

# CHECKLIST OF RESPONSIBILITIES FOR SCIENTIFIC EDITORS

Manuscript page number (Without Figures): 28 Rate: 6.2 CNY per page

Editing Fee: <u>173.6</u> CNY

Figure count: <u>1</u> Figure handling time: <u>25</u> min Rate: <u>1</u> CNY per min

Editing Fee: 25 CNY

XML and PDF converting time: 60 min Rate: 1 CNY per min

Editing Fee: <u>60</u> CNY

Manuscript word count: 6222

Total Editing Fee: 258.6 CNY

Scientific Editor: Ji-Hong Liu

**Date of signature:** 2023/05/04

<u>2023/05/04</u> (mor

\_(month/day/year)

		Comments
Item No.	Specific items for verification	Yes=[Y]
		No= [N]
	General Information of the Manuscript	
	Name of journal: World Journal of Clinical Cases	
	Manuscript NO.: 83454	
	Column: Observational Study	
	Title: Incidence and peri-operative risk factors for development of	
1	acute kidney injury in patients after cardiac surgery: a prospective	[Y]
	observational study.	
	Authors: Stavros Dimopoulos, Georgios Zagkotsis, Charalambia	
	Kinti, Niki Rouvali, Magda Georgopoulou, Mariantzela Mavraki,	
	Androniki Tasouli, Efterpi Lyberopoulou, Antonios Roussakis,	
	Ioannis Vasileiadis, Serafim Nanas and Andreas Karabinis	



	<b>Reviewer code:</b> 05322345, and 03850246	
	First decision: 2023-03-14 07:44	
	Editorial Office's Comments	[Y]
	Science Editor: Remind Revision at 2023-03-22 08:18	
	Company Editor-in-Chief: I have reviewed the Peer-Review	
	Report, full text of the manuscript, and the relevant ethics	
	documents, all of which have met the basic publishing requirements	
	of the World Journal of Clinical Cases, and the manuscript is	
	conditionally accepted. I have sent the manuscript to the author(s)	
	for its revision according to the Peer-Review Report, Editorial	
	Office's comments and the Criteria for Manuscript Revision by	
	Authors. Please provide the original figure documents. Please	
	prepare and arrange the figures using PowerPoint to ensure that all	
2	graphs or arrows or text portions can be reprocessed by the editor.	
	In order to respect and protect the author's intellectual property	
	rights and prevent others from misappropriating figures without	
	the author's authorization or abusing figures without indicating the	
	source, we will indicate the author's copyright for figures originally	
	generated by the author, and if the author has used a figure	
	published elsewhere or that is copyrighted, the author needs to be	
	authorized by the previous publisher or the copyright holder	
	and/or indicate the reference source and copyrights. Please check	
	and confirm whether the figures are original (i.e. generated de novo	
	by the author(s) for this paper). If the picture is 'original', the author	
	needs to add the following copyright information to the bottom	
	needs to add the following copyright information to the bottom	



	right-hand side of the picture in PowerPoint (PPT): Copyright ©The	
	Author(s) 2023. Authors are required to provide standard	
	three-line tables, that is, only the top line, bottom line, and column	
	line are displayed, while other table lines are hidden. The contents	
	of each cell in the table should conform to the editing specifications,	
	and the lines of each row or column of the table should be aligned.	
	Do not use carriage returns or spaces to replace lines or vertical	
	lines and do not segment cell content.	
3	The fixed headings are copied.	[Y]
	The title concisely summarizes the main topic of the study and is	[Y]
	not too long (no more than 18 words). Words such as 'exploration',	
4	'research', 'analysis', 'observation', and 'investigation' are avoided.	
	The title does not start with 'The' and does not include any Arabic	
	numbers or uncommon abbreviations.	
5	A short running title is provided (no more than 6 words).	[Y]
	The authors' full family (sur)names and full/abbreviated first	[Y]
6	names are listed on the title page and are consistent with those	
	listed in the signed BPG Copyright License Agreement form.	
	The 'Author contributions' passage describes the specific	[Y]
	contribution(s) made by each author. The author's names are listed	
	in the following format: full family (sur)name followed by	
	abbreviated first and middles names.	
	e.g., "Wang CL and Liang L contributed equally to this work; Wang	
7	CL, Liang L, Fu JF, Zou CC, Hong F and Wu XM designed the	
	research study; Wang CL, Zou CC, Hong F and Wu XM performed	
	the research; Xue JZ and Lu JR contributed new reagents and	
	analytic tools; Wang CL, Liang L and Fu JF analyzed the data; and	
	Wang CL, Liang L and Fu JF wrote the manuscript. All authors	
	have read and approve the final manuscript."	
	1	



and program ID(s) if available, and contains no spelling errors.       [Y]         author's full first and family (sur)names, abbreviated title (e.g., MD,       [Y]         author's full first and family (sur)names, abbreviated title (e.g., MD,       [Y]         PhD), affiliated institute's name and complete postal address (including zip code) and e-mail (written in all lowercase), and contains no spelling errors.       [Y]         10       The Manuscript Tracking information (i.e., Received, Peer review started, First decision, Revised, Accepted, Article in press, and Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors.       [Y]         11       The Abstract section is formatted according to the article-specific style (structured vs unstructured) and word count thresholds, as follows:       [Y]         11       Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words.       [Y]         11       Non-structured abstract that is no less than 150 words.       [Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).       [Y]         12       The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,       [Y]		TT	
and program ID(s) if available, and contains no spelling errors.       [Y]         9       The 'Corresponding author' passage provides the corresponding author's full first and family (sur)names, abbreviated title (e.g., MD, PhD), affiliated institute's name and complete postal address (including zip code) and e-mail (written in all lowercase), and contains no spelling errors.         10       The Manuscript Tracking information (i.e., Received, Peer review started, First decision, Revised, Accepted, Article in press, and Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors.         10       The Abstract section is formatted according to the article-specific style (structured vs unstructured) and word count thresholds, as follows:         11       Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words.         11       Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words.         Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).         12       The 'Key words' list provides 5-10 keywords that reflect the main [Y]		The 'Supported by' statement describes the source(s) of financial	
11       The 'Corresponding author' passage provides the corresponding author's full first and family (sur)names, abbreviated title (e.g., MD, PhD), affiliated institute's name and complete postal address (including zip code) and e-mail (written in all lowercase), and contains no spelling errors.       [Y]         10       The Manuscript Tracking information ( <i>i.e.</i> , Received, Peer review started, First decision, Revised, Accepted, Article in press, and Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors.       [Y]         10       The Abstract section is formatted according to the article-specific style (structured vs unstructured) and word count thresholds, as follows:       [Y]         11       Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words.       [Y]         11       Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words.       [Y]         12       The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,       [Y]	8	support and includes the corresponding identification number(s)	[N]
91010109PhD), affiliated institute's name and complete postal address (including zip code) and e-mail (written in all lowercase), and contains no spelling errors.[Y]10The Manuscript Tracking information ( <i>i.e.</i> , Received, Peer review started, First decision, Revised, Accepted, Article in press, and Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors.[Y]10The Abstract section is formatted according to the article-specific style (structured vs unstructured) and word count thresholds, as follows: Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor; Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).[Y]12The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,[Y]		and program ID(s) if available, and contains no spelling errors.	
<ul> <li>9 PhD), affiliated institute's name and complete postal address (including zip code) and e-mail (written in all lowercase), and contains no spelling errors.</li> <li>10 The Manuscript Tracking information (<i>i.e.</i>, Received, Peer review started, First decision, Revised, Accepted, Article in press, and Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors.</li> <li>The Abstract section is formatted according to the article-specific style (structured <i>vs</i> unstructured) and word count thresholds, as follows:</li> <li>Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words.</li> <li>Field of Vision, Case Report and Letter to the Editor; Non-structured abstract that is no less than 150 words.</li> <li>Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).</li> <li>12 The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,</li> </ul>		The 'Corresponding author' passage provides the corresponding	[Y]
10Image: contains no spelling errors.Image: contains no spelling errors.10The Manuscript Tracking information ( <i>i.e.</i> , Received, Peer review started, First decision, Revised, Accepted, Article in press, and Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors.[Y]10The Abstract section is formatted according to the article-specific style (structured vs unstructured) and word count thresholds, as follows: Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).[Y]12The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,[Y]		author's full first and family (sur)names, abbreviated title (e.g., MD,	
contains no spelling errors.[Y]10The Manuscript Tracking information ( <i>i.e.</i> , Received, Peer review started, First decision, Revised, Accepted, Article in press, and Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors.[Y]The Abstract section is formatted according to the article-specific style (structured vs unstructured) and word count thresholds, as follows: Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).[Y]12The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,[Y]	9	PhD), affiliated institute's name and complete postal address	
10The Manuscript Tracking information ( <i>i.e.</i> , Received, Peer review started, First decision, Revised, Accepted, Article in press, and Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors.[Y]11The Abstract section is formatted according to the article-specific style (structured <i>vs</i> unstructured) and word count thresholds, as follows: Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).[Y]12The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,[Y]		(including zip code) and e-mail (written in all lowercase), and	
10started, First decision, Revised, Accepted, Article in press, and Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors.[Y]The Abstract section is formatted according to the article-specific style (structured vs unstructured) and word count thresholds, as follows: Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).[Y]12The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,[Y]		contains no spelling errors.	
10Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors.[Y]The Abstract section is formatted according to the article-specific style (structured vs unstructured) and word count thresholds, as follows: Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words. Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).[Y]12The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,[Y]		The Manuscript Tracking information (i.e., Received, Peer review	[Y]
Published online) are provided along with the corresponding editor and date for each item, and contain no spelling errors.The Abstract section is formatted according to the article-specific style (structured vs unstructured) and word count thresholds, as follows:[Y]Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words.[Non-structured abstract that is no less than 200 words.Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).[Y]12The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,[Y]	10	started, First decision, Revised, Accepted, Article in press, and	
Image: Content of the study. The first letter of each keyword is capitalized,1112121415151616171718191910101011121314141515161617171819191910101011111212121212121212121213141415151616171718191919191919101010 <t< td=""><td>10</td><td>Published online) are provided along with the corresponding editor</td><td></td></t<>	10	Published online) are provided along with the corresponding editor	
style (structured vs unstructured) and word count thresholds, as follows:Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words.Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).12The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,		and date for each item, and contain no spelling errors.	
11follows:11Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words.Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).12The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,		The Abstract section is formatted according to the article-specific	[Y]
11Commentary, Frontier, Diagnostic Advances, Medical Ethics, Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words.Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).12The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,		style (structured vs unstructured) and word count thresholds, as	
11Minireview, Review, Therapeutics Advances, and Topic Highlight: Non-structured abstract that is no less than 200 words.Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words.Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).12The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,		follows:	
11Non-structured abstract that is no less than 200 words.Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).12The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,		Commentary, Frontier, Diagnostic Advances, Medical Ethics,	
11Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).12The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,		Minireview, Review, Therapeutics Advances, and Topic Highlight:	
Field of Vision, Case Report and Letter to the Editor: Non-structured abstract that is no less than 150 words. Research articles: Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).12The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,	11	Non-structured abstract that is no less than 200 words.	
Research articles:Structured abstract with subsections for AIM (no more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).12The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,		Field of Vision, Case Report and Letter to the Editor:	
<ul> <li>more than 20 words); METHODS (no less than 80 words); RESULTS (no less than 120 words); and CONCLUSION (no more than 26 words).</li> <li>The 'Key words' list provides 5-10 keywords that reflect the main [Y] content of the study. The first letter of each keyword is capitalized,</li> </ul>		Non-structured abstract that is no less than 150 words.	
(no less than 120 words); and CONCLUSION (no more than 26 words). The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,		Research articles: Structured abstract with subsections for AIM (no	
words).       The 'Key words' list provides 5-10 keywords that reflect the main       [Y]         12       content of the study. The first letter of each keyword is capitalized,		more than 20 words); METHODS (no less than 80 words); RESULTS	
12The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized,		(no less than 120 words); and CONCLUSION (no more than 26	
12 content of the study. The first letter of each keyword is capitalized,		words).	
	12	The 'Key words' list provides 5-10 keywords that reflect the main	[Y]
		content of the study. The first letter of each keyword is capitalized,	
and each keyword is separated by a semicolon.		and each keyword is separated by a semicolon.	
The "citation" contains authors' names and manuscript title. The		The "citation" contains authors' names and manuscript title. The	[Y]
13 name of the first author should be typed in bold letters; the family	13	name of the first author should be typed in bold letters; the family	
(sur) name of all authors should be typed with the first letter		(sur) name of all authors should be typed with the first letter	



	capitalized, followed by their abbreviated first and middle initials.	
	For example, an article by Jae Moon Yoon, Ki Young Son, Chun Sick	
	Eom, Daniel Durrance, Sang Min Park will be written as Yoon JM,	
	Son KY, Eom CS, Durrance D, Park SM. Pre-existing diabetes	
	mellitus increases the risk of gastric cancer: A meta-analysis. World J	
	Gastroenterol 2019; In press	
	The 'Core tip' provides a summary (less than 100 words) of the	[Y]
14	study that outlines the most innovative and important arguments	
14	and core contents of the paper and will serve to effectively attract	
	readers.	
	The 'INTRODUCTION' section clearly describes the relevant	[Y]
	background information for the study. Only the most relevant and	
	current (within the past 5 years) literature is cited, with the	
	exception of rare instances of seminal literature citations. All	
	technical terms and/or abbreviations are explained and/or defined,	
	with the full name of abbreviations given upon first appearance in	
15	the text and the abbreviation presented in parentheses [i.e.,	
	"computed tomography (CT)"]. First-person pronouns (e.g., 'I',	
	'we') are used appropriately to clearly indicate the work performed	
	by the author(s). When weaknesses of previous studies are	
	described in the text to highlight the innovations related to the	
	current study, the information is presented carefully.	
	The 'MATERIALS AND METHODS' section clearly and accurately	[Y]
	describes all materials and methods used to obtain the data	
16	presented in the article and is adequate for a reader to repeat the	
	study.	



	The 'RESULTS' section concisely describes the observational and	[Y]
17	experimental results. Representative data and data that have	
	scientific significance are emphasized. Data is presented in either	
	the text, a table or figure ( <i>i.e.</i> , chart, diagram, graph or image), but is	
	not repeated among each. Information presented in the tables and	
	figures clearly describes the trends, meaning, and inferences.	
	Results described in textual form are accurate, concise and clear.	
	Statistical symbols are accurate. Statistical significance is expressed	[Y]
	as ${}^{a}P < 0.05$ , ${}^{b}P < 0.01$ ( $P > 0.05$ usually does not need to be denoted).	
18	If there are other series of <i>P</i> values, $cP < 0.05$ and $dP < 0.01$ are used,	
	and a third series of <i>P</i> values is expressed as $^{e}P < 0.05$ and $^{f}P < 0.01$ .	
	Statistical data is expressed as mean $\pm$ SD or mean $\pm$ SE.	
	The 'DISCUSSION' section (1) describes the main purpose and	[Y]
19	hypothesis of the study; (2) summarizes the most important results;	
	(3) illustrates and explains the results (but does not simply repeat	
	the data) and draws conclusions or inferences based on the results;	
	(4) points out the limitations of the study and their impact on the	
	results, as well as proposes further advice on future research	
	topic(s) or direction(s); and (5) describes the theoretical significance	
	and practical value of the findings.	
	The 'ACKNOWLEDGEMENTS' section expresses gratitude to any	[Y]
20	individuals or organizations for technical support (i.e., providing	
	instrumentation, equipment or experimental materials, and/or	
	assistance in experimental work), non-technical services (i.e., useful	
	inspiration, suggestions, guidance, or review), and/or any other	
	auxiliary work.	
01	The 'ARTICLE HIGHLIGHTS' section provides comments for	[Y]
21	original articles in accordance with the specified format.	



	The 'REFERENCES' section lists the references in the Vancouver	[Y]
	style. This style uses Arabic numeral in-text citations based on the	
	order of the first appearance of a source in the text. For citations	
	where the author's name is indicated in the text, a superscript	
	number should be placed following the name ( <i>i.e.,</i> "Pang <i>et al</i> "). For	
	citations where no author is indicated, a superscript number should	
22	be placed at the end of the sentence. Respective examples are: " $Ma^{[1]}$	
	reported", "Pan et al <sup>[2-5]</sup> indicated"; "PCR has a high	
	sensitivity <sup>[6,9]</sup> ." No superscript numbers are used when the	
	reference number is described in the text; for example, "The	
	experimental method used has been described in reference [8]." The	
	style of reference citations in tables is the same as that in the text	
	( <i>e.g.</i> , Pan <i>et al</i> <sup>[2-5]</sup> , please see reference [8]).	
	Journal references have been verified to ensure that there are no	[Y]
	duplicate references and that the PMID numbers are correct. For	
	references not yet included in PubMed: the name of Chinese	
	journals is spelled out using Chinese Pinyin, with the first letter of	
23	each word capitalized (e.g., Shijie Huaren Xiaohua Zazhi); the name of	
	journals in other languages are listed according to indexing	
	information retrieved from Google. Book references are presented	
	with all the information relevant to the electronic version.	
	The number of cited references is appropriate for the article type, as	[Y]
24	follows:	
	<u>Commentary:</u> no less than 50;	
	<u>Review:</u> no less than 100;	
	<u>Article:</u> no less than 30/26;	
	Case Report and Letter to the Editor: no less than 1.	
	The ethics-related statements are provided in accordance with the	[Y]
25	manuscript type (e.g., Manuscript NoInstitutional review board	
	statement, Manuscript NoAnimal care and use statement, etc.).	



	1	
26	The names of the peer reviewers and the scientific editor are present	[Y]
	at the end of the paper (e.g., P-Reviewer: Hugot D S-Editor: Wang	
	JL).	
	The order and numerical labeling of tables and figures is consistent	[Y]
	with their appearance and presentation in the text. Symbols in	
	tables ( <i>e.g.</i> , +, -, $\times$ , $\div$ , *) correctly correspond to the definitions in the	
27	footnotes. Only one legend is provided for each multi-panel figure	
27	consisting of color graphs, black and white graphs, or line graphs	
	that depicts data of the same theme. For example: Figure 1	
	Pathological changes in atrophic gastritis tissue before and after	
	treatment. A:; B:; C:; D:; E:; F:	
	Split pictures include flow charts, line graphs, histograms, and	[Y]
28	graphs including text. Unsplit pictures include meta-analysis	
	diagrams, PCR amplification curves, and survival curves.	
20	The author(s) highlighted the changes made to the manuscript	[Y]
29	according to the peer-reviewers' comments.	
20	The responses to the peer-reviewers' comments are consistent with	[Y]
30	the changes made to the manuscript.	
	The revised manuscript is provided (file name: Manuscript	[Y]
	NoReview; e.g., 870- Review).	
	The letter of peer-reviewers' comments is provided (file name:	
31	Manuscript NoPeer-review(s); <i>e.g.</i> , 870-Peer-review(s)).	
	The response letter is provided (file name: Manuscript	
	NoAnswering reviewers; e.g., 870-Answering reviewers).	
32	The related ethics and relevant documents are provided, such as (1)	[Y]
	Approved grant application form(s) or funding agency copy of any	
	approval document(s) (file name: Manuscript NoGrant application	
	form(s)); (2) Biostatistics review certificate (file name: Manuscript	
	NoBiostatistics statement); (3) Conflict-of-interest statement (file	
	name: Manuscript NoConflict-of-interest statement); (4) Clinical	
	· · · · · · · · · · · · · · · · · · ·	



	trial registration statement (file name: Manuscript NoClinical trial	
	registration statement); (5) Institutional review board approval form	
	or document (file name: Manuscript NoInstitutional review board	
	statement); (6) Institutional animal care and use committee	
	approval form or document (file name: Manuscript	
	NoInstitutional animal care and use committee statement), and (7)	
	Signed informed consent form(s) or document(s) (file name:	
	Manuscript NoInformed consent statement).	
	All authors signed the BPG Copyright license agreement form (file	[Y]
33	name: Manuscript NoCopyright license agreement; e.g.,	
	870-Copyright license agreement).	
	The language certificate provided by authors who are non-native	[Y]
34	speakers of English meets the BPG requirements (file name:	
	Manuscript NoLanguage certificate; e.g., 870-Language certificate).	
	The photos licensed in the Agreement for Use of Personal Photos	[Y]
25	are consistent with those in the paper (file name: Manuscript	
35	NoAgreement for use of personal photos; e.g., 870-Agreement for	
	use of personal photos).	
	This document (Checklist of Responsibilities for Scientific Editors)	[Y]
36	has been saved under the file name: manuscript NoScientific	
	editor work list (e.g., 870-Scientific editor work list).	
	A CrossCheck investigation (an effective tool for detecting unoriginal	[Y]
	content, enabling our editors to preserve the journal's integrity and	
	the authors' copyright) has been performed for the manuscript via	
	the website: http://www.ithenticate.com/. The results document	
37	contains the following information for the manuscript: "Name of	
	journal", "Manuscript No.", "Columns", "Title" and "Author list".	
	The Figure of the CrossCheck results is saved in JPEG format (.jpg) at	
	1440 $\times$ 680 pixel resolution. The PDF of the <i>CrossCheck</i> results has	
	been saved under the file name: manuscript No CrossCheck report	
L		



r		
	(e.g., 870-CrossCheck report). The Google searches have also been	
	performed to further ensure publication of original content.	
38	The text of the manuscript is typed in Book Antiqua font, 12 pt, with	[Y]
30	1.5 line spacing.	
	The primary responsibilities of our scientific editors include carefully	y checking the
	entire manuscript and all accompanying materials for: (1) error	rs in spelling,
Responsibilities	grammar, punctuation and wording; (2) suitability of tables, figures, f	igure data and
of scientific	legends; (3) accurate and appropriate presentation of symbols ( <i>e.g.</i> +,	-, ×, ÷, %, *) in
editors	tables and figures; and (4) complete and comprehensive revision of t	
	according to the reviewers' comments.	
	Manuscript reception and registration→Initial review by scientific	c editor→Peer
	review $\rightarrow$ End of peer review $\rightarrow$ First round of meeting evalu	ation→To be
	accepted $\rightarrow$ Revision by the author(s) $\rightarrow$ Second round of meeting eval	uation→To be
	accepted/revised/rejected→Final review by the Editor-in-Chief	(final quality
Publication	control for academic content and language quality)→Final acceptance	e and charging
process	of publication fee $\rightarrow$ Language editing $\rightarrow$ Production $\rightarrow$ Proofreading by scientific	
	editor→Proofreading by deputy editor→Final review by Editor-in-0	Chief→Release
	of online open-access papers in electronic form on the BPG websi	te→Release of
	online papers on PubMed Central→Delivery of high-quality PDF n	reprints to the
	author(s) $\rightarrow$ End of the publication process.	