

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 68922

**Title:** Massive hemothorax due to intercostal arterial bleeding after percutaneous catheter removal in a multiple-trauma patient: A case report

**Reviewer's code:** 05428956

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Chairman, Chief Physician, Consultant Physician-Scientist, Director, Professor

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** South Korea

**Manuscript submission date:** 2021-06-14

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-06-15 08:09

**Reviewer performed review:** 2021-06-15 14:18

**Review time:** 6 Hours

|                           |   |
|---------------------------|---|
| <b>Scientific quality</b> | <input checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good<br><input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish            |
| <b>Language quality</b>   | <input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing<br><input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection |
| <b>Conclusion</b>         | <input checked="" type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority)<br><input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection             |
| <b>Re-review</b>          | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
| <b>Peer-reviewer</b>      | Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous   |



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statements

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

#### **SPECIFIC COMMENTS TO AUTHORS**

This report describes a 59-year-old woman with intercostal arterial bleeding occurring immediately after percutaneous catheter removal, which is a rare and life-threatening complication after catheter removal. Early diagnosis is crucial clinically in order to give treatment immediately for intercostal arterial bleeding control, so as to improve prognosis. This manuscript has met the basic publishment requiement of the journal. It would be better if the authors make an advice for important diagnostic application of using Color Doppler Flow Imaging(CDFI) Ultrasound in conclusion paragraph.