

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 74925

Title: Delayed diagnosis of arytenoid cartilage dislocation after tracheal intubation in the intensive care unit: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06245843

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Ethiopia

Author's Country/Territory: China

Manuscript submission date: 2022-01-11

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-01-13 11:34

Reviewer performed review: 2022-01-13 15:53

Review time: 4 Hours

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 Grade E: Do not publish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

Peer-reviewer statements	Peer-Review: [<input type="checkbox"/>] Anonymous [<input checked="" type="checkbox"/>] Onymous
	Conflicts-of-Interest: [<input type="checkbox"/>] Yes [<input checked="" type="checkbox"/>] No

SPECIFIC COMMENTS TO AUTHORS

I have seen a case report entitled "Delayed diagnosis of arytenoid cartilage dislocation after tracheal intubation in the intensive care unit: A case report". The case report seems reported with concise language and grammar, except only few. The authors have to address the following issues: 1. State standard practice to intubation and extubation of trachea with scientifically tested evidences. 2. The authors final diagnosis was that "endotracheal intubation causes the dislocation of the left arytenoid cartilage, if so it was a poor practice and unethical to cause significant harm on patients by using 7.5mm endotracheal tube inserted into the trachea of 20-years old female (potentially the size was large for age and sex) for 13days. 3. Why not the tube was changed for those procedures like lumbar and laparotomy surgeries, the former procedure is most likely done in prone position. This may be a cause of CAJ dislocation if the tube was stayed for longer. 4. The authors said that "Definitive diagnosis was made at the 15th day after extubation. After extubation, the patient remained in a state of sedation and analgesia and could not communicate effectively. After 10 days, hoarseness and coughing with liquids were observed. We considered these symptoms due to a common laryngeal edema after tracheal intubation". The coherence is very important, with time from of a case report, the 10th day event should be reported prior to the 15th day event.

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Title: Delayed diagnosis of arytenoid cartilage dislocation after tracheal intubation in the intensive care unit: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06246948

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: China

Manuscript submission date: 2022-01-11

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-01-12 10:20

Reviewer performed review: 2022-01-22 02:00

Review time: 9 Days and 15 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input checked="" type="checkbox"/> Grade D: Rejection
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Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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Peer-reviewer statements	Peer-Review: [<input checked="" type="radio"/>] Anonymous [<input type="radio"/>] Onymous Conflicts-of-Interest: [<input type="radio"/>] Yes [<input checked="" type="radio"/>] No
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SPECIFIC COMMENTS TO AUTHORS

The author's article is very meaningful, arytenoid dislocation is a very rare and easily overlooked complication. It mostly occurs in general anesthesia intubation, tracheal intubation for too long, and neck trauma. In the past, there were many reports in otolaryngology, which were easily ignored by clinicians or anesthesiologists. The author found and timely treated arytenoid cartilage dislocation in the ICU, and achieved good therapeutic effects. These experiences are worth promoting to our peers. I need to thank the authors for their work. But some points are to be mentioned in the paper to improve the quality.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Title: Delayed diagnosis of arytenoid cartilage dislocation after tracheal intubation in the intensive care unit: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06246948

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: China

Manuscript submission date: 2022-01-11

Reviewer chosen by: Li-Li Wang

Reviewer accepted review: 2022-03-17 10:48

Reviewer performed review: 2022-03-17 11:40

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input checked="" type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Peer-reviewer	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous



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statements

Conflicts-of-Interest: [☐] Yes [☒] No

SPECIFIC COMMENTS TO AUTHORS

The author answered every question very well, and the idea of the article is clear. Many very good supplementary documents are also provided, and this medical record report gives us a clear understanding of the diagnosis and treatment process of this disease.