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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 70119

Title: Value of thyroglobulin combined with ultrasound-guided fine-needle aspiration

cytology for diagnosis of lymph node metastasis of thyroid carcinoma

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06086576 Position: Peer Reviewer Academic degree: PhD

Professional title: Doctor

Reviewer's Country/Territory: Greece

Author's Country/Territory: China

Manuscript submission date: 2021-09-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-09-20 00:38

Reviewer performed review: 2021-10-09 15:31

Review time: 19 Days and 14 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
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



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Peer-reviewer

statements

Peer-Review: [Y] Anonymous [] Onymous

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Fine-needle aspiration cytology can provide further cytological diagnostic support for lymph nodes with suspicious ultrasound results. However, incorrect sampling site, insufficient sample size, small metastases, and cystic alteration of the lesion can all lead to false negative results. Fine-needle aspiration of thyroglobulin has relatively high diagnostic value in lymph node metastasis and recurrence of differentiated thyroid carcinoma. In this study, the authors explored the value of fine-needle aspiration of thyroglobulin combined with ultrasound-guided fine-needle aspiration cytology in the diagnosis of cervical lymph node metastasis in patients with thyroid carcinoma and its influencing factors. This study is very interesting. The authors described the methods in detail, and the diagnostic criteria are reasonable. Comments: 1. A minor language editing is required. Some minor spelling mistakes should be corrected. 2. Please add the core tip, or remove the title. 3. Please take attention about the abbreviations in the main text. 4. Please add a figure legend to the figure 1.



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Reviewer's code: 06058957

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2021-09-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-09-20 00:37

Reviewer performed review: 2021-10-09 16:03

Review time: 19 Days and 15 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
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	[]Yes [Y]No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This manuscript described an interesting study of US-guided FNAC for diagnosis of lymph node metastasis of thyroid carcinoma. The study is very well display, and the results are very interesting. The authors should check the data in the tables, and update the references.