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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 80517

Title: Benign lymphoepithelial cyst of parotid gland without human immunodeficiency

virus infection: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06139976 Position: Peer Reviewer

Academic degree: Doctor, MD

Professional title: Doctor, Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2022-10-01

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-10-01 08:30

Reviewer performed review: 2022-10-02 02:29

Review time: 17 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good
	[] Grade D: Fair [] Grade E: Do not publish
Novelty of this manuscript	[] Grade A: Excellent [] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of this manuscript	[] Grade A: Excellent [] Grade B: Good [] Grade C: Fair [] Grade D: No creativity or innovation



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Scientific significance of the conclusion in this manuscript	[] Grade A: Excellent [] Grade B: Good [] Grade C: Fair [] Grade D: No scientific significance
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 statements	Peer-Review: [] Anonymous [Y] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This is an excellent case report on benign lymphoepithelial cyst (BLEC) of the parotid gland. The case presentation and discussion are generally well described. I would like to make a few recommendations to improve this case report. 1. intraoperative rapid pathology Was intraoperative rapid pathology performed in this case? Of course, several preoperative tests suggested that the mass was benign. However, as the authors also point out, BLEC of the parotid gland is uncommon. Therefore, it would be great if changes to the surgical modality in case the mass was malignant had also been considered beforehand. 2. key points of consultation to specialists In this case, the patient did not present with pain or difficulty opening his mouth. In fact, in clinical practice, screening imaging studies of the head and neck often show asymptomatic parotid tumours. In such cases, are there any key points of consultation by the general practitioner to the otolaryngologist? This report would be more attractive to readers who do not specialise in parotid tumours if additional insights into them were added.



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Reviewer's code: 03805351 Position: Peer Reviewer Academic degree: MD, PhD

Professional title: Research Assistant, Research Fellow

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2022-10-01

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-11-16 19:22

Reviewer performed review: 2022-11-28 20:28

Review time: 12 Days and 1 Hour

	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C:
Scientific quality	Good
	[] Grade D: Fair [] Grade E: Do not publish
Novelty of this manuscript	[] Grade A: Excellent [] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of this manuscript	[] Grade A: Excellent [] Grade B: Good [] Grade C: Fair [] Grade D: No creativity or innovation



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Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[]Yes [Y]No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The manuscript reported a case of Non-HIV-infected benign lymphoepithelial cyst in the parotid gland. The diagnosis and treatment procedures were well recorded. While the literature review part could be further strengthened by summarizing the previous reports. Overall, the manuscript was acceptable after the language improvement. Here are some concerns about it: 1. The abstract was not so concise, and the introduction was not informative enough. 2. More differential diagnoses like thyroglossal duct cysts, lymphocele, metastatic Lymph nodes, and lymphadenitis could be included in the discussion. Histopathological analysis was not well described. 3. The HIV test should be more detailed. Are any other infectious reasons considered? 4. "TTF-1: Thyroid transcription factor-1; CK: cytokeratin; NSE: Neuron specific enolase." at the bottom of table 1 was not mentioned in the manuscript. "She" or "Her" is not the correct word if the patient is male. language needs to be improved, and also the spelling or grammar mistakes.