



**SDI Review Form 1.6**

Journal Name:	<a href="#">Asian Oncology Research Journal</a>
Manuscript Number:	<b>Ms_AORJ_39053</b>
Title of the Manuscript:	<b>ORAL MALIGNANT MELANOMA-A REPORT OF CASE AND REVIEW OF LITERATURE</b>
Type of the Article	<b>Case study</b>

**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**

	<b>Reviewer's comment</b>	<b>Author's comment</b> (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</b> REVISION comments	<p>47-54 -- Histological evidence is not convincing enough to call this lesion as an oral malignant melanoma. Presence of atypical melanocytes alone does not qualify to diagnose as oral melanoma. There is no mention of any IHC being done. S100, MelanA, HMB 45 are usually done to confirm the diagnosis of melanoma.</p> <p><b>If not IHC is done or not available, this manuscript is not eligible for publication as the diagnosis of the patient is based on pathology.</b></p> <p>Pathologic images (Microscopy / IHC photomicrographs) need to be a part of the manuscript.</p> <p>114-118 -- Greens criteria – No mention in clinical examination part that the other parts of body did not show any pigmented patches and that you have ruled out uveal or conjunctival melanoma to call this palatal lesion as primary melanoma. No mention about whether junctional activity is seen in the oral mucosa which is a component of Greens criteria.</p> <p>30- 46 -- 1. Clinical photograph of the lesion would be necessary 2. Clinical examination does not mention about presence or absence of neck nodes which is an important prognostic factor for treatment.</p> <p><b>Ethical issues: No statement made in the manuscript that the author has obtained consent from the patient to publish his case</b></p>	
<b>Minor</b> REVISION comments	<p>If a table mentioning the treatment options available for the oral malignant melanoma is made, it would make the manuscript worth reading</p>	
<b>Optional/General</b> comments	<p>Please bring out in the paper that Primary mucosal melanomas share histological and immunohistochemical features with cutaneous melanomas, but differ in terms of risk factors, aggressiveness, molecular profiles and staging criteria.</p> <p>Westbury classification is good clinical classification for staging and assessing prognosis in oral melanoma. (Westbury G. Malignant melanoma of skin. In: Lumley J, Cravin J, editors. Surgical Review. Vol. 1. London: Pitman Medical; 1979. pp. 24–36.)</p>	

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