



**SDI Review Form 1.6**

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| Journal Name:            | <a href="#">Journal of Advances in Medical and Pharmaceutical Sciences</a> |
| Manuscript Number:       | 2014_JAMPS_14756                                                           |
| Title of the Manuscript: | Diagnosis of Bilateral Type-A Radix Paramolaris on mandibular first molars |
| 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>)



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**PART 1: Review Comments**

|                                            | <b>Reviewer's comment</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>Author's comment</b> (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)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|--------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b><u>Compulsory</u></b> REVISION comments | <p>In this case study</p> <p>--Discussion part must be below endodontic management.</p> <p>--Page 1 line 13: IOPA mentioned first but it would be shown in abstract part first.</p> <p>--authors declared ethical approval taken for publishing, but what about CBCT and radiation security? There is unnecessary to taken CBCT management of radix paramolaris. Did the authors give any approval for CBCT image for the irreversible pulpitis without apical lesion of the tooth? Does CBCT imaging necessary for this tooth?</p> <p>"Page 4 line 74 and 75: These IOPA's provides sufficient details regarding presence of additional roots." The authors mention that is sufficient for detection additional root of the molar.</p> <p>Sincerely</p> <p>Suspected, the author declared that the ethical approval has been taken from patient for publishing. But there is unnecessary the CBCT method for showing radix paramolaris.</p> | <ol style="list-style-type: none"> <li><b>Discussion now rearranged below endodontic management.</b></li> <li>Page 1 line 13 corrected.</li> <li>Type –A radix para-molaris is easy for the experts to confirm on the radiographs. But it is not easy for an inexperienced clinician (especially Type-A). Hence this paper only discusses how we could confirm and manage a case like this. We had taken CBCT for educative purpose for the benefit of students. It was in conjunction with patient's approval.</li> <li>A stepwise procedure has been explained on how to diagnose a case with additional roots. More importantly; CBCT was necessary to confirm the case of TYPE-A para-molaris. Not many have published such a case in global annals. This could potentially be <u>unique</u> since it is bilateral TYPE-A. "Hence it was important to confirm the findings with a CBCT evaluation so that we could publish as well as educate our students."</li> </ol> |
| <b><u>Minor</u></b> REVISION comments      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | NA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b><u>Optional/General</u></b> comments    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | NA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |