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| Journal Name: | [**Journal of Scientific Research and Reports**](https://journaljsrr.com/index.php/JSRR) |
| Manuscript Number: | **Ms\_JSRR\_139388** |
| Title of the Manuscript: | **Surgical Resolution of Traumatic Ingluvies Fistula in a Pigeon** |
| Type of the Article | **Case report** |

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| PART 1: Comments | | |
|  | Reviewer’s comment **Artificial Intelligence (AI) generated or assisted review comments are strictly prohibited during peer review.** | **Author’s Feedback** (It is mandatory that authors should write his/her feedback here) |
| **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.** | **The manuscript presents a clear and concise case report detailing the surgical management of a crop fistula in a pigeon. It is clinically relevant and contributes useful insights to avian veterinary surgery, particularly in resource-limited settings. However, several points need revision and clarification to enhance the scientific quality and utility of the report.** |  |
| **Is the title of the article suitable?**  **(If not please suggest an alternative title)** | **The title is clear, but consider rephrasing for broader indexing and clarity:**  **Suggested title: "Surgical Management of a Traumatic Crop Fistula in a Pigeon (Columba livia domestica): A Case Report"** | Title is revised |
| 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. | **The abstract lacks sufficient detail on diagnostic confirmation and surgical technique.**  **Suggest briefly stating the outcome (e.g., “The bird recovered without complications.”)** | Abstract is revised |
| Is the manuscript scientifically, correct? Please write here. | Yes, the manuscript is scientifically correct overall, but it would benefit from improved clarity, detail, and standardization to meet higher scientific and publication standards.  Scientific Weaknesses to Improve:  Lack of specific clinical measurements (e.g., bird's weight, wound size).  No mention of fluid therapy, nutritional management, or wound monitoring, which are important in avian surgery.  Figures are not well-integrated or described in sufficient detail.  Absence of comparative analysis with similar cases in the discussion. | Revised as needful and recommended Body weight is mentioned  No fluid therapy was given as bird was active on presentation and multivitamin syrup is mentioned.  Figures are revised |
| **Are the references sufficient and recent? If you have suggestions of additional references, please mention them in the review form.** | The references in the manuscript are generally relevant and appropriate, covering important aspects such as avian crop anatomy, causes and management of crop fistulas, and avian surgical principles. However, they are not entirely sufficient and lack recent literature from the past five years, especially given advances in avian surgery, analgesia, and post-operative care.  Number of references: Adequate (12 total), but mostly between 2000–2017, with only one from 2020.  Anatomy and physiology of the crop — well covered.  Common causes of crop injuries — mentioned.  Surgical principles — referenced, but mostly from textbooks.  Lack of modern analgesia and anesthesia protocols, especially inhalational anesthesia in birds.  Few references to postoperative care, antibiotic stewardship, and case series or clinical studies.  Suggested Additional or More Recent References:  1. For updated avian surgical techniques:  Doneley, B., McLelland, D., & Cameron, M. (2018). Avian Medicine and Surgery in Practice: Companion and Aviary Birds. 2nd ed. CRC Press.  Offers updated approaches to crop surgeries and anesthetic monitoring.  2. On avian analgesia and anesthesia:  Paul-Murphy, J., et al. (2017). “Analgesia and anesthesia in birds.” Journal of Exotic Pet Medicine, 26(2), 108–121.  Useful for justifying drug use, dosing, and inhalant protocols.  3. On crop disorders and surgical cases:  Villaverde, C., et al. (2019). “Surgical correction of acquired crop fistula in psittacine birds: A retrospective study.” Journal of Avian Medicine and Surgery, 33(4), 341–348.  A modern case series relevant to this topic.  4. Antibiotic use guidance in avian species:  Tell, L. A., et al. (2021). “Antimicrobial use in birds.” Veterinary Clinics: Exotic Animal Practice, 24(2), 275–299.  Important for antibiotic choice justification and stewardship. |  |
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| Is the language/English quality of the article suitable for scholarly communications? | The language and English quality of the article is mostly understandable, but it is not fully suitable for scholarly communication without revision. While the manuscript conveys the intended meaning, several issues affect its professionalism and readability.  Strengths:  The structure follows a typical scientific format: Abstract, Introduction, Case Presentation, Discussion, Conclusion.  Basic terminology and surgical concepts are conveyed correctly.  Most sentences are grammatically correct at the basic level.  Issues Identified:  1. Repetitive sentence structure:  Many sentences begin with “The bird was...” or “The crop was...,” reducing readability.  Example:  “The bird was positioned in dorsal recumbency, and the surgical site was aseptically prepared...”  Could be improved for flow and variation.  2. Lack of scientific precision in phrasing:  Example:  “The affected area was painful on palpation, and visible discharge of feed material was noted.”  Could be: “Palpation elicited pain at the lesion site, with visible extravasation of ingesta.”  3. Colloquial expressions:  “...bird appeared alert but had not been eating...”  Use: “The pigeon was alert but exhibited anorexia.”  4. Ambiguity and missing details:  “...crop region with leakage of feed material from the neck...”  This could be clearer as: “...leakage of ingesta through a fistulous tract at the caudal cervical region...”  5. Minor grammatical and formatting inconsistencies:  “Cefpodoxime proxetil (15 mg/kg body weight), and the anti-inflammatory drug Meloxicam...”  No comma needed before "and."  Use of passive voice is frequent — acceptable in scientific writing, but excessive use reduces readability.  Suggested Improvements:  1. Original:  “Radiographic evaluation was performed to rule out any associated fractures.”  Improved:  “Survey radiographs were obtained to evaluate potential skeletal trauma.”  2.Original:  “The bird was positioned in dorsal recumbency...”  Improved:  “The pigeon was placed in dorsal recumbency under isoflurane anesthesia for surgical access.” |  |
| Optional/General comments |  |  |

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| **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)* | No issues |