SDI Review Form 1.6

Journal Name:	**Ophthalmology Research: An International Journal**
Manuscript Number:	**Ms_OR_20011**
Title of the Manuscript:	**Visual acuity outcome after diode laser therapy in patient with diabetic retinopathy.**
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	**English language is the main problem of this author(s). This make the manuscript difficult to read and understand. Hence this manuscript need overhauling in term of English construction.** **Need to re-write the introduction, methodology, results and discussion.** **The reference did not follow the journal rule.**	
Minor REVISION comments		
Optional/General comments	If the grammatical error is corrected I am interested in review the manuscript again.	

Reviewer Details:

Name:	**Monsudi Kehinde fasasi**
Department, University & Country	**Department of ophthalmology, Federal Medical Centre, Kebbi State, Nigeria**