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Journal Name:	**International Journal of TROPICAL DISEASE & Health**
Manuscript Number:	**2014_IJTDH_11595**
Title of the Manuscript:	**NASOPHARYNGYEAL CARRIAGE AND ANTIMICROBIAL SUSCEPTIBILITY OF STREPTOCOCCUS PNEUMONIAE, IN CHILDREN UNDER FIVE YEARS AT MBARARA REGIONAL REFERRAL HOSPITAL, UGANDA**
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)*
Compulsory REVISION comments	1. The article is written very carelessly. A lot of mistakes in particular words spelling, double spaces or lack of spaces occur in whole manuscript text. Also the names of microorganisms species are written incorrectly (e.g. the second part of name written with capital letter, lack of italic, lack of abbreviation of generic microorganisms name. Moreover the mistakes in the spelling of antibiotic names were committed. Article absolutely should be rechecked. 2. The way of percentage typing should be unified – either one or two digits after the decimal point in each place in text. 3. The abbreviation MRRH (I suppose Mbarara Regional Refferal Hospital) appears in text but there is no information in any place of manuscript what it stands for. 4. Microorganism such as *Streptococcus viridan* does not exist. The ATCC 49456 is *Streptococcus mitis*. Authors does not know what kind of standard strains they used. 5. The most important drawback which practically disqualifies the work was usage the chocolate agar to antimicrobial susceptibility testing. It is not consistent with the recommendations neither CLSI (M100-S23, 2013) nor EUCAST (Clinical breakpoints v. 4.0). The chocolate agar should be used only to test the susceptibility of *H. influenzae*, *H. parainfluenzae*, *N. meningitidis* and *N. gonorrhoeae*. According to recommendations CLSI (M100-S23, 2013) for *S. pneumoniae* Mueller Hinton Agar with 5% sheep's blood should be used.	

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	6. How can the t-test designed for bivariate associations used for comparison of 3 variables? The other multiple comparisons test should be used. 7. The table 2 is uncommunicative. 8. The title of verticle axis in figure 1 should be: "Percentage of restistant strains [%]" 9. In line 168 Authors wrote: "In this study it was found that *S. pneumoniae* was resistant to co-trimoxazole (98.68%), tetracycline (77.26%) and ciprofloxacin (69.74%).", but it should be: "In this study it was found that most of *S. pneumoniae* strains were resistant to cotrimoxazole (98.68%), tetracycline (77.26%) and ciprofloxacin (69.74%)."	
Minor REVISION comments		
Optional/General comments		

Reviewer Details:

Name:	**Anonymous**
Department, University & Country	**Poland**