



SDI Review Form 1.6

Journal Name:	<u>Journal of Advances in Medical and Pharmaceutical Sciences</u>
Manuscript Number:	Ms_JAMPS_23250
Title of the Manuscript:	Ulcerated Giant Lipoma over Nape of Neck – A Rare Case
Type of the Article	Case studies

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	1- Why did needle aspiration bx done before ct scan? 2-What is OT? 3-How is the follow up of patient? 4- The references are a bit old. 5- Line 42; ulcerated hemorrhagic lipomas may arouse suspect of especially GIS malignancies (Minerva Chir. 2014 Jun;69(3):147-53; Med Sci Monit. 2014 Apr 23;20:674-80. doi: 10.12659/MSM.890303; J Med Case Rep. 2014 Sep 16;8:309. doi: 10.1186/1752-1947-8-309). I suggest these three studies for the references.	1- Needle aspiration give early diagnosis report than CT scan in our setup. 2- OT- operation theatre. 3- Outdoor basis follow up. 4- I have added a new reference of 2012 in manuscript. 5- These references are for GIST tumor.
<u>Minor</u> REVISION comments		Thank you for comments .these comments really beneficial to improve the quality of case report.
<u>Optional/General</u> comments		