

REVIEWER'S REPORT

Manuscript No.: IJAR-53482

Date: 22.08.2025

Title: A Tale of Migrating Foreign Body A case report

Recommendation:

Accept as it is

Accept after minor revision

Accept after major revision

Do not accept (*Reasons below*)

Rating	Excel.	Good	Fair	Poor
Originality		✓		
Techn. Quality		✓		
Clarity			✓	
Significance		✓		

Reviewer Name: Dr. Divyaparvathy J

Reviewer's Comment:

This is a high-quality case report that provides a significant clinical lesson on the importance of advanced imaging for persistent symptoms, even after a negative initial workup. The rare nature of the case makes it a valuable contribution to the medical literature.

Detailed Reviewer's Report

1. This case report presents a well-paced introduction. The opening with Aesop's fable is a captivating.
2. The case report has a clear case presentation. It is well-structured and easy to follow, detailing the patient's journey from initial symptoms to surgical resolution.

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- 3.** The article provides a thorough history, including the patient's initial attempt to dislodge the bone, which adds an important clinical detail.
- 4.** It correctly highlights the limitations of X-rays and underscores the critical role of a Contrast-Enhanced CT scan as the definitive diagnostic tool, which is a key learning point.
- 5.** The surgical approach, including the incision and identification of the abscess and foreign body, is described clearly, providing valuable information for other surgeons.
- 6.** The discussion section effectively contextualizes the case by referencing similar rare occurrences in the medical literature.
- 7.** There appears to be a mismatch between the in-text citations and the reference list. For example, citation (3) in the text refers to Jemerin and Aronoff, but the reference list links to a different author (Das et al.). This needs to be corrected.
- 8.** Some sentences could be made more direct. The conclusion's "needle in a haystack" analogy is a memorable and fitting summary of the diagnostic and therapeutic challenge.