

Review Form 1.6

Journal Name:	Journal of Pharmaceutical Research International
Manuscript Number:	Ms_JPRI_76602
Title of the Manuscript:	CASE REPORT ON CEREBRAL VENOUS SINUS THROMBOSIS
Type of the Article	Case study

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:

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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	<ul style="list-style-type: none">- Abstract/Introduction: please use transverse instead of cross- case presentation: what do you refer to by stating "8 intermittent"?- Please carefully revise/spell-check the manuscript (e.g. seizures, mints)- although you present the case, you do not describe any diagnosis of CVST-Please provide a reference for the incidence- order of the doctor to take lesion – what do you mean by that?- Levpril, lesion. Levpele, lesion. Emset, lesion. Optinewon, lesion – What are you referring to?-What is a normal flow vacuum?-Please provide a list of non-standard abbreviations-Please have the manuscript proofread by a native speaker- please provide the medication instead of the brand name-Please include Stam et al NEJM for your list of references	
Minor REVISION comments		
Optional/General 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:

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