

Review Form 3

Journal Name:	Asian Journal of Cardiology Research
Manuscript Number:	Ms_AJCR_129105
Title of the Manuscript:	Acute myocarditis mimicking inferior wall myocardial infarction: A case report
Type of the Article	Case report

General guidelines for the 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 guidelines for the Peer Review process, reviewers are requested to visit this link:

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PART 1: Comments

	Reviewer's comment	Author's Feedback <i>(Please correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</i>
Please write a few sentences regarding the importance of this manuscript for the scientific community. A minimum of 3-4 sentences may be required for this part.	Acute myocarditis and myocardial infarction are very important Cardiac diagnosis. More data on this is highly contributive to scientific literature. But the data has to be conveyed in such a way that it benefits the reader.	
Is the title of the article suitable? (If not please suggest an alternative title)	yes	
Is the abstract of the article comprehensive? Do you suggest the addition (or deletion) of some points in this section? Please write your suggestions here.	Author has mentioned anterior MI in abstract when its an Inferior MI	
Is the manuscript scientifically, correct? Please write here.	No, needs major changes and additional investigations for confirming this diagnosis	
Are the references sufficient and recent? If you have suggestions of additional references, please mention them in the review form.	ok	
Is the language/English quality of the article suitable for scholarly communications?	ok	
Optional/General comments	<p>none</p> <ol style="list-style-type: none"> 1. You have mentioned anterior wall MI in abstract and discussion when the ECG is showing Inferior STEMI. 2. Why it cant be a spontaneous recanalization of CULPRIT vessel/variant angina MINOCA. Definitive diagnosis is based on Cardiac biopsy and short of that LGE Cardiac MRI. You are merely speculating that it is Acute myocarditis. 3. How do you explain territorial ST changes in myocarditis? 4. Discussion is too long 5. Case report does not have a precise message. 	

PART 2:

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

Reviewer Details:

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