ISSN NO. 2320-5407

ISSN(O): 2320-5407 | ISSN(P): 3107-4928

International Journal of Advanced Research

Publisher's Name: Jana Publication and Research LLP

www.journalijar.com

REVIEWER'S REPORT

Manuscript No.: IJAR-59096

Title: Silent Chest, Loud Shoulder: Acute Myopericarditis Presenting as Isolated Right Scapular Pain.

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 S. K. Nath

Detailed Reviewer's Report

Strength of the study:

- Interesting and clinically relevant case presentation
- Unusual presentation is clearly described
- Clinical history and investigations are well documented
- ECG, laboratory and imaging findings are presented
- Cardiac MRI helped establish the diagnosis
- Differential diagnoses were appropriately considered
- Patient treatment and clinical course are reported
- Written consent for publication is clearly stated
- Limitations are acknowledged

Weakness of the study:

- It is a single case report
- Infectious cause of myocarditis was not established
- Endomyocardial biopsy was not performed
- Quantitative CMR mapping details are incomplete
- Follow up is relatively short
- Causal relation between effusion and scapular pain remains uncertain
- Some discussion statements are broader than the case evidence
- Grammar and table formatting need minor editing

Reviewers Comments: The manuscript presents an interesting and uncommon case of acute myopericarditis presenting mainly as isolated right scapular pain. The clinical history, ECG findings, laboratory investigations, coronary angiography and cardiac MRI are clearly described and provide a reasonable basis for the diagnosis. Written informed consent for publication is appropriately reported. The authors also acknowledge important limitations, including absence of endomyocardial biopsy, incomplete CMR mapping information and short follow up. The case has educational value because atypical pain may create diagnostic difficulty. However, the discussion should avoid suggesting a definite causal relationship between the small pericardial effusion and scapular pain. The statement regarding no previously published similar case should also be supported by a more systematic literature search. Grammar, spacing, table presentation and sentence construction require minor editing. Overall, this is a well presented case report with a useful clinical message and can be considered after minor revision.

Previously Published anywhere/Plagiarism check: An exact title search did not identify the same publication. Related reports describe myocarditis or pericarditis with shoulder or scapular pain, but the present case appears to have a distinct presentation. A formal similarity check is recommended before publication.