



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	2013_IJTDH_6956
Title of the Manuscript:	Radiological features of Right destroyed lungs syndrome with dextrocardia
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>)



SDI Review Form 1.6

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	Comments on the manuscript of case report <i>“Radiological features of Right destroyed lungs syndrome with dextrocardia”</i> 1) Firstly, I need to highlight the word of <i>dextrocardia</i>, which is in line 3. I think it is a cardiac dextroposition rather than dextrocardia. This must be clearly defined as it is clinically important in view of both are 2 different terminologies. From the manuscript, the reasons of the destroyed right lung were clearly highlighted (Lines 68- 77). These were the cause which I think pros to the point of the cardiac dextroposition rather than dextrocardia. 2) Right destroyed lungs syndrome is comparatively rare. This is such a good case for case report where the author of this manuscript is highlighting the rarity of the condition of the disease. The left side is clinically more common to the right side as it is particularly due to of that its anatomical aspect of the left principle bronchus, in which it is more horizontal, longer and	



SDI Review Form 1.6

	narrower, thus more prone to obstruction. This is mentioned in lines 187-189. (But it is not explained in details). 3) The case presentation was clearly described in flow. The history, clinical assessment and radiological finding were clearly described. There were no issues to discuss here. 4) Discussion The author has discussed the relevant point to the case report particularly in radiological aspect pertaining to this case. The fact to its contrary has also been well-discussed. 5) Conclusion As stated in the topic, <i>“Radiological features of Right destroyed lungs syndrome with dextrocardia”</i>. Here, is my respond... The author has well-written in the discussion pertaining to the clinical relevance and that of its radiological aspect. The topic was in line with all the contents but lacking in the facts of DOTs. If the author has interest in the DOTs programme, he/she should explain the details and discussed further in the discussion. Otherwise, the conclusion needs to consider to be revised. In summary, this is rather important radiological features to identify in practice during clinical assessment to diagnose the disease. This manuscript has met the relevance points of its	
--	--	--



SDI Review Form 1.6

	clinical and radiological aspect. Lastly, the author should stand for the above issues particularly to the points number 1 and 5.	
<u>Optional/General</u> comments		

Note: Anonymous Reviewer