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SDI Review Form 1.6

Journal Name:	International Blood Research & Reviews
Manuscript Number:	Ms_IBRR_46714
Title of the Manuscript:	LEUCOCYTE PROFILE OF ADULT NIGERIANS WITH ACUTE MUSCULOSKELETAL TRAUMA
Type of the Article	

General guideline for Peer Review process:

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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		
Minor REVISION comments		
Optional/General comments	I would recommend accepting the manuscript as it is.	

PART 2:

	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)
Are there ethical issues in this manuscript?	(If yes, Kindly please write down the ethical issues here in details)	

Reviewer Details:

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