

REVIEWER'S REPORT

Manuscript No.: IJAR-55135

Title: A DIAGNOSTIC DILEMMA OF JUVENILE OSSIFYING FIBROMA IN A PEDIATRIC PATIENT Â– A CASE REPORT

Recommendation:

Accept as it is

Accept after minor revision.....Y.....

Accept after major revision

Do not accept (*Reasons below*)

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

Reviewer Name: Mr. Shashi Prakash

Detailed Reviewer's Report

The current case report represents a rare case of a trabecular juvenile ossifying fibroma in a young child and has emphasized the diagnostic complexities and importance of radiographic–histopathologic correlation. This manuscript has focused on the differential diagnosis of fibro-osseous lesions and early detection with long-term follow-up. It provides valuable clinical insight into pediatric JOF affecting the mandible.

The title is appropriate, concise, and reflects the clinical value of the case.

The abstract is informative. The “Introduction–Case–Discussion” structure is there but needs smoothing. Keywords must be in standard MeSH format.

Introduction

The background is adequate in the introduction. More clearly focus on differentiating JOF from other fibro-osseous lesions with updated references.

Case Report

The clinical description is detailed and structured. The radiographic descriptions are strong but should be summarized more concisely. Consider reorganizing into subsections: Clinical findings, Radiographic findings, Histopathology, Diagnosis and Management Plan–these will make the section clear and understandable. Histological features are well described but contain some long run-on sentences. Descriptions of osteoid patterns and features of stroma should be clarified to avoid ambiguity. All the diagnostic terminologies should be unified to conform to the current WHO classifications. A short differential diagnosis listing, such as fibrous dysplasia, osteosarcoma, and chronic osteomyelitis, would add scientific weight.

The discussion is comprehensive and encompasses good literature integration; however, it is somewhat too long and repetitive. Some sentences are quite long and could be restructured for better clarity.

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Suggest focusing on how the case compares to classic presentations of JOF, highlighting both diagnostic pitfalls and clinical relevance. Avoid redundancy and verify the epidemiology statements for accuracy.

The conclusion is relevant but includes repetition of the previous sections. Should have more focus on the clinical message, such as early diagnosis, histopathological confirmation, and long-term follow-up to prevent recurrence. It might be useful to mention also the need for a multidisciplinary approach: coordination between pedodontics, oral surgery, and pathology.