

Review Form 1.6

Journal Name:	Journal of Advances in Medicine and Medical Research
Manuscript Number:	Ms_JAMMR_78538
Title of the Manuscript:	Comparative Study of Patients Outcomes by Using Dexmedetomidine with Bupivacaine versus Bupivacaine Alone in Ultrasound-Guided Thoracolumbar Interfacial Plane Block for Spine Surgeries.
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:

(<https://www.journaljammr.com/index.php/JAMMR/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)
Compulsory REVISION comments	<ol style="list-style-type: none"> Abstract: The meanings of NRS and MAP abbreviations used in the results section should be written. The p value should be added to the results section. Patients and methods: The numbers related to the inclusion and exclusion criteria should be removed from the patients and methods section. Exclusion criteria repeated, they should be removed. It should be written as Numerical Rating Scale (NRS). Has power analysis been done? Results: Age, gender, BMI, ASA, duration of surgery should be added to Table 1. Table 5: Data staistics should be corrected as data statistics. Discussion: There is great confusion in the writing of the Discussion section. The use of names when giving a reference breaks the integrity of the discussion. It is sufficient to write the reference number after the section to be discussed. For example: Instead of 'Consumption of isoflurane as inhalational anesthesia in group B showed significant decrease as the MAC used to achieve adequate depth of anesthesia was 0.6 (MAC awake), this result was in accordance with the reports made by Abd El-Hamid HM et al ; [23] , Muniyappa RB et al ;[24], and Preeti S et al; [25] 'Consumption of isoflurane as inhalational anesthesia in group B showed significant decrease as the MAC used to achieve adequate depth of anesthesia was 0.6 (MAC), this result was in accordance with literatures (23-25). 	
Minor REVISION comments		
Optional/General comments		

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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:

Name:	Belgin Akan
Department, University & Country	Health Sciences University Ankara City Hospital, Turkey