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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 75766

Title: Acute ischemic stroke combined with Stanford type A aortic dissection: A case

report and literature review

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03769687 Position: Peer Reviewer Academic degree: MD

Professional title: Attending Doctor, Reader (Associate Professor), Research Fellow

Reviewer's Country/Territory: Germany

Author's Country/Territory: China

Manuscript submission date: 2022-02-14

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-02-19 05:23

Reviewer performed review: 2022-02-27 12:07

Review time: 8 Days and 6 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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

The authors should use standardized scales when reporting outcome (mRS) and pretreatment disability (NIHSS). It seems that the patient was initially quite severly neurologically impaired. Was mechanical thrombectomy considered? If yes, advanced imaging including a CTA should have been performed which would have revealed the underlying vascular condition. If no, the reasons should be given (logictic constraints I assume?). That should be discussed.



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Peer-review model: Single blind

Reviewer's code: 03819674 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Tunisia

Author's Country/Territory: China

Manuscript submission date: 2022-02-14

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-03-01 06:25

Reviewer performed review: 2022-03-14 07:20

Review time: 13 Days

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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



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SPECIFIC COMMENTS TO AUTHORS

This article highlights a rare and serious cardiovascular disease, the AAD, which can mimick many other non specific diseases such as gastriculcer, cholecystesis.. Authors should emphazise the main factors that lead to AAD misdiagnosis in the Emergency room such as failure to perform adequate history taking or/and physical examination, failure to identify atypical symptoms, failure to order or to interpret a diagnostic test and failure to order an appropriate specialized consultation.. To improve the quality of the article, Medico-legal implications in cases of misdiagnosed AAD could be discussed. Line 57: the AAD was complicated with AIS not the opposite.