



## PEER-REVIEW REPORT

**Name of journal:** World Journal of Radiology

**Manuscript NO:** 63495

**Title:** Thoracic imaging outcomes in COVID-19 survivors

**Reviewer's code:** 05429717

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Doctor

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

**Author's Country/Territory:** Saudi Arabia

**Manuscript submission date:** 2021-01-28

**Reviewer chosen by:** Jin-Lei Wang

**Reviewer accepted review:** 2021-04-01 02:20

**Reviewer performed review:** 2021-04-01 04:50

**Review time:** 2 Hours

<b>Scientific quality</b>	<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 Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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

In this paper, various imaging techniques, including CXR, CT, LUS and MRI, have been reviewed in the follow up of “long COVID” patients. Generally, the topic is good and the language is acceptable. However, there still some issues needed to be resolved. First, several tables or figures are needed to conclude in the review. Second, authors not only reviewed the follow up and prognosis effectiveness in the use of these thoracic imaging, but also mentioned the diagnosis value of these techniques in COVID patients, which deviated from the topic. Thus, some more substances focused on “long COVID” are encouraged to be added.



### PEER-REVIEW REPORT

**Name of journal:** World Journal of Radiology

**Manuscript NO:** 63495

**Title:** Thoracic imaging outcomes in COVID-19 survivors

**Reviewer's code:** 05429312

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Associate Research Scientist

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

**Author's Country/Territory:** Saudi Arabia

**Manuscript submission date:** 2021-01-28

**Reviewer chosen by:** Jin-Lei Wang

**Reviewer accepted review:** 2021-04-01 00:17

**Reviewer performed review:** 2021-04-13 04:09

**Review time:** 12 Days and 3 Hours

<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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

The author reviewed the publication about "Thoracic Imaging Outcomes in COVID-19 Survivors". But the content was not focused on the effect of thoracic Imaging Outcomes on COVID-19. 1. The content on page 5 "Created in 1971, computed tomography (CT) scanners have revolutionised the many aspect of clinical practices and training (28). CT employs a rotating x-ray machine assisted by a computer programme to produce 3-D images of the internal organs, affording a relatively higher sensitivity, fast and detailed cross-sectional diagnostic images compared with the conventional superimposed, 2-D scans of the CXR. " should be deleted. 2. The content on page 6 "LUS is also relatively more accessible because of the inherent portability and bedside availability, making it a technique of choice where timely assessment of lung complication is needed especially in patients with severe or unstable health conditions (37)" was not focused on COVID-19. 3. The author should review the publications widely, and collect the data about the sensitivity and specificity, and make a meta-analyses.