

SDI Review Form 1.6

Journal Name:	Journal of Advances in Medicine and Medical Research
Manuscript Number:	Ms_JAMMR_50665
Title of the Manuscript:	HEMIFACIAL MICROSOMIA : A MINI REVIEW
Type of the Article	Minireview Article

General guideline for Peer Review process:

This journal's peer review policy states that <u>NO</u> manuscript should be rejected only on the basis of '<u>lack of Novelty'</u>, 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)

PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed highlight that part in the manus his/her feedback here)
Compulsory REVISION comments	An excellent and comprehensive review of Hemifacial Microsomia	
Minor REVISION comments	Pag2 Line 2: Cohen MM Jr et al. Oculoauriculovertebral spectrum This reference is not cited in the References	
Optional/General comments	Minor corrections required prior to publication	

PART 2:

		Author's comment (if agreed wi that part in the manuscript. It is n feedback here)
Are there ethical issues in this manuscript?	(If yes, Kindly please write down the ethical issues here in details)	

Reviewer Details:

Name:	G.H. Sperber
Department, University & Country	School of Dentistry, University of Alberta, Canada

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with reviewer, correct the manuscript and highlight s mandatory that authors should write his/her