intrapulmonary arteriovenous anastomoses with its associated shunting relative to different physiological conditions. Potential clinical ramifications of these shunts are also discussed.

References

Address for correspondence and reprint requests: Edmund Kenneth Kerut, M.D., Heart Clinic of Louisiana, 1111 Medical Center Blvd, Suite N613, Marrero, Louisiana 70072.

Fax: 504-349-6621;

E-mail: kenkerut@gmail.com
Dear Author,
During the copy-editing of your paper, the following queries arose. Please respond to these by marking up your proofs with the necessary changes/additions. Please write your answers on the query sheet if there is insufficient space on the page proofs. Please write clearly and follow the conventions shown on the attached corrections sheet. If returning the proof by fax do not write too close to the paper’s edge. Please remember that illegible mark-ups may delay publication.

Many thanks for your assistance.

<table>
<thead>
<tr>
<th>Query reference</th>
<th>Query</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>AUTHOR: Please confirm that given names (red) and surnames/family names (green) have been identified correctly.</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>WILEY: Please provide the year of publication, volume number, page range for reference [2].</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>WILEY: Please provide the year of publication, volume number, page range for reference [3].</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>WILEY: Please provide the year of publication, volume number, page range for reference [4].</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>AUTHOR: Reference [4] has not been cited in the text. Please indicate where it should be cited; or delete from the Reference List and renumber the References in the text and Reference List.</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>AUTHOR: Please supply keywords for this article.</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>AUTHOR: Please check the proof carefully, paying particular attention to the accuracy of manuscript title, author names and affiliation. Double check figures and tables. Note: Any information not checked and corrected at the proofing stage is therefore a responsibility of the author.</td>
<td></td>
</tr>
</tbody>
</table>