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# PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 80874

Title: Approach to thromboelastography-based transfusion in cirrhosis: An alternative

perspective on coagulation disorders

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06139999 Position: Peer Reviewer Academic degree: MD, PhD

Professional title: Associate Chief Physician, Associate Professor, Surgeon

Reviewer's Country/Territory: China

Author's Country/Territory: India

Manuscript submission date: 2022-10-15

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-11-05 00:45

Reviewer performed review: 2022-11-07 10:41

**Review time:** 2 Days and 9 Hours

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish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	[ ]Yes [Y]No



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Peer-reviewer	Peer-Review: [Y] Anonymous [ ] Onymous
statements	Conflicts-of-Interest: [ ] Yes [ Y] No

## SPECIFIC COMMENTS TO AUTHORS

This is a mini-review regarding TEG used in the patients with liver cirrhosis. with your points. It should be adviced to use in clinic. This paper is associted with clinical significance. I would suggest the authors to quote several important literature, such as PMID: 33312434;PMID: 33229277;PMID: 35977053.



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Provenance and peer review: Invited Manuscript; Externally peer reviewed

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Reviewer's code: 06455389 Position: Peer Reviewer Academic degree: MD

**Professional title:** Doctor

**Reviewer's Country/Territory:** Japan

Author's Country/Territory: India

Manuscript submission date: 2022-10-15

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-11-29 09:30

Reviewer performed review: 2022-12-08 15:17

**Review time:** 9 Days and 5 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Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish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) [ ] Accept (General priority) [ Y] Minor revision [ ] Major revision [ ] Rejection
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## SPECIFIC COMMENTS TO AUTHORS

This paper showed us the concise, clear and informative side of TEG. After stating that CCT cannot adequately evaluate coagulability and platelet function, the usefulness of TEG was evaluated while presenting cirrhosis, sepsis, various venous thrombosis and portal hypertension, liver and related organ's disease as references. I would suggest the following four items. Although mechanism and how to use TEG were also clearly stated, it seemed to be much better when the usefulness as VETs was described in more detail, such as the possibility of decision making in 6 to 15 minutes even if the test actually takes more than 30 minutes (cf. reference 35). Moreover, on page 13, I felt that the usefulness of TEG would be much more emphasized if there was improvement for the TEG guided group in the length of hospitalization or the survival rate as written in the paper below, although it was partially mentioned in the LT section on page 18 (Gopal JP, Dor FJ, Crane JS, Herbert PE, Papalois VE, Muthusamy AS. World J Transplant. 2020 Jul 29;10(7):206-214. doi: 10.5500/wjt.v10.i7.206. PMID: 32844096). In the Limitation column on page 21, there was no explanation for abbreviation PAP. Finally, although it is a trivial point, the second line on page 3, milieu seems to be French. Isn't there any problem in using it as an English expression?