**REVIEW**

Journal name - **Endovascular Neuroradiology**

Let us inform you that the editors have received a manuscript that is part of your area of expertise and knowledge. We ask you to familiarize yourself with the work and provide us with comments on particular aspects of this work in accordance with the points below.

Title of the manuscript:

Manuscript number:

Reviewer Number:

Latest review period:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (please return the review up to the specified date)

1. **Conducting an assessment of the following important manuscript parameters:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Parameter** | **perfectly** | **good** | **satisfactory** | **unsatisfactory (bad)** |
| Relevance and originality |  |  |  |  |
| Clarity and style of material presentation |  |  |  |  |
| Level of analysis and evidence |  |  |  |  |
| Relevance, novelty and significance of the results |  |  |  |  |
| Ethical Considerations |  |  |  |  |
| References |  |  |  |  |
| Literacy |  |  |  |  |

**2.** **Comments according to the evaluation of the above parameters**

1. Indicate general comments or any suggestions or remarks, if your grade is REPFECTLY or GOOD.

2. Give all detail comments for each item, if your graded is SATISFACTORY or UNSATISFACTORY (BAD).

**3. Conclusion on the manuscript**

 The manuscript can be accepted for publication without modification

 The manuscript can be accepted for publication with minor changes or corrections.

 The manuscript can be accepted for publication after significant changes, revisions, additions, and re-reviews.

 The manuscript can not be accepted for publication (refusal) - the reason for the spin to the publication is indicated.

**Signature of the reviewer**