

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 36759

**Title:** Split-dose Bowel Preparation Improves Gastroenterologists' adherence to National Colorectal Cancer Screening and Surveillance Guidelines

**Reviewer's code:** 02953369

**Reviewer's country:** United States

**Science editor:** Ze-Mao Gong

**Date sent for review:** 2017-11-04

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**Review time:** 12 Days

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

## COMMENTS TO AUTHORS

This is a retrospective study looking at the impact of split-dose bowel preparation regimen on endoscopists' compliance with guideline recommendations for timing of repeat colonoscopy in patients with normal colonoscopy or 1-2 small polyps (<10mm). 4225 patients were included in the study, of which 1,987 patients were prior to the institution of split dose bowel preparation (in 2009), and 2,238 were after the institution of split dose bowel preparation (in 2011). The authors conclude that Split-dose bowel regimen increases endoscopists' compliance to guidelines in average risk patients with normal colonoscopy or 1-2 small polyps. MAJOR POINTS: 1. The authors have not reported if the "same" group of physicians were involved in the 2009 and 2011 colonoscopies. While some physicians may adhere to the guidelines even for "fair prep", others won't. So, if the 2009 and 2011 colonoscopies were performed by different



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physicians, the difference could be attributed, at least partly to the difference in physician preferences. 2. The main reason for increased physician compliance to guidelines was more patients with split prep had "excellent" or "adequate" prep. This should be mentioned in the abstract and if possible, in the title. MINOR POINT: 1. The authors have mentioned in the discussion, that the preparation type was limited to medical records. They should further clarify this that actually some patients who were prescribed split prep may not have actually taken it.

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**Manuscript NO:** 36759

**Title:** Split-dose Bowel Preparation Improves Gastroenterologists' adherence to National Colorectal Cancer Screening and Surveillance Guidelines

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<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

## COMMENTS TO AUTHORS

This is an interesting and well written retrospective study on the effect of transition to split-dose bowel regimen on endoscopists' compliance to guidelines. The authors are experienced in this area and have previously published evidence supporting the quality of the preparation as the strongest determinant of lack of adherence to guidelines post screening colonoscopy. Minor comment: delete the second "were" in the last sentence of the first paragraph in the introduction section