

Review Form

PART I

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| Article Title: |
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| Reviewer's Name: (The reviewers' identities remain anonymous to author/s) |
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PART II

| Evaluation (Please assign the score for each item below) | |
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| 5=Excellent 4=Good 3=Average 2=Below Average 1=Poor n/a=Not Applicable | |
| Items | Grade |
| Overall evaluation on the paper | |
| 1. Contribution to existing knowledge | |
| 2. Novel ideas/concepts/techniques | |
| 3. Complete and accurate figures and tables | |
| 4. Appropriate formatting and structure | |
| 5. Readability | |
| 6. Correct analysis | |
| 7. Soundness of methodology | |
| 8. Evidence supports conclusion | |
| 9. Adequacy of literature review | |
| 10. Clear, concise and interesting writing | |
| ❖ Summary | |
| | |
| ❖ Strengths | |
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| ❖ Weaknesses |
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| ❖ Suggestions to Author/s |
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PART III

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| Recommend the appropriate section for this paper (Please mark “X” for appropriate option) |
| <input type="checkbox"/> Original Article |
| <input type="checkbox"/> Review Article |
| <input type="checkbox"/> Case Report |
| <input type="checkbox"/> Short Communication |
| <input type="checkbox"/> |

PART IV

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| Recommendation to Editor (Please mark “X” for appropriate option) |
| <input type="checkbox"/> Excellent, accept the submission (5) |
| <input type="checkbox"/> Good, accept the submission with minor revisions required (4) |
| <input type="checkbox"/> Acceptable, revisions required (3) |

Resubmit for review, major revisions required (2)

Decline the submission (1)