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)

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	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**	
Minor REVISION comments	none	
Optional/General comments		

Reviewer Details:

Name:	**C. O Adeoti**
Department, University & Country	**Ophthalmology department, Ladoke Akintola University of Technology teaching hospital, Osogbo Professor , Nigeria**