

## PEER-REVIEW REPORT

Name of journal: World Journal of Orthopedics

Manuscript NO: 76080

Title: Association between tourniquet use and intraoperative blood loss during

below-knee amputation

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05329275 Position: Peer Reviewer Academic degree: MD

**Professional title:** Doctor

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

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

Manuscript submission date: 2022-02-28

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-03-09 10:14

Reviewer performed review: 2022-03-09 10:54

Review time: 1 Hour

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
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	[Y]Yes [ ]No



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7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA

**Telephone:** +1-925-399-1568 **E-mail:** bpgoffice@wjgnet.com

https://www.wjgnet.com

Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [ ] Yes [Y] No

#### SPECIFIC COMMENTS TO AUTHORS

Thank you for giving me the opportunity to review this work. The paper concer the use of the tourniquet in orthopedic patients undergoing amputation. The work is interested and provides clear guidance on the management of this type of patient / intervention. Unfortunately, however, I find some shortcomings in the study protocol. - Part of the patients underwent surgery due to an infection. Of what nature? Were they vascular or diabetic patients? - Why was the presence of peripheral vascular disease not taken into consideration? - Pharmacological therapies (especially anticoagulants and antiplatelet agents) why have they not been taken into consideration? - what are the variables used in the multivariate?



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Peer-review model: Single blind

Reviewer's code: 05571715 Position: Peer Reviewer Academic degree: MD, PhD

Professional title: Academic Fellow, Associate Chief Physician, Doctor, Surgeon

Reviewer's Country/Territory: China

Author's Country/Territory: United States

Manuscript submission date: 2022-02-28

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-03-20 01:22

Reviewer performed review: 2022-03-25 13:19

**Review time:** 5 Days and 11 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [ Y] Grade D: Fair [ ] Grade E: Do not publish
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	[Y]Yes []No



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Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [ ] Yes [Y] No

#### SPECIFIC COMMENTS TO AUTHORS

Thank you for the invitation! This study found that tourniquet use during BKA was associated with decreased calculated blood loss. However, the preoperative total blood volume is different with postoperative total blood volume in patients undergoing BKA. How did authors estimate the blood volume in amputated limb? Second, peri-operative total blood loss = intraoperative blood loss (visible) + postoperative hidden blood loss (invisible). To investigate the hidden blood loss seems to be more important in those patient population.



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Peer-review model: Single blind

Reviewer's code: 01467363 Position: Editorial Board Academic degree: MD, PhD

**Professional title:** Full Professor

Reviewer's Country/Territory: Slovenia

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

Manuscript submission date: 2022-02-28

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-03-20 14:15

Reviewer performed review: 2022-03-26 16:58

**Review time:** 6 Days and 2 Hours

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
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) [Y] Accept (General priority) [ ] Minor revision [ ] Major revision [ ] Rejection
Re-review	[ ]Yes [Y]No



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Peer-reviewer

Peer-Review: [Y] Anonymous [ ] Onymous

statements Conflicts-of-Interest: [ ] Yes [Y] No

#### SPECIFIC COMMENTS TO AUTHORS

Title accurately reflects the topic and content of the paper. Abstract: is appropriate, structured, 288 words. Key words: 4 key words, define the content of the paper. Core tip: is appropriate, 49 words. Introduction: is informative, 409 words, the reader is acquainted with the known facts about different surgical methods of limb amputations. The reader is reminded of paucity of literature describing the association between tourniquet use and blood loss during below knee amputation in orthopaedic populations. The primary and secondary goals of the study are clearly stated. Materials informative, 641 words, the methodology is accurately described, and methods: including patient selection, time period and calculation formulas. Statistical analysis is also recorded in detail. Results: informative, 336 words, the results are further presented in tables and figures (Fig. 1, 2, tables 1, 2 and additional supplemental table). The presentation of the results is transparent and clear. Discussion: interesting, 613 words. The discussion is clear, the authors provide answers to the questions posed by the research, but also point out some limitations in the interpretation of these results (academic center, small sample size,...) Conclusion: short, 90 words, the authors summarize the key findings of the presented research. The key message of the research is that tourniquet use during below knee amputation is associated with decreased calculated intraoperative blood loss and recommend this procedure. References: 16, time period 1962 (Surgery) - 2017 (World J Orthop 2017), references are appropriate. Conflict of interest: the authors declared no conflict of interest. Study ethics: the study was approved by the Institutional Review Board (STUDY00020406). Opinion of the reviewer The contribution is interesting, the content is clearly written. I suggest to



accept the manuscript after minor language corrections.