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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 65932

Title: Does delaying ureteral stent placement lead to higher rates of preoperative acute

pyelonephritis during pregnancy?

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05384570 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Malaysia

Author's Country/Territory: China

Manuscript submission date: 2021-05-23

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-05-24 03:12

Reviewer performed review: 2021-05-30 11:59

Review time: 6 Days and 8 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements | Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

1. "The main reasons of renal colic in pregnancy are urinary stones and hydronephrosis". Please explain on the pathophysiology the development of urinary stones and hydronephrosis in pregnancy 2. "Clinical features associated with acute pyelonephritis during pregnancy include asymptomatic bacteriuria[5], age younger than 20, childbirth, smoking, late diagnosis and treatment, sickle cell traits and prior (non-gestational) diabetes, asymptomatic bacteriuria[6-8]." These are the risk factors not clinical features. Please provide the clinical features. 3. Conservative treatment is effective for 70-80% of renal colic during pregnancy. Please explain on the conservative treatment. 4. Authors mentioned a few diagnostic criteria for renal colic and acute pyelonepheritis. Does all the patients met all the criteria to be included or there were certain criteria need to be met in order to be included in the studies i.e. symptoms, labs or imaging. 5. Please elaborate on the preoperative fetal complications i.e. what are those complications? 6. It will be helpful to include a graph for Table 4 and 5 to compare the outcome side by side. 6. Please review the article for grammatical errors.



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RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 65932

Title: Does delaying ureteral stent placement lead to higher rates of preoperative acute

pyelonephritis during pregnancy?

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05384570 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Malaysia

Author's Country/Territory: China

Manuscript submission date: 2021-05-23

Reviewer chosen by: Ze-Mao Gong

Reviewer accepted review: 2021-07-09 05:06

Reviewer performed review: 2021-07-10 10:07

Review time: 1 Day and 5 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous



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Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors have adequately addressed the suggestions by the reviewer. However, the titles of the tables require minor editing: (1) Table 1 Patient Characteristics Associated With Delayed TTU - Patient Characteristics Associated With Early and Delayed TTU. The table show characteristics of both group of patients. (2) Table 4 Comparison of Outcomes in TTU Patients Before and After Surgery. TTU patients should be replaced with renal colic patients. Before TTU and after TTU in the table should be replaced with before surgery and after surgery.