

ESPS Peer-review Report**Name of Journal:** World Journal of Radiology**ESPS Manuscript NO:** 10535**Title:** Bilateral Squamosal Suture Synostosis: A rare form of isolated craniosynostosis in Crouzon Syndrome**Reviewer code:** 00742049**Science editor:** Ling-Ling Wen**Date sent for review:** 2014-04-06 10:33**Date reviewed:** 2014-04-29 14:36

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of	<input type="checkbox"/> No records	
<input type="checkbox"/> Grade D (Fair)	language polishing	BPG Search:	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

This is a simple case report on a young patient with Crouzon syndrome. It is concise, well written and well illustrated. To make this report more interesting I'd suggest the authors to elaborate more on the differential diagnosis with other craniosynostosis syndromes such as Apert's syndrome. For example, what are the features in common, and what features could be used to differentiate them, etc.

ESPS Peer-review Report**Name of Journal:** World Journal of Radiology**ESPS Manuscript NO:** 10535**Title:** Bilateral Squamosal Suture Synostosis: A rare form of isolated craniosynostosis in Crouzon Syndrome**Reviewer code:** 00724250**Science editor:** Ling-Ling Wen**Date sent for review:** 2014-04-06 10:33**Date reviewed:** 2014-05-03 19:11

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

Interesting article on the scientific and practical level. Text well wrote and easily comprehensible with clear figures, nevertheless some modifications and corrections will be desirable to reconsider final work: 1- The introduction is a little long, you have to remove a paragraph of etiologies and genetic mutations and to replace it in the discussion 2- There is no interest of cerebral MRI? (in the report case) 3- In the figure 3: you must show the region of squamous suture by arrow! 4- It's important to make a diagnosis but also to treat the patient. She is undergo surgical correction of the bilateral squamosal synostosis, which one? What is evolution and follow up? 5- Only squamosal synostosis needs surgical treatment! What about crouzon syndrome