PEER-REVIEW REPORT

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

Manuscript NO: 77369

Title: Scoring systems in critically ill: Which one to use in cancer patients?

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02454185

Position: Editorial Board

Academic degree: Doctor, MD, MSc

Professional title: Chief Physician, Doctor, Professor

Reviewer's Country/Territory: China

Author's Country/Territory: India

Manuscript submission date: 2022-04-26

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-05-17 04:31

Reviewer performed review: 2022-05-17 04:42

Review time: 1 Hour

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [Y] Grade D: Fair [ ] Grade E: Do not publish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) [ ] Minor revision [ ] Major revision [Y] Rejection
Re-review	[ ] Yes [Y] No
Peer-reviewer	Peer-Review: [Y] Anonymous [ ] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

the study had limited sample size and the scores are not well validated in subgroups of critically ill patients. detailed comments can be found at the appendix file.

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish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

The authors studied a very important clinical topic.   The manuscript is nicely written. few queries.   Some typos and grammatical errors need to be corrected. How the sample size of 400 came.   How many patients were excluded. Did mention about missing data, what percentage of patient had missing data and in each scoring classification

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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

Manuscript NO: 77369

Title: Scoring systems in critically ill: Which one to use in cancer patients?

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02446627

Position: Editorial Board

Academic degree: FACP, MD, MPhil

Professional title: Full Professor, Professor

Reviewer's Country/Territory: United States

Author's Country/Territory: India

Manuscript submission date: 2022-04-26

Reviewer chosen by: Yun-Xiaojian Wu

Reviewer accepted review: 2022-07-23 14:55

Reviewer performed review: 2022-07-24 06:28

Review time: 15 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) [ ] Minor revision [Y] Major revision [ ] Rejection
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors have addressed a very important topic in the oncology patient mortality in the ICU using the prediction tools. We know the oncology patients have poor outcome, but this study helps in predicting the validity of the scoring system. I would like the authors to address if any patients were DNT/DNI/in limited care options, as many patients are made DNR (especially oncology patients). If so, that may affect the overall outcome and predictability. I see this a major limitation if we have not excluded those patient in the analysis Some language polishing needs to be done