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PEER-REVIEW REPORT

Name of journal: World Journal of Critical Care Medicine

Manuscript NO: 81024

Title: Bedside ultrasonography of optic nerve sheath diameter for detection of raised

intracranial pressure in nontraumatic neuro-critically ill patients

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00504802 **Position:** Editorial Board

Academic degree: FACP, MD, PhD

Professional title: Professor

Reviewer's Country/Territory: United States

Author's Country/Territory: India

Manuscript submission date: 2022-11-04

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-11-11 14:29

Reviewer performed review: 2022-11-14 00:50

Review time: 2 Days and 10 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Judgment by peer reviewers	Does this manuscript meet the code of ethics standards? [J11] Yes [J10] No Does this manuscript have important novelty? [J21] Yes [J20] No Does this manuscript have important creativity or innovation?



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	[J31] Yes [J30] No
	Does this manuscript use reliable research methods?
	[J41] Yes [J40] No
	Are the manuscript-accompanying data and figures authentic?
	[J51] Yes [J50] No
	Does this manuscript make scientifically significant conclusions?
	[J61] Yes [J60] No
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)
	[Y] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Ultrasonography, including point-of-care US is 'coming-of-age' in ICUS on multiple sites. The discussed ONSD measurement likely to effective and suitable for serial measurements, offering relief form MRI/CT technologies - which represent significant disruption of ICU care, nursing time.... And expense/radiation load / contrast risk are the least concerns, in these vey ill subjects. Suggestions for improvement /question: GENERAL COMMENTS Could the Authors report on partial correlation of major positive results, not just the p values? It would be nice to know, whether any closer association persist between type of CNS lesion and ONSD ... I realize the numbers are small; but may be if just reporting on association between septic-medical scenario (~25% of the cohort) vs others... this may be relevant, as one would think optic nerve lesion more like to be detected in lesion of frontal brain compartment What is missing; serum



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Na+ (sodium) values. Many of these patients will receive medical therapy to address brain edema and such intervention may affect the relation hip between anatomic lesion vs degree of optic nerve edema. Similarly - how many of these patient had acute kidney injury (AKI); would also recommend reporting on serum creatinine values at the time of study's enrollment Discussion should be enriched by the following paper: [PMID: 31789653]; [PMID: 30848433] Improve Write-up: ABSTRACT: 1. "Raised ONSD was associated with lower age (p=0.007), poorer GCS (p=0.009) and greater need for surgical intervention (p=0.006)..." to "Raised ONSD was associated with younger age (p=0.007), lower GCS (p=0.009) and greater likelihood for surgical intervention (p=0.006) " [here, the partial correlate [r] values would be very helpful to show, as well) 2. "ONSD can be used as a screening a test to detect raised ICP in a medical ICU and can used as a trigger to initiate further management of raised ICP." - would tone this a little bit sown, as follow: "ONSD can be used as a screening a test to detect raised ICP in a medical ICU and future potential as threshold trigger to escalate management of raised ICP. " 3. Last sentence (" ") s supported only by literature review and I belive not the Authors' primary data. Thus I would eliminate this from the Abstract's Conclusion (from main paper, as well) MAIN Paper Methods: please list Ethic Committee approval number, for the record Results: for key results, beyond p values, report also partial correlatiosn, as well Minor comments: Sentence: "simple bedside test, which has a small learning curve, .." to: "simple bedside test, which has a rapid learning curve, ..."



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Academic degree: MCh, MDS

Professional title: Academic Fellow

Reviewer's Country/Territory: India

Author's Country/Territory: India

Manuscript submission date: 2022-11-04

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-11-18 01:03

Reviewer performed review: 2022-11-20 08:02

Review time: 2 Days and 6 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish
Judgment by peer reviewers	Does this manuscript meet the code of ethics standards? [J11] Yes [J10] No Does this manuscript have important novelty? [J21] Yes [J20] No Does this manuscript have important creativity or innovation?



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	[Y] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors deserve compliments for the conducted study. The materials and methods are well-written. I have few suggestions for the authors. 1. kindly check grammar and make the manuscript more fluent. 2. lots of passive voice statements. 3. kindly mention how was sample size calculated 4. Criteria for selecting 3mm distance from the optic disc is it universal?? 5. Diabetic status and its effect on ONSD? 6. the above points and their justifications and addition in the manuscript adds to the strength of the discussion.