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| N | Manuscript word count: 1190 |
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| | | Comments |
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| Item No. | Specific items for verification | Yes=[Y] |
| | | No= [N] |
| | General Information of the Manuscript | |
| | Name of journal: World Journal of Gastrointestinal Surgery | |
| | Manuscript NO.: 77196 | |
| | Column: Letter to the Editor | |
| 1 | Title: Risk prediction of common bile duct stone recurrence based | F2/1 |
| 1 | on new common bile duct morphological subtypes | [Y] |
| | Authors: Hirokazu Saito and Shuji Tada | |
| | Reviewer code: 02545570, 05190007, 05393105, 05099365, and | |
| | 05467628 | |
| | First decision: 2022-06-12 20:29 | |
| 2 | Editorial Office's Comments | [Y] |



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| | Science Editor: Manuscript_FirstCommentByScienceEditor | |
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| | 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 Gastrointestinal Surgery, and the | |
| | manuscript is conditionally accepted. I have sent the manuscript to | |
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| | (no less than 120 words); and CONCLUSION (no more than 26 | |
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| | mellitus increases the risk of gastric cancer: A meta-analysis. World J | |
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| 15 | the text and the abbreviation presented in parentheses [i.e., | [N] |
| | "computed tomography (CT)"]. First-person pronouns (e.g., 'I', | |
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| | by the author(s). When weaknesses of previous studies are | |
| | described in the text to highlight the innovations related to the | |
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| | The 'MATERIALS AND METHODS' section clearly and accurately | |
| | describes all materials and methods used to obtain the data | |
| 16 | presented in the article and is adequate for a reader to repeat the | [N] |
| | study. | |
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| | experimental results. Representative data and data that have | |
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| 17 | the text, a table or figure (i.e., chart, diagram, graph or image), but is | |
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| | (3) illustrates and explains the results (but does not simply repeat | |
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| | topic(s) or direction(s); and (5) describes the theoretical significance | |
| | and practical value of the findings. | |
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| | diagrams, PCR amplification curves, and survival curves. | |
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