

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 77633

Title: Survival of a patient who received extracorporeal membrane oxygenation due to

postoperative myocardial infarction: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03846820 **Position:** Editorial Board

Academic degree: FACC, FESC, MD

Professional title: Academic Research, Assistant Professor, Doctor

Reviewer's Country/Territory: Netherlands

Author's Country/Territory: China

Manuscript submission date: 2022-05-29

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-07-26 15:03

Reviewer performed review: 2022-07-27 14:57

Review time: 23 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Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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 [] 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



https://www.wjgnet.com

Peer-reviewer

Peer-Review: [] Anonymous [Y] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

Dear authors, This manuscript represents the case report focused on benefits of ECMO in postoperative myocardial infarction patient. The article is written with the acceptable English-speaking adduction of the arguments, but the careful optimization of the style is required. The article is sufficiently novel and very interesting to warrant publication. All the key elements are presented and described clearly. The most discussable options in the article are: 1) Would you please kindly correct all your typos and grammar errors throughout the manuscript. 2) Figure 1 is confusing in a sense why exactly the surgery was undergone. Please provide the optimal figure to deliver the message about indications for surgery. 3) Can you explain why your myocardial infarction is postoperative and not perioperative? 4) This is not clear how diagnosis of myocardial infarction was made. The existence of Concilium is great, but we do not see even troponin to appreciate it. Is that a MI type 2? 5) Why ECMO was exactly chosen? Is that routine procedure at your Clinic? Please provide the reader with the relevant information about Guidelines that were used to manage your patient. If you use whatever off-label, please explain and justify that choice. 6) Figure 2: images are of the different cardiac cycle. Please do it in a matchable way. 7) Can you explain the story with ACT? 8) Discussion: what is "was confirmed by SFAR-INSERM article published in late 2003"? Where is a reference? 9) Discussion: References 6 and 7 are of low-quality research. Would you please kindly reconsider your Discussion with more good-quality research in there or more scientific vision of the story? I like this case generally, but your Discussion kills it.



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Reviewer's code: 05504262 Position: Associate Editor

Academic degree: DA, DNB, MBBS, MNAMS

Professional title: Associate Professor

Reviewer's Country/Territory: Indonesia

Author's Country/Territory: China

Manuscript submission date: 2022-05-29

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-08-07 18:37

Reviewer performed review: 2022-08-07 18:39

Review time: 1 Hour

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) [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

very well written and highlighting the importance of timing of ECMO post cardiac arrest. However, Cost effectiveness should Also be discussed.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 77633

Title: Survival of a patient who received extracorporeal membrane oxygenation due to

postoperative myocardial infarction: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03846820 Position: Editorial Board

Academic degree: FACC, FESC, MD

Professional title: Academic Research, Assistant Professor, Doctor

Reviewer's Country/Territory: Netherlands

Author's Country/Territory: China

Manuscript submission date: 2022-05-29

Reviewer chosen by: Xiao-Fang Liu

Reviewer accepted review: 2022-09-02 16:56

Reviewer performed review: 2022-09-03 06:02

Review time: 13 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



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Peer-reviewer Peer-Review: [] Anonymous [Y] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

Dear authors, Thank you very much for your efforts to improve the article. I have a few suggestions though. 1) Please retitle the article. You are focused on POMI mainly. Would you combine the main idea of your case report in a new title? 2) Please incorporate all the remarks delivered in your rebuttal letter into the main text. Your answers are not for reviewers but for the readers. All the critical issues, especially regarding the Chinese vision of the clinical approaches, must be elaborated on. 3) The text now looks still like a mess without transparent logic. It feels like you have all the key info in the article, but it is not harmonized. Please, carefully evaluate the structure and content of the information, be focused.