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PEER-REVIEW REPORT

Name of journal: World Journal of Methodology

Manuscript NO: 64885

Title: Liver Transplant Allocation Policies and Outcomes in USA: A Comprehensive

Review

Reviewer's code: 03476715

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: China

Author's Country/Territory: United States

Manuscript submission date: 2021-02-24

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-02-25 11:46

Reviewer performed review: 2021-03-09 01:23

Review time: 11 Days and 13 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[Y] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[Y] Yes [] No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No



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SPECIFIC COMMENTS TO AUTHORS

The manuscript comprehensively introduced the liver transplant allocation policies and outcomes in USA, which is informative for the readers. It is more like an introductory article rather than a systematic review. Although there are some merits in the article, several minor issues should not be ignored. 1. How does the author know "Region redistricting was not implemented due to statistically insignificant change in waitlist survival." The source should be stated. 2. "The sequence of distribution is for candidates within a radius of 150 nautical miles from the donor hospital, then secondly for candidates within a radius of 150 nautical miles from the hospital and lastly for candidates within a radius of 500 nautical miles from the donor hospital [16]." It seems the distances would be a radius < 150 nautical miles, 150~ 500 nautical miles,> 500 nautical miles. 3. It would be helpful and ready to grasp the information in the manuscript if key outcome indices could be listed in a table.