

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Clinical Cases*

**Manuscript NO:** 85367

**Title:** Simple lateral elbow dislocation: A case report

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 05335774

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

**Author's Country/Territory:** Turkey

**Manuscript submission date:** 2023-04-25

**Reviewer chosen by:** Geng-Long Liu

**Reviewer accepted review:** 2023-07-09 07:48

**Reviewer performed review:** 2023-07-09 08:11

**Review time:** 1 Hour

Scientific quality	<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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input 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

## SPECIFIC COMMENTS TO AUTHORS

line 45: pronated forearm. She fell down while walking and was admitted to hospital in twenty line 48: There is no history since this was an emergent case. line 72: reduction under fluoroscopy. An assistant applied longitudinal traction to the humerus line 73: through the axilla, and the surgeon, while holding the forearm in supination, maneuvered it line 74: in the medial direction, as the assistant moved the humerus in the lateral direction. An line 76: flouroscopy. After reduction, both passive flexion and extension ranges of motion (ROM) of the line 99: USA), and the torn common extensor origin was sutured using non-absorbable sutures line 128: in a systematic review of 342 cases of complete elbow dislocations, only three lateral line 131: reported in our patient, so a detailed neurologic examination is necessary at the time of line 133: spontaneously once nerve compression is relieved by joint reduction. Radiological