

## Review Form 1.7

Journal Name:	Asian Journal of Case Reports in Surgery
Manuscript Number:	Ms_AJCRS_97813
Title of the Manuscript:	Giant ovarian tumor: a case report and review of the literature.
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:

(<https://www.journalajcrs.com/index.php/AJCRS/editorial-policy> )

### 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)
<b>Compulsory REVISION</b> comments 1. <b>Is the manuscript important for scientific community?</b> (Please write few sentences on this manuscript) 2. <b>Is the title of the article suitable?</b> (If not please suggest an alternative title) 3. <b>Is the abstract of the article comprehensive?</b> 4. <b>Are subsections and structure of the manuscript appropriate?</b> 5. <b>Do you think the manuscript is scientifically correct?</b> 6. <b>Are the references sufficient and recent? If you have suggestion of additional references, please mention in the review form.</b> <b>(Apart from above mentioned 6 points, reviewers are free to provide additional suggestions/comments)</b>	<p>It is a report of A CASE OF A GIANT OVARY CANCER from a hospital surgery department. It is a retrospective, non-randomised study of A SINGLE PATIENT, AS A CONTRIBUTION TO INTERNATIONAL BIBLIOGRAPHY (CASE REPORT)</p> <p>It is a "modest" article, well written, does not conform to internationally accepted protocols, since IT SHOULD HAVE BEEN DONE AS PRIMARY TREATMENT, NEOADYUVANT CHEMOTHERAPY AND THEN SURGERY.</p> <p>In this patient, surgery was done first and then chemotherapy (?)</p> <p>It was reworked again a year, "second look laparotomy", a strategy currently NOT ACCEPTED, since it does not provide more information than a good tomography plus tumour markers.</p> <p>The literature is adequate, the photos are good and the follow-up of the patient is brief, since they are cases that must be evaluated (follow up) at five and ten years.</p> <p>In short, it is a modest article of a single case, as a contribution to the bibliography.</p>	
<b>Minor REVISION</b> comments 1. <b>Is language/English quality of the article suitable for scholarly communications?</b>		
<b>Optional/General</b> comments		

### PART 2:

	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)
Are there ethical issues in this manuscript?	(If yes, Kindly please write down the ethical issues here in details)	

### Reviewer Details:

Name:	Adrian Hunis
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