



SDI Review Form 1.6

Journal Name:	Journal of Advances in Medical and Pharmaceutical Sciences
Manuscript Number:	Ms_JAMPS_25247
Title of the Manuscript:	Mucous Retention Cyst – Review of literature and a case report.
Type of the Article	Case Report

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 <i>(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)</i>
<u>Compulsory</u> REVISION comments	Nil	
<u>Minor</u> REVISION comments	Use the full form instead of abbreviations like "OPD" when it is used for the first time in the text. Avoid unnecessary use of capitals like "Mucous Extravasation Phenomena" throughout the text. It can be addressed as Mucous extravasation phenomena	OPD has been replaced with Out Patient Department. Mucous Extravasation Phenomena has been replaced with mucous extravasation phenomena in the entire text.
<u>Optional/General</u> comments		