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Book Name:	Medicine and Medical Research: New Perspectives
Manuscript Number:	Ms_BPR_2130
Title of the Manuscript:	Jejunal diverticular perforation in an acute abdomen: A case report
Type of the Article	Book Chapter

PART 1: Review Comments

Compulsory REVISION comments	Reviewer's comment	Author's Feedback <i>(Please correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</i>
Please write a few sentences regarding the importance of this manuscript for the scientific community. Why do you like (or dislike) this manuscript? A minimum of 3-4 sentences may be required for this part.		
Is the title of the article suitable? (If not please suggest an alternative title)		
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.		
Are subsections and structure of the manuscript appropriate?		
Please write a few sentences regarding the scientific correctness of this manuscript. Why do you think that this manuscript is scientifically robust and technically sound? A minimum of 3-4 sentences may be required for this part.		
Are the references sufficient and recent? If you have suggestions of additional references, please mention them in the review form. :-		

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<p>Minor REVISION comments</p> <p>Is the language/English quality of the article suitable for scholarly communications?</p>		
<p>Optional/Generalcomments</p>	<p>REVIEW The authors presented a case report of jejunal diverticular perforation in an acute abdomen. Overall, the case report was well-written. Abstract can be further summarized into a more concise manner i.e. "The patient presented with complaints of generalized abdominal pain associated with abdominal distension, constipation, and vomiting. Generalized abdominal tenderness, guarding, and rigidity were present", can be summarized into acute abdomen with signs of peritonism In the introduction part, please correct the reference [2] as below: Patients with JID also frequently have other coexisting gastrointestinal diverticula, including those found in the colon, duodenum, oesophagus, and stomach, highlighting a potential common aetiology. About 40% of cases are asymptomatic while the symptoms are mostly non-specific and cannot lead to a conclusive diagnosis [2]. Further history is required, is there any medical history or comorbid conditions? Provide the vital signs if possible, what was the degree of dehydration? Any reason why a CT scan was not performed? It is a more superior imaging modality. IV – change to intravenous What are the broad-spectrum antibiotics? – specify what agent, dose Need to mentioned important lab investigations, blood cultures are very important – especially Salmonella which is well-known to cause GI perforation The histopathological findings need to be more detailed: any evidence of malignancy or infection need to be mentioned Discussion Please add in more discussion related to infectious causes of GI perforation Invasive Salmonella Enteritidis infection has been reported to cause colonic perforation. Cite: Chang CY, Gan YL, Lio JY, Radhakrishnan AP. Invasive salmonella enteritidis infection complicated by colonic perforations and pancytopenia: A case report. Med J Malaysia. 2022;77(2):264-266.</p>	

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)
<p>Are there ethical issues in this manuscript?</p>	<p><i>(If yes, Kindly please write down the ethical issues here in details)</i></p>	

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