



SDI Review Form 1.6

Journal Name:	Asian Journal of Orthopaedic Research
Manuscript Number:	Ms_AJORR_41880
Title of the Manuscript:	Spontaneous avulsion of the tibial tubercle following Osgood-Schlatter lesion.in an adult
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)
Compulsory REVISION comments	<ol style="list-style-type: none"> 1. The lateral knee radiograph is of poor quality (please replace) 2. Authors did not describe the clinical phenotype of the patient (height, weight, craniofacial features, scoliosis, history of fractures..etc.). OS disease with spontaneous avulsion might be secondary to a connective tissue disorder (heritable type) (genetically programmed) 3. Authors need to clarify the previous point 4. Authors claim, that this is the first case report of OS disease in a 49 –years-old-patient(Al Kaissi et al described Osteochondritis dissecans and Osgood Schlatter disease in a family with Stickler syndrome-Ped Rheumatology 2009:4) 	<ol style="list-style-type: none"> 1. We tried to replace the radiographs. Unfortunately there are no digital x- rays available. 2. We described the phenotype of the healthy patient. There were no signs of osteochondrodysplasia or any other systemic disease. 3. We tried to describe the healthy patient 4. Thank you very much for this interesting paper about a family with a systemic disease. Our case report is about a healthy patient without any systemic diseases with spontaneous avulsion of the tibial tubercle. To our knowledge it is the first described case.
Minor REVISION comments		
Optional/General comments		