

PEER-REVIEW REPORT

Name of journal: *World Journal of Critical Care Medicine*

Manuscript NO: 84573

Title: Should we initiate vasopressors earlier in patients with septic shock: a mini systemic review

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02445547

Position: Associate Editor

Academic degree: DNB, FEBS, FICS, FRCS (Gen Surg), MBBS, MNAMS

Professional title: Associate Professor, Director, Surgeon, Surgical Oncologist

Reviewer's Country/Territory: Singapore

Author's Country/Territory: China

Manuscript submission date: 2023-03-20

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-05-06 13:35

Reviewer performed review: 2023-05-06 14:07

Review time: 1 Hour

	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C:
Scientific quality	Good
	[] Grade D: Fair [] Grade E: Do not publish
Novelty of this manuscript	 [] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair
this manuscript	[] Grade D: No creativity or innovation



Scientific significance of the conclusion in this manuscript	 [] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No scientific significance
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	[]Yes [Y]No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Dear Authors I apologise to accept the review. I realised that this is more of a critical care kind of paper and not much surgical critical care. This is largely outside my scope and i am unable to "undo" the review selection. So i shall only make brief comment and recommend as "good" so that i am not unfair to you. I shall also separately mention the same to editor too and he can activate another reviewer. 1. I find >10 grammar errors and sentence formation errors. 2. I do not see any mention on source control within your protocol of early vasopressor. 3. I also do not see interplay with early steroid or choice of fluid like 5% albumin etc. 4. The problems of early vasopressors in underfilled patient with myocardial ischaemia?



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Peer-review model: Single blind

Reviewer's code: 05080957

Position: Editorial Board

Academic degree: DNB, MBBS, MD

Professional title: Associate Professor

Reviewer's Country/Territory: India

Author's Country/Territory: China

Manuscript submission date: 2023-03-20

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-06-01 01:29

Reviewer performed review: 2023-06-05 08:35

Review time: 4 Days and 7 Hours

	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C:
Scientific quality	Good
	[] Grade D: Fair [] Grade E: Do not publish
Novelty of this manuscript	[Y] Grade A: Excellent [] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of this manuscript	 [] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No creativity or innovation



Scientific significance of the conclusion in this manuscript	 [] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No scientific significance
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) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
Re-review	[]Yes [Y]No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Greetings I read your manuscript with interest. The topic has clinical relevance. Systematic search strategy to formulate the evidence is a strength. Overall the manuscript is also well written. However, I would suggest a major revision to present the manuscript as per PRISMA guideline. Otherwise the study and content has no major limitations. Best of luck



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Title: Should we initiate vasopressors earlier in patients with septic shock: a mini systemic review

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03110530

Position: Editorial Board

Academic degree: FACE, FCCP, MD, PhD

Professional title: Associate Professor, Director, Staff Physician

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2023-03-20

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-06-01 11:42

Reviewer performed review: 2023-06-06 15:01

Review time: 5 Days and 3 Hours

	[] Grade A: Excellent [] Grade B: Very good [] Grade C:
Scientific quality	Good
	[] Grade D: Fair [Y] Grade E: Do not publish
Novelty of this manuscript	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of this manuscript	 Grade A: Excellent [] Grade B: Good [Y] Grade C: Fair Grade D: No creativity or innovation
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Scientific significance of the conclusion in this manuscript	[] Grade A: Excellent [] Grade B: Good [Y] Grade C: Fair [] Grade D: No scientific significance
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Conclusion	 [] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
Re-review	[]Yes [Y]No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The topic of early vasopressor initiation in septic shock is clinically relevant and understudied. A systematic review would be valuable for researchers and clinicians. However it is essential that systematic reviewers follow a standardized approach describing of why the review was done, how studies were identified and selected and what they found (such as characteristics of contributing studies and results of meta-analyses). Such a standardized approach is absent in the present study. I would encourage the authors to follow the Preferred Reporting Items for Systematic reviews and Meta-Analyses (PRISMA) guidelines and checklist for their study.