

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Cardiology

**Manuscript NO:** 62035

**Title:** Transcatheter pulmonic valve implantation: Techniques, current roles, and future implications

**Reviewer's code:** 03216061

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

**Author's Country/Territory:** United States

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**Reviewer chosen by:** Ya-Juan Ma

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 ] Grade E: Do not publish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

This is a well-written review article aimed to extensively describe the technique, current roles, and future implications of transcatheter pulmonic valve implantation. There are some issues that the authors should attend to: Abstract 1. Keywords: Please use keywords using MeSH (<http://www.ncbi.nlm.nih.gov/mesh>) terminology. Indication for intervention 1. For the indication of TPVI, it's better to add 'RV end diastolic volume > 2 times of LV end diastolic volume) for RV volume overloading criteria.