

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 77644

Title: Treatment of primary tracheal schwannoma with endoscopic resection: A case

report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06299707 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Iran

Author's Country/Territory: China

Manuscript submission date: 2022-05-15

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-05-16 11:51

Reviewer performed review: 2022-05-17 17:21

Review time: 1 Day and 5 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Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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) [Y] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No



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Telephone: +1-925-399-1568 E-mail: bpgoffice@wjgnet.com

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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

dear authors: Primary tracheal schwannoma, could be an interesting case to report, as you alluded in this article. It is worth noting that, the discussion section is rich and well arranged, and the most parts of the manuscript has a good spelling, grammar and However, before it becomes publishable, it still requires some improvement. syntax. Here are my comments: 1.In the background section, in the first lines, it is better to complete the definition of the core element of your manuscript and then write other detail. Write clinical symptoms after the core element definition, not in the middle. 2.In the background section, coherence of this sentence «In the treatment of early-stage gastrointestinal cancer, high-frequency electric knives are commonly used», with the entire paragraph has not considered, otherwise it is irrelevant. 3.Keywords should represent key concepts and should reflect a collective understanding of the topic. For determining the correct and most appropriate keywords, you can use Medical Subject Headings (MeSH) or Google Keyword Planner. 4. The conclusion, in the abstract, is more like the aim of study, you can write it in a better and more suitable way. introduction is very short. The constructs and concepts in the introduction section are poor-organized and incomplete. Include more general and specific background in this section. 6.In the end of the introduction you must write the aim of the study, what you bring instead is more like conclusion by using present perfect tense. 7.In the discussion section, in addition to what you have explained, it is important to compare your case with others relevant researches. 8. Most bibliographic citations which been used are more than 5 years old and obsolete. The authors must update and arrange the bibliography. Sincerely Navid Faraji



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Peer-review model: Single blind

Reviewer's code: 06277687 Position: Peer Reviewer Academic degree: MM

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: China

Manuscript submission date: 2022-05-15

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-05-15 14:59

Reviewer performed review: 2022-05-18 11:30

Review time: 2 Days and 20 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] 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) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-Review: [Y] Anonymous [] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

1. Pathological description should be performed on Figure 2 (arrows should indicate typical lesions for HE staining, and colors of target proteins for immunohistochemical 2. Please supplement the recommended frequency of bronchoscopy staining). monitoring and provide the source (guide). 3. What are the significance of S100, Vimentin and CD57 for the prognosis of primary tracheal schwannoma? Please add. 4. Four case reports about Primary Tracheal Schwannoma can be retrieved in PubMed, and it is suggested to supplement literature review in the form of list. 5. Please add whether any of the patient's family members have smoking history. Second-hand smoke is also known to be harmful to the respiratory tract. 6. Please supplement the CT imaging report of Figure 1.



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Peer-review model: Single blind

Reviewer's code: 03604107 Position: Editorial Board Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Albania

Author's Country/Territory: China

Manuscript submission date: 2022-05-15

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-05-15 15:05

Reviewer performed review: 2022-05-20 14:49

Review time: 4 Days and 23 Hours

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) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[]Yes [Y]No



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Peer-reviewer

Peer-Review: [] Anonymous [Y] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

This is a very interesting case report, and very few English language issues will be easily addressed during editing. I have only two small questions / suggestions to the 1. "We report a 61-year-old asymptomatic woman who underwent chest authors: computed tomography (CT)"; since thorax CT is not a routine examination, and the patient was asymptomatic: why did she performed the CT? 2. "However, this study has some limitations. One limitation is the short follow-up time. Although no significant difference exists in the quality of life pre- and postoperation, local recurrence in endoscopic excision has been previously reported, suggesting that bronchoscopic surveillance is necessary[13]. Another limitation is the limited number of cases." These sentences make little sense: this is not a study, but rather a case report. What do you mean by 'limited number'??? You just report a single case.



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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06053701 Position: Editorial Board Academic degree: MD, PhD

Professional title: Assistant Professor, Chief Doctor

Reviewer's Country/Territory: Taiwan

Author's Country/Territory: China

Manuscript submission date: 2022-05-15

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-05-16 02:50

Reviewer performed review: 2022-05-24 02:52

Review time: 8 Days

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) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[]Yes [Y]No



Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements

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

SPECIFIC COMMENTS TO AUTHORS

no comment



RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 77644

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report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06299707 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Iran

Author's Country/Territory: China

Manuscript submission date: 2022-05-15

Reviewer chosen by: Han Zhang

Reviewer accepted review: 2022-07-27 17:48

Reviewer performed review: 2022-07-27 19:02

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



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statements

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

SPECIFIC COMMENTS TO AUTHORS

Most of the comments have been responded, and the majority of revises Dear authors: have been accomplished appropriately. However, before it becomes publishable, it still requires some revisions. Here are my comments: 1. You do not consider this comment "In the background section, in the first lines, it is better to complete the definition of the core element of your manuscript and then write other detail. Write clinical symptoms after the core element definition, not in the middle". 2.Endoscopic therapy, highfrequency electric knife and En bloc, was not included in MeSH. You must substitute them with correct keywords on Medical Subject Headings (MeSH). 3.The new introduction is better than before, but The constructs and concepts are still poororganized and incomplete. Include more general and specific background in this section. 4. You can still dedicate the newest possible bibliography to the manuscript, specially in introduction section, you can use books also to find new references. Strive more again to update the bibliography as much as you can.