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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 82585

Title: Full neurological recovery from severe nonexertional heat stroke with multiple

organ dysfunction: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06301996 Position: Peer Reviewer Academic degree: MD, MSc

Professional title: Doctor, Researcher, Surgeon

Reviewer's Country/Territory: Greece

Author's Country/Territory: China

Manuscript submission date: 2022-12-26

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-01-11 09:40

Reviewer performed review: 2023-01-14 04:32

Review time: 2 Days and 18 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	[] Grade D: Fair [] Grade E: Do not publish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 [Y] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of	[] Grade A: Excellent [Y] 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	[Y] 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	[]Yes [Y]No
Peer-reviewer statements	Peer-Review: [] Anonymous [Y] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Congratulations to the authors for theri management and favorable outcome on this particularly challenging case of heat stroke. The outline of the report largely abides by the CAR 2016 checklist, with the exception that there is no referance to patient's perspective (although this item is optional). One minor suggestion regarding the Table 1: units of hemoglobin in g/dL (instead of g/L). It is not wrong, but the former form is more common in the clinical setting. Other minor amendments (typos etc) in the enclosed file.



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Reviewer's code: 06250974 Position: Peer Reviewer Academic degree: MD

Professional title: Assistant Professor, Doctor, Instructor, Staff Physician, Teacher

Reviewer's Country/Territory: Thailand

Author's Country/Territory: China

Manuscript submission date: 2022-12-26

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-01-10 04:42

Reviewer performed review: 2023-01-22 09:45

Review time: 12 Days and 5 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 [Y] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of	[] Grade A: Excellent [] Grade B: Good [Y] Grade C: Fair
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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

Thank you for the opportunity to review this work. This manuscript is a case report presented an elderly patient with severe heatstroke with multiple organ dysfunction. Detailed comments about this case report are as follows: -In the introduction section, the author stated that "... and more aggressive cooling measures, similar manner to the therapeutic hypothermia (<36 °C for 24 hours) that is routinely administered to patients in postcardiac arrest, are recommended." However, the term targeted temperature management (TTM) is used nowadays instead of therapeutic hypothermia. (https://www.ncbi.nlm.nih.gov/books/NBK556124/) Therefore, please reconsider changing the term of that phrase, including other places entirely in the manuscript. -What is the predisposing factor and cause of heatstroke in this case? -The Sequential Organ Failure Assessment (SOFA) Score is a mortality prediction score based on the dysfunction of multiple organ systems. It might be suitable to report the SOFA score each day in the results. -In the literature search in PubMed, I found the literature (J Gen Fam Med. 2018;19(4):136-138) in a similar scope to this manuscript. It might be essential to compare that literature and this manuscript in the discussion section. -There are



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serial laboratory findings (days 1-30) in table 1, and it does not seem easy to understand the trending of those laboratory results. Please consider illustrating the figure instead of the table to clarify the tendency. Optionally, it, for example, might present table 1 as the original table 1 and add a new figure as a supplement figure. -In some places of the main text, there was used "IU/L." Nevertheless, there was "U/L" in Table 1. Please use a similar abbreviation. -The CARE checklist mentions the "strengths and limitations in your approach to this case." Therefore, please state the limitations of this case in the manuscript in the discussion section.