ESCMID’s journal *Clinical Microbiology and Infections* is publishing short portraits of some of its top reviewers. Meet Onya Opota from the Institute of Microbiology at the University Hospital of Lausanne in Switzerland.

**What is your stage of career?**

After a PhD in Life Sciences I did a Postdoc at the Global Health Institute of the Federal Polytechnic School of Lausanne focusing on the determinant of bacterial virulence. I have recently obtained a professional clinical microbiologist specialization qualification and act as an assistant laboratory manager in the laboratory of diagnosis within the Institute of Microbiology at the University Hospital of Lausanne (Lausanne, Switzerland).

**What is your main clinical work?**

As a clinical microbiologist, my main clinical work is focused on the daily diagnosis of microbial infection. Next to the conventional methods (culture-based methods and serology), I have expertise in molecular diagnosis and in the diagnosis of mycobacterial infections. I am also involved in the development of accredited next-generation sequencing methods (genomic/meta-genomic) for microbial infection diagnostics.

**Which area of research are you engaged in?**

A lot of my research activities are in the domain of clinical microbiology, namely molecular diagnostics, genomic and metagenomics and mycobacterial infections. The aim of my research is to improve and accelerate the detection of etiologic agents of infection and obtaining rapid indication of the antibiotic susceptibility profile.

**What makes a good peer review?**

A good review should be rapid, constructive and must contain sufficient suggestions to permit the authors to improve their manuscript. Of course, the reviewer should be a person of legitimate experience in the appropriate field able to address the novelty and the robustness of the data. However, I believe that they must be different type of reviewers. For instance, some reviewers might be highly specialized in a defined research area whilst others might have a broader profile; I believe that I would belong to the second category here. The balance between these two profiles of experts could be associated with a good review. I also believe that in addition to their scientific skills, peer reviewers should have an immense scientific curiosity that peer-reviewing can partially nurture.

**What makes a bad peer review?**

As with many authors, I feel that the reviewing process should not be too long. However, as a reviewer, I know that the reviewing process is demanding and sometimes it can be difficult to respect the editor’s deadline. Of course, a reviewer should try to avoid any conflict of interest and should act in their domain of expertise; this might be obvious but I now and then we will see a reviewer that apparently did not have correctly read the manuscript or understood the aim of it.

**What are some suggestions you have for the CMI?**

A challenge for CMI is to identify the novelty that will finally impact on the scientific community or clinical practice.