

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 59732

Title: Successful endovascular treatment with long-term antibiotic therapy for an infectious pseudoaneurysm due to *Klebsiella pneumoniae*: A case report

Reviewer's code: 00183481

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Assistant Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2020-09-27

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-09-28 07:18

Reviewer performed review: 2020-09-28 12:48

Review time: 5 Hours

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 Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	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

The authors showed a patient with infectious pseudoaneurysm treated by endovascular stenting. The prolonged and continued antibiotic therapy was chosen by susceptibility testing from the pseudoaneurysm. Eventually the hematoma was completely disappeared. This challenging endovascular treatment with appropriate antibiotics was an effective emergency treatment for this poor prognostic patient. Therefore this case presentation is worth publication. There are a few small queries. 1. *K. pneumoniae* is usually susceptible to ceftriaxone. The result of susceptibility testing could be informative. Please indicate it in a table. 2. The time course with antibiotics usage should be very important. The figure of timeline may be helpful to readers. (see CARE Checklist #5) 3. A value in HbA1c would show severity of DM. 4. Please check insertion of Figure 1A, which should be in history of present illness (page 5).

RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Clinical Cases

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Reviewer's code: 00183481

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Assistant Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2020-09-27

Reviewer chosen by: Man Liu (Part-Time Editor)

Reviewer accepted review: 2020-10-23 09:54

Reviewer performed review: 2020-10-23 10:36

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
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input checked="" type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Peer-reviewer statements	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



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The authors answered for queries and revised the manuscript.