



SDI Review Form 1.6

Journal Name:	Ophthalmology Research: An International Journal
Manuscript Number:	2015_OR_17749
Title of the Manuscript:	A clinical sign for aiding the diagnosis of unilateral orbital fat herniation
Type of the 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)
<u>Compulsory</u> REVISION comments	1. Line 12: SFH – abbreviation should be used with the full words at first use 2. Line 16: Disjointed sentence. Please re-write 3. Line 17- reference 4. Line 25: 'There was no ophthalmic history' – means what? 5. Line 59: too many 'and'—remove one 6. References are too few Ethical issue: Yes. there was no mention of written informed consent as pictures are not masked	Thank you 1. This has been corrected 2. This sentence has been revised 3. A reference has been added 4. This has been changed to their was 'no history of ophthalmic disease or trauma' 5. These sentences have been revised A statement confirming the patient's written consent has been added
<u>Minor</u> REVISION comments	none	
<u>Optional/General</u> comments		