

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases Manuscript NO: 75547 Title: Incidental Diagnosis of Medullary Thyroid Carcinoma due to Persistently Elevated Procalcitonin in a Patient with COVID-19 Pneumonia: A Case Report and Review of Literature Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed Peer-review model: Single blind **Reviewer's code:** 05631502 **Position:** Peer Reviewer Academic degree: BSc, MBBS, MD Professional title: Academic Research, Doctor Reviewer's Country/Territory: Qatar Author's Country/Territory: India Manuscript submission date: 2022-02-04 Reviewer chosen by: AI Technique Reviewer accepted review: 2022-02-12 13:31 Reviewer performed review: 2022-02-15 17:32 **Review time:** 3 Days and 4 Hours] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good Scientific quality] Grade D: Fair [] Grade E: Do not publish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
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

I would like to thank the authors to have written this case report, which is interesting and provides a case of COVID-19 were MTC was diagnosed incidentally, which would probably be missed otherwise. I have some comments which I believe can improve the quality of this report: Major concerns: • Introduction is devoid of referencing in many places. Please add references wherever the information is secondary and taken from the literature, such as the death rates of the COVID-19 pandemic and its healthcare burden. This also stands for the information given on procalcitonin. • The discussion is also devoid of references where required. One example would be this sentence: "The workup of MTC includes measurement of serum calcitonin (Ctn), carcinoembryonic antigen (CEA), ultrasonography of the neck, positron-emission tomography with CT scan (PET-CT), appropriate genetic testing for RET mutations and evaluation for other tumors related to MEN-2 syndrome" Minor Concerns: • Please provide normal ranges of laboratory tests mentioned. • Please provide full-length names of abbreviations before the first use. For e.g. CT should be referred to as Computed Tomography for the first time and later on can be referred to CT. This also stands true for FNAC. • At the end authors mention "This is the first report from Asia". Although this may be true, however, there might be some other reports as 100 percent literature review of millions of articles out there is not practical. Hence, I suggest they tone it down by adding "to the best of our knowledge". • English language still needs some polishing. I noticed that the English language certificate is signed by the authors rather than the native English speaker, if this is acceptable by the journal, I am fine with it. However, this manuscript



can benefit from the second review of the English language for the remaining minor grammatical issues.



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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 [] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	 [] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection



Re-review	[Y]Yes []No
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The case is indicative for clinicians that when facing patients with constantly elevated pct, MTC should be ruled out. However, the structure of the manuscript is not complete with an absence of an abstract. Furthermore, the language needs polishing.