

Journal Name:	British Journal of Medicine and Medical Research
Manuscript Number:	2015_BJMMR_18367
Title of the Manuscript:	Majewski syndrome, Short Rib Polydactyly Syndrome (SRPS) Type II - A rare case report, with review of literature
Type of the Article	Case Study

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound.

To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)

PART 1: Review Comments

	Reviewer's comment	Author's comment <i>(if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</i>
<u>Compulsory</u> REVISION comments	This is a very interesting case report, however i have some few comments 1.The abstract should portray a brief pregnancy history such history of polyhydroamios, ingestion of concoction etc 2.Introduction is brief and devoid of justification and aim of the study 3. Case presentation should extend to pregnancy history and perinatal history. 4. Chromosomal analysis would be beneficial, was it done for the patient? 5. Prenatal diagnosis would also be beneficial, was it done for the mother? 6.Discussion again is too brief and does not relate findings with other literatures with a critique 7.References did not follow Vancouver	1. The pregnancy history discussed in the abstract was primigravida, consanguineous marriage and anhydramnios. 2. We have added the following sentence in the Introduction. "The aim of this case report is to discuss the clinical, radiological and histopathological features of Majewski syndrome which is an extremely rare syndrome that very few case reports have discussed in detail so far." 3. We have broken down the case presentation into various subheadings i.e. Pregnancy history, Prenatal USG findings, Birth and Perinatal history, External examination, Postnatal imaging and Autopsy findings. Although we have included all the available pregnancy history, we would like to add to the perinatal history that the foetus did not cry immediately after birth, Heart rate was 60/min, without any spontaneous respiration, the 1min APGAR score

		was 2, the 5 min APGAR score was 2, after which CPR was given which failed to revive the foetus. 4. Chromosomal analysis was not done due to the unavailability of this diagnostic modality at our institution. 5. Prenatal diagnosis was done on ultrasonography at 28 weeks of gestation and termination of pregnancy advised. However, the mother refused the termination. 6. Discussion has been modified and now covers all the features of Majewski syndrome in detail. Comparison with other case reports has also been included. 7. The necessary corrections have been made in the references.
<u>Minor</u> REVISION comments		
<u>Optional/General</u> comments		