



SDI Review Form 1.6

Journal Name:	British Microbiology Research Journal
Manuscript Number:	Ms_BMRJ_20193
Title of the Manuscript:	Acinetobacter: A War Zone in the Hospital
Type of the Article	Review Article

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>)



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PART 1: Review Comments

	Reviewer's comment	Author's comment (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)
Compulsory REVISION comments		
Minor REVISION comments	- Introduction - The ideas in line 21-30 are > 2, it's better to make another paragraph with 1 or 2 idea. - The sentences in line 24-25 do not match with the title and not suitable in the part of introduction. Please clarify. - Please explain the sentence 'but' in line 27. Better if we use 'with'? - A brief and clear of clinical implication is undescribed in introduction → not match with objective of this manuscript and conclusion. - Epidemiology - In line 49 → What is the purpose of this sentence is percentage or proportion? - Microbiology - In line 109 → 'transformation assay of Juni' Please explain this sentence. What is mean of this phrase is by Elliot Juni? - Virulence factor and clinical impact - Clinical impact is not clear describe in this part Please explain. - Laboratory diagnosis - Word '15' in line 240 is number of reference? - Combination therapy - The additional of combination therapy efficacy data in percentage/OR/others in this section will give more significant.	We sincerely thank the reviewer for reviewing our manuscript. 1.As suggested by the reviewer we have redone this section. In the introduction we have introduced a part about Iraqibacter, because this war was the stimulus for added research and led to the unsubstantiated assumptions that the bacteria was only originating from war zones. Hence the title of the manuscript- because the war against this bacteria is not in the battlefield but in the hospital(nosocomial). 2. We apologise for the oversight. This has been corrected and appropriate reference has been added. 3. As the reviewer has rightly pointed out, it was described by Elliot Juni and this has been added and highlighted in the manuscript 4. As suggested by the reviewer, We have modified the manuscript and have added the clinical impact to the section on clinical Picture. 5. We apologise for the typographical error, the number is the reference which was not put in superscript.



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	7. Reference no. 8 is too old for epidemiology. Please explain.	7. We have added the reference only for the sake of showing the knowledge set about two decades ago and its current relevance. Especially since so much has become known about Acinetobacter since the time of that article, and still the article has relevant information.
<u>Optional/General</u> comments	This article is a review and summarized on Acinetobacter: a war zone in hospital. There are no many articles discuss about Acinetobacter in the form of reviews. However, this article is based on some good ideas and has beneficial for clinicians and academics. The article is well constructed .	