



SDI Review Form 1.6

Journal Name:	British Microbiology Research Journal
Manuscript Number:	Ms_BMRJ_27150
Title of the Manuscript:	Antibacterial Susceptibility of Urinary Escherichia coli from Outpatients with Community Acquired Urinary Tract Infections, Report from Tertiary Health Care Center, Egypt.
Type of the Article	Original Research 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)
<u>Compulsory</u> REVISION comments	Generally, there is a need for expansion of the manuscript especially the Introduction. Why Escherichia coli? Is it important in community acquired UTI? Methods: Explain further the inclusion-exclusion criteria. Why exclude those previously admitted in hospital? What about those previously on antibiotics? Results: Describe the results further. Describe the resistance of the isolates to different classes of antibiotics (parts are already in the Discussion section, and can be moved up). There is no mention of obtaining informed consent from the study subjects.	The introduction was expanded Inclusion criteria: any patient presented with symptoms of UTI as described in the manuscript is included. Urine sample of the same patient is collected only after 3 month of the previous positive E. coli culture. Patients previously admitted to hospital were excluded to avoid inclusion of community onset healthcare-associated urinary tract infection. Infections by possibly colonized hospital acquired strains, as the study on community acquired infections only. The study did not investigate this point (previous or repeated antibiotic course) as a risk factor for development of resistance. This point was mentioned in the study limitation, as the research didn't investigate the detailed clinical state of the patients included in the study. Considered and resistance of other antibiotics classes were mentioned in results. This was obtained as a part of the ethical approval requirements
<u>Minor</u> REVISION comments		
<u>Optional/General</u> comments		