



## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Critical Care Medicine*

**Manuscript NO:** 74435

**Title:** Plasma D-Dimer level in Early and Late-onset Neonatal Sepsis

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

**Peer-review model:** Single blind

**Reviewer's code:** 03340662

**Position:** Editorial Board

**Academic degree:** MBBS, MD

**Professional title:** Doctor, Professor

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

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

**Manuscript submission date:** 2021-12-23

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-01-10 15:35

**Reviewer performed review:** 2022-01-16 10:59

**Review time:** 5 Days and 19 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<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
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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statements

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

#### **SPECIFIC COMMENTS TO AUTHORS**

Overall, the paper is well written. In the abstract, results section is too long with repetitions, please cut short the writing. Introduction is reasonable. Methods are mostly well written. IEC approval, inclusion/exclusion criteria well mentioned. Results are acceptable. In the discussion, the first paragraph repeats most of the writings in the introduction. Avoid repetition. Limitations are written. Bibliography is alright. Please explain the reason for such high rate of mortality in your study



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**Peer-review model:** Single blind

**Reviewer's code:** 01206150

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Chief Doctor

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

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

**Manuscript submission date:** 2021-12-23

**Reviewer chosen by:** Qi-Gu Yao (Online Science Editor)

**Reviewer accepted review:** 2022-03-04 03:20

**Reviewer performed review:** 2022-03-04 09:25

**Review time:** 6 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
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### **SPECIFIC COMMENTS TO AUTHORS**

This study aimed to assess the plasma level of D-dimer in neonates with neonatal sepsis. They found that D-dimer was significantly higher in septic groups. Septic groups showed a significantly higher number of cases with positive D-dimer. The rate of gram-negative bacteremia was significantly higher in LOS than EOS, while the rate of gram-positive bacteremia was significantly higher in EOS than LOS (P <0.01\*). Gram-negative bacteria have the highest D-Dimer levels (Acinetobacter, Klebsiella, and Pseudomonas), and CRP (Serratia, Klebsiella, and Pseudomonas). The best-suggested cut-off point for D-dimer in neonatal sepsis was 0.75 mg/L, giving a sensitivity of 72.7% and specificity of 86.7%. The D-dimer assay showed lower specificity and comparable sensitivity relative to CRP in the current study. There were some merits in this study. I could not find the Tables in the manuscript, please add it to the manuscript. The language need to be polished, there were some grammar and word errors in the manuscript such as the following: 1.D-Dimer assay was compared between the groups and related to the causative microbiological agents. 2.Discussion there is a need for sensitive markers able to detect and expect the prognosis of neonatal sepsis. 3.Despite there being no significant differences in gender among the studied group, 4.Meini et al. found that D-Dimer level can be used to expect the severity and the course of severe invasive infections caused by the gram-negative bacteria Neisseria meningitidis; while failing to expect the course of the disease in What was the meaning of“expect”? 5. We found thrombocytopenia in 73% and 405 of EOS and 405 means 40%?