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## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 33025

**Title:** Appropriateness of the study of iron deficiency anemia prior to referral for small bowel evaluation at a tertiary center

**Reviewer's code:** 02953753

**Reviewer's country:** Turkey

**Science editor:** Yuan Qi

**Date sent for review:** 2017-02-16

**Date reviewed:** 2017-03-06

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

Anemia work up is a globally time and source consuming issue for gastroenterologists. The text and the given percentages are perhaps useful to create awareness on this issue.



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**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 33025

**Title:** Appropriateness of the study of iron deficiency anemia prior to referral for small bowel evaluation at a tertiary center

**Reviewer's code:** 02953209

**Reviewer's country:** Germany

**Science editor:** Yuan Qi

**Date sent for review:** 2017-02-16

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

Thank you for the opportunity to revise this interesting manuscript. It picks up a subject relevant for many specialties, mostly for gastroenterologists. There are some minor spelling mistakes and 1 or 2 sentences that are not quite clear in their meaning due to syntax errors, for example the following sentence: "On the other hand, this work has also important merits, namely it is real life study so, contrarily to previous data on this important topic, data here presented reflects real life practice." Another example: " ? patients performed EGD". It was certainly the physicians that performed the investigation. I think the otherwise well written paper will be easily adjusted accordingly. Please define the term " pre-referral study" better. Throughout the text, it seems to refer to all investigations including blood tests and Endoscopies. However, in table 5 it seems to exclude Endoscopies and CD- testing. Please clarify. I think that there is a fundamental question that needst to be discussed in the manuscript. For example, if the emergency departement refers an IDE patient explicitly for small bowel



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evaluation, it is up to the gastroenterology department to make sure that adequate studies are performed beforehand. Furthermore, the performing gastroenterologist should be addressed when Colonoscopy is performed without quality standards or EGD without CD and Hp- testing. This cannot be up to the referring cardiology department, the general practitioner or the emergency department. Are the referrals from other departments without proper EGD/ Colonoscopy etc. incorrect because they don't perform it themselves and might just have phrased the question/ the consult to your department wrongly!? EGD / Colonoscopy is an outsourced action performed by a specialist, namely the gastroenterologist. Without the performing physician thinking about indications and consequences, e.g. omitting to take specimens for Hp and CD testing, the actual problem lies within the non- existence of guidelines or a lack of adherence to these guidelines by the gastroenterologists. Thus, for example the sentence in the "Core Tip": "Better communication and definition of referral protocols between the different specialties are required to enable patients to be promptly and correctly managed." would then be wrong and should be something like: "Better communication and standards for the definition and workup of IDE are required to enable patients to be promptly and correctly managed by the different gastroenterologists." What I am trying to say is that the problem does not lie within the referring department, but with the gastroenterologists who have performed the previous tests/ endoscopies. According to Table 5, the previous study/ EGD/ CD testing etc. only had a significant p-value for Colonoscopy. As a result, the other tests had no significant influence on whether or not the SB- Appropriate Preparation was not significantly connected to subsequent SB-evaluation. Please comment on these points. Table 1 Is "internal medicine" a general department compared to cardiology, nephrology, gastroenterology etc.? This should be commented on. Otherwise, I think that the manuscript would be suitable for publication after the mentioned revisions.