# PEER-REVIEW REPORT

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

**Manuscript NO:** 87025

**Title:** Clinical Factors Predicting Rotavirus Diarrhea in Children: A Cross-Sectional Study from Two Hospitals

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

**Peer-review model:** Single blind

**Reviewer's code:** 05345731

**Position:** Peer Reviewer

**Academic degree:** BSc, MD, MSc

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2023-07-19

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

**Reviewer accepted review:** 2023-08-10 01:41

**Reviewer performed review:** 2023-08-11 00:28

**Review time:** 22 Hours

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|---|---|
| **Scientific quality** | [  ] Grade A: Excellent  [ Y] Grade B: Very good  [  ] Grade C: Good<br>[  ] Grade D: Fair  [  ] Grade E: Do not publish |
| **Novelty of this manuscript** | [  ] Grade A: Excellent  [ Y] Grade B: Good  [  ] Grade C: Fair<br>[  ] Grade D: No novelty |
| **Creativity or innovation of this manuscript** | [  ] Grade A: Excellent  [ Y] Grade B: Good  [  ] Grade C: Fair<br>[  ] Grade D: No creativity or innovation |

| Scientific significance of the conclusion in this manuscript | [  ] Grade A: Excellent     [ Y] Grade B: Good      [  ] Grade C: Fair [  ] Grade D: No scientific significance |
|---|---|
| **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** | [ Y] Yes    [  ] No |
| **Peer-reviewer statements** | Peer-Review: [ Y] Anonymous    [  ] Onymous |
|  | Conflicts-of-Interest: [  ] Yes    [ Y] No |

## SPECIFIC COMMENTS TO AUTHORS

he study results highlight several important findings that contribute to our understanding of predictive factors for rotavirus gastroenteritis. The identified predictors include wet season, length of stay (LOS) ≥3 days, presence of abdominal pain, severe dehydration, abnormal white blood cell counts, abnormal random blood glucose, and presence of fecal leukocytes. These factors provide valuable insights into distinguishing between rotavirus and non-rotavirus gastroenteritis cases.  The study's strengths lie in its comprehensive approach, involving both clinical and laboratory data, to identify potential predictive factors for rotavirus gastroenteritis. The multivariate analysis enhances the robustness of the findings by accounting for confounding variables. Furthermore, the inclusion of a diverse age range of pediatric patients enhances the generalizability of the study's conclusions.  However, I have a few suggestions to improve the manuscript:  1. The abstract lacks information about the sample size calculation and the rationale for selecting the specific predictors examined in the study. Adding a brief explanation of the theoretical basis for selecting these predictors would enhance the context of the research.  2. The conclusion could benefit

from discussing the clinical implications of the identified predictors. How might these findings aid clinicians in their decision-making process? Addressing this question would add practical value to the study's implications.   3. The study period spans four years, and there may have been changes in diagnostic and treatment practices during this time. A brief discussion about the potential impact of temporal variations on the study's findings would strengthen the interpretation of the results.   Overall, the article presents valuable insights into predictive factors for rotavirus gastroenteritis in pediatric patients. Including the suggestions mentioned above, the article would contribute significantly to the understanding of rotavirus diagnosis and clinical management in the pediatric population. I recommend the acceptance of the article pending minor revisions mentioned.

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|---|---|
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| **Creativity or innovation of this manuscript** | [  ] Grade A: Excellent   [ Y] Grade B: Good   [  ] Grade C: Fair <br> [  ] Grade D: No creativity or innovation |

| Scientific significance of the conclusion in this manuscript | [  ] Grade A: Excellent    [ Y] Grade B: Good        [  ] Grade C: Fair  [  ] Grade D: No scientific significance |
|---|---|
| **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 statements** | Peer-Review: [ Y] Anonymous    [  ] Onymous |
|  | Conflicts-of-Interest: [  ] Yes   [ Y] No |

## SPECIFIC COMMENTS TO AUTHORS

Title: reads well There are some grammatical errors. Pls rectify Abstract: Conclusion is generalized. Pls be specific for the findings of the study What is the specificity, sensitivity and accuracy of rotavirus prediction with these criteria? Intro: purpose clearly mentioned Methodology: Elaborately discussed No major changes Results:   Pls discuss the specificity, sensitivity and accuracy of rotavirus prediction with these criteria Discussion: Can be presented under separate subheadings for easier understanding Pls discuss the need for the current study Pls elaborate the evidence in the existing literature on this subject