

CHECKLIST OF RESPONSIBILITIES FOR SCIENTIFIC EDITORS

Manuscript page 1	number (Without Fig	gures):	43 Rate: 6.	2 CNY pe	r page
			Editing Fee:	266.6	CNY
Figure count:	Figure hand	ling time:_	min Rate:	1 CNY po	er min
			Editing	Fee:	CNY
XI	ML and PDF conver	ting time:	min_Rate:	1 CNY po	er min
			Editing	Fee:	CNY
		Manuso	cript word cou	nt: 7664	<u> </u>
		То	tal Editing Fee:	266.6	CNY
			Scientific E	ditor: <u>Ji-Ho</u>	ng Liu
I	Date of signature:	2023/09	<u>/18</u> (r	nonth/day	/year)

		Comments
Item No.	Specific items for verification	Yes=[Y]
		No= [N]
	General Information of the Manuscript	
1	Name of journal: World Journal of Nephrology	
	Manuscript NO.: 85930	
	Column: Systematic Reviews	
	Title: Heterogeneity in Cardiorenal Protection by SGLT2 Inhibitors	12/1
	in Heart Failure across the Ejection Fraction Strata: Systematic	[Y]
	Review & Meta-Analysis	
	Authors: Saeed Taheri	
	Reviewer code: 05315572	
	First decision: 2023-08-16 06:03	
2	Editorial Office's Comments	[Y]



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

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

https://www.wjgnet.com

Science Editor: The manuscript has been peer-reviewed, and it's ready for the first decision.

Company Editor-in-Chief: I have reviewed the Peer-Review Report, the full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Nephrology, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. However, the quality of the English language of the manuscript does not meet the requirements of the journal. Before final acceptance, the author(s) must provide the English Language Certificate issued by a professional English language editing company. Please visit the following website for the professional language editing companies recommend: https://www.wjgnet.com/bpg/gerinfo/240. Before acceptance, uniform presentation should be used for figures showing the same or similar contents; for example, "Figure 1 Pathological changes of atrophic gastritis after treatment. A: ...; B: ...; C: ...; D: ...; E: ...; F: ...; G: ...". Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor. In order to respect and protect the author's intellectual property rights and prevent others from misappropriating figures without the author's authorization or



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

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

https://www.wjgnet.com

abusing figures without indicating the source, we will indicate the author's copyright for figures originally generated by the author, and if the author has used a figure published elsewhere or that is copyrighted, the author needs to be authorized by the previous publisher or the copyright holder and/or indicate the reference source and copyrights. Please check and confirm whether the figures are original (i.e. generated de novo by the author(s) for this paper). If the picture is 'original', the author needs to add the following copyright information to the bottom right-hand side of the picture in PowerPoint (PPT): Copyright ©The Author(s) 2023. Authors are required to provide standard three-line tables, that is, only the top line, bottom line, and column line are displayed, while other table lines are hidden. The contents of each cell in the table should conform to the editing specifications, and the lines of each row or column of the table should be aligned. Do not use carriage returns or spaces to replace lines or vertical lines and do not segment cell content. Before final acceptance, when revising the manuscript, the author must supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript. To this end, authors are advised to apply a new tool, the RCA. RCA is an artificial intelligence technology-based open multidisciplinary citation analysis database. In it, upon obtaining search results from the keywords entered by the author, "Impact Index Per Article" under "Ranked by" should be selected to find the latest highlight articles,



	T	
	which can then be used to further improve an article under	
	preparation/peer-review/revision. Please visit our RCA database	
	for more information at:	
	https://www.referencecitationanalysis.com/.	
3	The fixed headings are copied.	[Y]
	The title concisely summarizes the main topic of the study and is	[Y]
	not too long (no more than 18 words). Words such as 'exploration',	
4	'research', 'analysis', 'observation', and 'investigation' are avoided.	
	The title does not start with 'The' and does not include any Arabic	
	numbers or uncommon abbreviations.	
5	A short running title is provided (no more than 6 words).	[Y]
	The authors' full family (sur)names and full/abbreviated first	[Y]
6	names are listed on the title page and are consistent with those	
	listed in the signed BPG Copyright License Agreement form.	
	The 'Author contributions' passage describes the specific	[Y]
	contribution(s) made by each author. The author's names are listed	
	in the following format: full family (sur)name followed by	
	abbreviated first and middles names.	
	e.g., "Wang CL and Liang L contributed equally to this work; Wang	
7	CL, Liang L, Fu JF, Zou CC, Hong F and Wu XM designed the	
	research study; Wang CL, Zou CC, Hong F and Wu XM performed	
	the research; Xue JZ and Lu JR contributed new reagents and	
	analytic tools; Wang CL, Liang L and Fu JF analyzed the data; and	
	Wang CL, Liang L and Fu JF wrote the manuscript. All authors	
	have read and approve the final manuscript."	
	The 'Supported by' statement describes the source(s) of financial	
8	support and includes the corresponding identification number(s)	[N]
	and program ID(s) if available, and contains no spelling errors.	



The 'Corresponding author' passage provides the corresponding author's full first and family (sur)names, abbreviated title (e.g., MD, PhD), affiliated institute's name and complete postal address (including zip code) and e-mail (written in all lowercase), and contains no spelling errors. The Manuscript Tracking information (i.e., Received, Peer review started, First decision, Revised, Accepted, Article in press, and Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors. The Abstract section is formatted according to the article-specific style (structured vs unstructured) and word count thresholds, as follows: Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).
PhD), affiliated institute's name and complete postal address (including zip code) and e-mail (written in all lowercase), and contains no spelling errors. The Manuscript Tracking information (i.e., Received, Peer review started, First decision, Revised, Accepted, Article in press, and Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors. The Abstract section is formatted according to the article-specific style (structured vs unstructured) and word count thresholds, as follows: Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26
(including zip code) and e-mail (written in all lowercase), and contains no spelling errors. The Manuscript Tracking information (i.e., Received, Peer review started, First decision, Revised, Accepted, Article in press, and Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors. The Abstract section is formatted according to the article-specific style (structured vs unstructured) and word count thresholds, as follows: Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26
The Manuscript Tracking information (<i>i.e.</i> , Received, Peer review started, First decision, Revised, Accepted, Article in press, and Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors. The Abstract section is formatted according to the article-specific style (structured vs unstructured) and word count thresholds, as follows: Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26
The Manuscript Tracking information (<i>i.e.</i> , Received, Peer review started, First decision, Revised, Accepted, Article in press, and Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors. The Abstract section is formatted according to the article-specific style (structured vs unstructured) and word count thresholds, as follows: Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26
started, First decision, Revised, Accepted, Article in press, and Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors. The Abstract section is formatted according to the article-specific style (structured vs unstructured) and word count thresholds, as follows: Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26
Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors. The Abstract section is formatted according to the article-specific style (structured vs unstructured) and word count thresholds, as follows: Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26
Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors. The Abstract section is formatted according to the article-specific style (structured vs unstructured) and word count thresholds, as follows: Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26
The Abstract section is formatted according to the article-specific style (structured vs unstructured) and word count thresholds, as follows: Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26
style (structured <i>vs</i> unstructured) and word count thresholds, as follows: Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26
follows: Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26
Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26
Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26
Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26
Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26
Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26
Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26
more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26
(no less than 120 words); and CONCLUSION (no more than 26
words).
The 'Key words' list provides 5-10 keywords that reflect the main [Y]
content of the study. The first letter of each keyword is capitalized,
and each keyword is separated by a semicolon.
The "citation" contains authors' names and manuscript title. The
name of the first author should be typed in bold letters; the family
(sur) name of all authors should be typed with the first letter
capitalized, followed by their abbreviated first and middle initials.
For example, an article by Jae Moon Yoon, Ki Young Son, Chun Sick



	Son KY, Eom CS, Durrance D, Park SM. Pre-existing diabetes	
	mellitus increases the risk of gastric cancer: A meta-analysis. World J	
	Gastroenterol 2019; In press	
	The 'Core tip' provides a summary (less than 100 words) of the	[Y]
14	study that outlines the most innovative and important arguments	
14	and core contents of the paper and will serve to effectively attract	
	readers.	
	The 'INTRODUCTION' section clearly describes the relevant	[Y]
	background information for the study. Only the most relevant and	
	current (within the past 5 years) literature is cited, with the	
	exception of rare instances of seminal literature citations. All	
	technical terms and/or abbreviations are explained and/or defined,	
15	with the full name of abbreviations given upon first appearance in	
	the text and the abbreviation presented in parentheses [i.e.,	
	"computed tomography (CT)"]. First-person pronouns (e.g., 'I',	
	'we') are used appropriately to clearly indicate the work performed	
	by the author(s). When weaknesses of previous studies are	
	described in the text to highlight the innovations related to the	
	current study, the information is presented carefully.	
	The 'MATERIALS AND METHODS' section clearly and accurately	[Y]
4.6	describes all materials and methods used to obtain the data	
16	presented in the article and is adequate for a reader to repeat the	
	study.	
	The 'RESULTS' section concisely describes the observational and	[Y]
	experimental results. Representative data and data that have	
	scientific significance are emphasized. Data is presented in either	
17	the text, a table or figure (<i>i.e.</i> , chart, diagram, graph or image), but is	
	not repeated among each. Information presented in the tables and	
	figures clearly describes the trends, meaning, and inferences.	
	Results described in textual form are accurate, concise and clear.	
	, , , , , , , , , , , , , , , , , , , ,	<u> </u>



	Statistical symbols are accurate. Statistical significance is expressed	[Y]
18	as ${}^{a}P$ < 0.05, ${}^{b}P$ < 0.01 (P > 0.05 usually does not need to be denoted).	
	If there are other series of <i>P</i> values, $^{c}P < 0.05$ and $^{d}P < 0.01$ are used,	
	and a third series of P values is expressed as $^{\rm e}P$ < 0.05 and $^{\rm f}P$ < 0.01.	
	Statistical data is expressed as mean \pm SD or mean \pm SE.	
	The 'DISCUSSION' section (1) describes the main purpose and	[Y]
	hypothesis of the study; (2) summarizes the most important results;	
	(3) illustrates and explains the results (but does not simply repeat	
10	the data) and draws conclusions or inferences based on the results;	
19	(4) points out the limitations of the study and their impact on the	
	results, as well as proposes further advice on future research	
	topic(s) or direction(s); and (5) describes the theoretical significance	
	and practical value of the findings.	
20	The 'ACKNOWLEDGEMENTS' section expresses gratitude to any	
	individuals or organizations for technical support (i.e., providing	
	instrumentation, equipment or experimental materials, and/or	fari.
20	assistance in experimental work), non-technical services (i.e., useful	[N]
	inspiration, suggestions, guidance, or review), and/or any other	
	auxiliary work.	
21	The 'ARTICLE HIGHLIGHTS' section provides comments for	[Y]
21	original articles in accordance with the specified format.	
22	The 'REFERENCES' section lists the references in the Vancouver	[Y]
	style. This style uses Arabic numeral in-text citations based on the	
	order of the first appearance of a source in the text. For citations	
	where the author's name is indicated in the text, a superscript	
	number should be placed following the name (i.e, "Pang et al"). For	
	citations where no author is indicated, a superscript number should	
	be placed at the end of the sentence. Respective examples are: "Ma ^[1]	
	reported", "Pan et al ^[2-5] indicated"; "PCR has a high	
	sensitivity ^[6,9] ." No superscript numbers are used when the	



	reference number is described in the text; for example, "The experimental method used has been described in reference [8]." The style of reference citations in tables is the same as that in the text (<i>e.g.</i> , Pan <i>et al</i> ^[2-5] , please see reference [8]).	
23	Journal references have been verified to ensure that there are no duplicate references and that the PMID numbers are correct. For references not yet included in PubMed: the name of Chinese journals is spelled out using Chinese Pinyin, with the first letter of each word capitalized (e.g., Shijie Huaren Xiaohua Zazhi); the name of journals in other languages are listed according to indexing information retrieved from Google. Book references are presented with all the information relevant to the electronic version.	[Y]
24	The number of cited references is appropriate for the article type, as follows: <u>Commentary:</u> no less than 50; <u>Review:</u> no less than 100; <u>Article:</u> no less than 30/26; <u>Case Report and Letter to the Editor:</u> no less than 1.	[Y]
25	The ethics-related statements are provided in accordance with the manuscript type (e.g., Manuscript NoInstitutional review board statement, Manuscript NoAnimal care and use statement, etc.).	[Y]
26	The names of the peer reviewers and the scientific editor are present at the end of the paper (<i>e.g.</i> , P-Reviewer: Hugot D S-Editor: Wang JL).	[Y]



	The order and numerical labeling of tables and figures is consistent	[Y]
	with their appearance and presentation in the text. Symbols in	
	tables (e.g., +, -, \times , \div , *) correctly correspond to the definitions in the	
27	footnotes. Only one legend is provided for each multi-panel figure	
	consisting of color graphs, black and white graphs, or line graphs	
	that depicts data of the same theme. For example: Figure 1	
	Pathological changes in atrophic gastritis tissue before and after	
	treatment. A:; B:; C:; D:; E:; F:	
	Split pictures include flow charts, line graphs, histograms, and	[Y]
28	graphs including text. Unsplit pictures include meta-analysis	
	diagrams, PCR amplification curves, and survival curves.	
20	The author(s) highlighted the changes made to the manuscript	[Y]
29	according to the peer-reviewers' comments.	
20	The responses to the peer-reviewers' comments are consistent with	[Y]
30	the changes made to the manuscript.	
	The revised manuscript is provided (file name: Manuscript	[Y]
	NoReview; <i>e.g.</i> , 870- Review).	
21	The letter of peer-reviewers' comments is provided (file name:	
31	Manuscript NoPeer-review(s); e.g., 870-Peer-review(s)).	
	The response letter is provided (file name: Manuscript	
	NoAnswering reviewers; e.g., 870-Answering reviewers).	
	The related ethics and relevant documents are provided, such as (1)	[Y]
32	Approved grant application form(s) or funding agency copy of any	
	approval document(s) (file name: Manuscript NoGrant application	
	form(s)); (2) Biostatistics review certificate (file name: Manuscript	
	NoBiostatistics statement); (3) Conflict-of-interest statement (file	
	name: Manuscript NoConflict-of-interest statement); (4) Clinical	
	trial registration statement (file name: Manuscript NoClinical trial	
	registration statement); (5) Institutional review board approval form	
	or document (file name: Manuscript NoInstitutional review board	



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

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

	,	
	statement); (6) Institutional animal care and use committee	
	approval form or document (file name: Manuscript	
	NoInstitutional animal care and use committee statement), and (7)	
	Signed informed consent form(s) or document(s) (file name:	
	Manuscript NoInformed consent statement).	
	All authors signed the BPG Copyright license agreement form (file	[Y]
33	name: Manuscript NoCopyright license agreement; e.g.,	
	870-Copyright license agreement).	
	The language certificate provided by authors who are non-native	[Y]
34	speakers of English meets the BPG requirements (file name:	
	Manuscript NoLanguage certificate; e.g., 870-Language certificate).	
	The photos licensed in the Agreement for Use of Personal Photos	[Y]
25	are consistent with those in the paper (file name: Manuscript	
35	NoAgreement for use of personal photos; e.g., 870-Agreement for	
	use of personal photos).	
	This document (Checklist of Responsibilities for Scientific Editors)	[Y]
36	has been saved under the file name: manuscript NoScientific	
	editor work list (e.g., 870-Scientific editor work list).	
	A CrossCheck investigation (an effective tool for detecting unoriginal	[Y]
	content, enabling our editors to preserve the journal's integrity and	
37	the authors' copyright) has been performed for the manuscript via	
	the website: http://www.ithenticate.com/. The results document	
	contains the following information for the manuscript: "Name of	
	journal", "Manuscript No.", "Columns", "Title" and "Author list".	
	The Figure of the <i>CrossCheck</i> results is saved in JPEG format (.jpg) at	
	1440 × 680 pixel resolution. The PDF of the <i>CrossCheck</i> results has	
	been saved under the file name: manuscript No CrossCheck report	
	(e.g., 870-CrossCheck report). The Google searches have also been	
	performed to further ensure publication of original content.	
38	The text of the manuscript is typed in Book Antiqua font, 12 pt, with	[Y]
36	The text of the manuscript is typed in book Antiqua font, 12 pt, with	



7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA **Telephone:** +1-925-399-1568

E-mail: bpgoffice@wjgnet.com

	1.5 line spacing.		
Responsibilities of scientific editors	The primary responsibilities of our scientific editors include carefully checking the entire manuscript and all accompanying materials for: (1) errors in spelling, grammar, punctuation and wording; (2) suitability of tables, figures, figure data and legends; (3) accurate and appropriate presentation of symbols ($e.g. +, -, \times, \div, \%, *$) in tables and figures; and (4) complete and comprehensive revision of the manuscript		
	according to the reviewers' comments.		
Publication process	Manuscript reception and registration→Initial review by scientific review→End of peer review→First round of meeting evaluaccepted→Revision by the author(s)→Second round of meeting evaluaccepted/revised/rejected→Final review by the Editor-in-Chief control for academic content and language quality)→Final acceptance of publication fee→Language editing→Production→Proofreading editor→Proofreading by deputy editor→Final review by Editor-in-Offen on the BPG website online open-access papers in electronic form on the BPG website online papers on PubMed Central→Delivery of high-quality PDF author(s)→End of the publication process.	ation→To be duation→To be dua	