

---

## Peer Review File

Article information: <https://dx.doi.org/10.21037/fomm-22-44>

### **Reviewer A**

The authors reported a rare case of chronic osteomyelitis of the maxilla. Since the maxillary osteomyelitis presents a rare nature in its prevalence, such report would have clinical significance.

However, the case in the study seems just odontogenic infection. With a case presentation and pictures authors provided, just palatal fistula due to the apical periodontitis of palatal root of maxillary first molar can be inferred.

Please provide the other clinical information including 3-dimensional CT and/or bone scintigraphy to substantiate.

Thank you for your expert's assessment, in the version after revision new CT with more clear images were presented (figures 4 and 5). Following case, present a clinical case of chronic osteomyelitis that has odontogenic origin, after the causative tooth extraction a big alveolar bone sequestrum was excavated also a complete sequestration of cortical vestibular lamina was presented during the oral cavity examination and on CT images (Figures 2,4,5,6).

### **Reviewer B**

The authors present one case of odontogenic osteomyelitis of the jaw in a healthy young male. While this clinical entity is not rare, it is uncommon enough to be of interest to the medical public. The history of the case is very well documented, and images show the treatment step by step.

However, this paper has many flaws that must be addressed.

Thank you so much for your reply.

Style and grammar need revising.

Style and grammatical mistakes were revised and corrected in the whole manuscript

Many claims in both the introduction and discussion need references to put them in perspective with current literature.

Missing references to statements were added during the revision

The abstract is not structured as per the instructions of the journal.

The abstract was structured and rewritten based on CARE structure and Submission Checklist for Authors

---

Keywords are missing.

Keywords were added

A conclusion or a closing thought with a takeaway message is missing from the main body of the article.

The conclusion was added

The conflict of interest statement is missing.

The conflict of interest statement and Conflict of Interest (COI) Form a were added.

References are not formatted according to the journal instructions.

References were formatted according to the journal instructions.

Did the study receive approval from the institutional ethics committee and the written consent of the patient?

Statement about approval from the institutional ethics committee was added to the manuscript.

Copy of the written consent of the patient was also submitted to an editor together with other documents

Authors should also make a stronger point of any novel treatment/presentation/progression in this case which warrant a publication of a case report.

Statements about strong points of case report were added to the conclusions and discussion part.