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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 80606

Title: Development and refinement of diagnostic and therapeutic strategies for

managing patients with cardiogenic stroke: An arduous journey

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00504462 **Position:** Editorial Board

Academic degree: AGAF, FACG, FACP, MD

Professional title: Associate Specialist, N/A

Reviewer's Country/Territory: Mexico

Author's Country/Territory: China

Manuscript submission date: 2022-10-06

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-10-27 23:57

Reviewer performed review: 2022-11-02 16:29

Review time: 5 Days and 16 Hours

	[] 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	[] Grade D: Fair [] Grade E: Do not publish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	[] Grade A: Excellent [] Grade B: Good [] Grade C: Fair
this manuscript	[] 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: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Dear Sir, I want to congratulate your manuscript, it is a nice small revision regarding this special topic. And it is clear that there are several grey areas that need to be evaluated. However, how does your proposal would change the natural history of the disease? For instance, you "propose that the classification of AAA-related strokes as LAA subtypes can reflect its exact pathogenesis, but it is more appropriate to attribute it to cardiogenic strokes", how does this change would give us an opportunity area in prevention or treatment? Do you consider to give a different type of antocoagulants for each phase of the disease? How it should be monitored, in relation to other etiologies of stroke that need anticoagulation treatment? Do you consider any changes to the long term follow up into these discussion? Do you consider any general recommendations that need to be stated to GP and IM physicians when dealing with patients with a cardiac condition? Hope these suggestions could help to add more value to your unquestionable effort and value. Sincerely



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Reviewer's code: 05429012 Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor, Research Scientist

Reviewer's Country/Territory: Jordan

Author's Country/Territory: China

Manuscript submission date: 2022-10-06

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-11-26 21:51

Reviewer performed review: 2022-12-05 13:22

Review time: 8 Days and 15 Hours

	[] Grade A: Excellent [Y] Grade B: Very good [] 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	[] Grade A: Excellent [] Grade B: Good [] Grade C: Fair
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Re-review	[Y] Yes [] No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

the authors discussed a very important topic. the following points need to be clarified: -Is the figure provided in the manuscript made by the the authors or taken from other source. please make this clear. if taken from another source, mention that. - After the large discussion of the topic, I wish to have clear picture of the author's opinion on the topic in erms of creating guidlines or similar issues.