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Manuscript page number (Without Figures): 25 Rate: 6.2 CNY per page

Editing Fee: 155 CNY

Figure count: 2 Figure handling time: 80 min Rate: 1 CNY per min

Editing Fee: 80 CNY

XML and PDF converting time: 60 min Rate: 1 CNY per min

Editing Fee: 60 CNY

Manuscript word count: 7222

Total Editing Fee: 295 CNY

		Comments
Item No.	Specific items for verification	Yes=[Y]
		No= [N]
	General Information of the Manuscript	
	Name of journal: World Journal of Critical Care Medicine	
	Manuscript NO.: 64716	
	Column: Minireviews	
	Title: Acute exacerbation of interstitial lung disease in the intensive	
1	care unit	D/I
1	Authors: Antonios Charokopos, Teng Moua, Jay H Ryu and Nathan	[Y]
	J Smischney	
	Reviewer code: 05402115, and 05108336	
	First decision: 2021-07-18 23:31	
	Scientific Editor: Li-Li Wang	
	Date of signature: 11/6/2021 (month/day/year)	
2	Editorial Office's Comments	[Y]



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Science Editor: 1 Scientific quality: The manuscript describes a minireview of the acute exacerbation of interstitial lung disease in the ICU. The topic is within the scope of the WJCCM. (1) Classification: Grade A and Grade D; (2) Summary of the Peer-Review Report: Author described various extrinsic inducements, diagnostic evaluation, mechanical ventilation and treatment of AE-ILD. But author's title was AE-ILD in ICU. The questions raised by the reviewers should be answered; (3) Format: There are 2 figures; (4) References: A total of 85 references are cited, including 13 references published in the last 3 years; (5) Self-cited references: There are 10 self-cited references. The self-referencing rates should be less than 10%. Please keep the reasonable self-citations (i.e. those that are most closely related to the topic of the manuscript) and remove all other improper self-citations. If the authors fail to address the critical issue of self-citation, the editing process of this manuscript will be terminated; and (6) References recommendations: The authors have the right to refuse to cite improper references recommended by the peer reviewer(s), especially references published by the peer reviewer(s) him/herself (themselves). If the authors find the peer reviewer(s) request for the authors to cite improper references published by him/herself (themselves), please send the peer reviewer's ID number to editorialoffice@wjgnet.com. The Editorial Office will close and remove the peer reviewer from the F6Publishing system immediately. 2 Language evaluation: Classification: Grade A and



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	Grade C. 3 Academic norms and rules: No academic misconduct	
	was found in the Bing search. 4 Supplementary comments: This is	
	an invited manuscript. No financial support was obtained for the	
	study. The topic has not previously been published in the WJCCM.	
	5 Issues raised: (1) The language classification is Grade C. Please	
	visit the following website for the professional English language	
	editing companies we recommend:	
	https://www.wjgnet.com/bpg/gerinfo/240; (2) The authors did	
	not provide original pictures. 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. 6 Re-Review: Not required. 7	
	Recommendation: Conditional acceptance.	
	Company Editor-in-Chief: I have reviewed the Peer-Review	
	Report, full text of the manuscript, and the relevant ethics	
	documents, all of which have met the basic publishing requirements	
	of the World Journal of Critical Care Medicine, 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.	
3	The fixed headings are copied.	[Y]
	The title concisely summarizes the main topic of the study and is	
4	not too long (no more than 18 words). Words such as 'exploration',	D.C.
	'research', 'analysis', 'observation', and 'investigation' are avoided.	[Y]
	The title does not start with 'The' and does not include any Arabic	



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	numbers or uncommon abbreviations.	
5	A short running title is provided (no more than 6 words).	[Y]
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11	The Abstract section is formatted according to the article-specific style (structured vs unstructured) and word count thresholds, as	[Y]



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	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).	
	The 'Key words' list provides 5-10 keywords that reflect the main	
12	content of the study. The first letter of each keyword is capitalized,	[Y]
	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.	
13	For example, an article by Jae Moon Yoon, Ki Young Son, Chun Sick	[Y]
	Eom, Daniel Durrance, Sang Min Park will be written as Yoon JM,	
	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	
14	study that outlines the most innovative and important arguments	
	and core contents of the paper and will serve to effectively attract	[Y]
	readers.	



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		1
15	The 'INTRODUCTION' section clearly describes the relevant 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, 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	[Y]
	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	[N]
16	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	[N]
	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.e., 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.	
18	Statistical symbols are accurate. Statistical significance is expressed	[N]
	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 P 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.	
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Γ		
	The 'DISCUSSION' section (1) describes the main purpose and	[N]
	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.	
	The 'ACKNOWLEDGEMENTS' section expresses gratitude to any	[N]
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20	instrumentation, equipment or experimental materials, and/or	
20	assistance in experimental work), non-technical services (i.e., useful	
	inspiration, suggestions, guidance, or review), and/or any other	
	auxiliary work.	
01	The 'ARTICLE HIGHLIGHTS' section provides comments for	D. TI
21	original articles in accordance with the specified format.	[N]
	The 'REFERENCES' section lists the references in the Vancouver	
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	citations where no author is indicated, a superscript number should	
22	be placed at the end of the sentence. Respective examples are: "Ma ^[1]	[Y]
	reported", "Pan et al ^[2-5] indicated"; "PCR has a high	
	sensitivity ^[6,9] ." No superscript numbers are used when the	
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23	journals is spelled out using Chinese Pinyin, with the first letter of	[Y]
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	journals in other languages are listed according to indexing	
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	with all the information relevant to the electronic version.	
	The number of cited references is appropriate for the article type, as	
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24	Commentary: no less than 50;	D/I
24	Review: no less than 100;	[Y]
	Article: no less than 30/26;	
	Case Report and Letter to the Editor: no less than 1.	
	The ethics-related statements are provided in accordance with the	
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	statement, Manuscript NoAnimal care and use statement, etc.).	
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26	at the end of the paper (e.g., P-Reviewer: Hugot D S-Editor: Wang	[Y]
	JL).	
	The order and numerical labeling of tables and figures is consistent	
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27	footnotes. Only one legend is provided for each multi-panel figure	D/I
27	consisting of color graphs, black and white graphs, or line graphs	[Y]
	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:	
28	Split pictures include flow charts, line graphs, histograms, and	[Y]
	graphs including text. Unsplit pictures include meta-analysis	



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	diagrams, PCR amplification curves, and survival curves.	
29	The author(s) highlighted the changes made to the manuscript	[Y]
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31	Manuscript NoPeer-review(s); e.g., 870-Peer-review(s)).	[Y]
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