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## PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 68920

Title: Nomogram for predicting chylous ascites after right colectomy

Reviewer's code: 05798357

**Position:** Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: China

Manuscript submission date: 2021-06-08

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-06-12 23:49

Reviewer performed review: 2021-06-21 06:19

**Review time:** 8 Days and 6 Hours

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	<ul> <li>[ ] Grade A: Priority publishing [Y] Grade B: Minor language polishing</li> <li>[ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection</li> </ul>
Conclusion	[Y] Accept (High priority) [] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No



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## SPECIFIC COMMENTS TO AUTHORS

This is a very interesting article about chylous ascites following after right hemicolectomy. The whole manuscript focuses on the impact of right hemicolectomy on the lymphatic system. The purpose of the study is clear, the method is reasonable, and the discussion part is coherent and detailed. It reflects the incidence and possible risk factors of chyloperitoneum caused by surgery, and establishes a prediction model. Although the model only have medium prediction ability, it has certain clinical significance. I would like to focus on whether the 516 patients included in this article refer to all the number of right hemicolectomy cases during the study period? Is it not stated here for all surgical patients? Is there any selective bias?