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CHECKLIST OF RESPONSIBILITIES FOR SCIENTIFIC EDITORS

Manuscript page number (Without Figures): 27 Rate:	6.2 CNY per page
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Editin	g Fee: 0 CNY
XML and PDF converting time: 0 min Ra	te: 1 CNY per min
Editir	ng Fee: 0 CNY
Manuscript word c	ount: 5872
Total Editing Fo	ee: <u>167.4</u> CNY
Scientific	Editor: Jia-Ping Yan
Data of signature: 7/2/2022	(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.: 84475	
	Column: Observational Study	
1	Title: Time usage analysis and satisfaction comparison by	[Y]
	occupational area according to the sex of single-parent families	
	Authors: Woo-Hyuk Jang, Jong-Sik Jang and Jin-Hyuk Bang	
	Reviewer code: 05560823, 05789838, and 05789838	
	First decision: 2023-05-12 00:59	
	Editorial Office's Comments	12/1
2	Science Editor: The manuscript has been peer-reviewed, and it's	[Y]



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ready for the first decision.

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. 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. Please upload the approved grant application form(s) or funding agency copy of any approval document(s). Before final acceptance, when revising the manuscript, the author must supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript. To this end, authors are advised to apply a new tool, the RCA. RCA is an artificial intelligence technology-based open multidisciplinary citation analysis database. In it, upon obtaining search results from the keywords entered by the author, "Impact Index Per Article" under "Ranked by" should be selected to find the latest highlight articles,



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3	The fixed headings are copied.	[Y]
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	not too long (no more than 18 words). Words such as 'exploration',	
4	'research', 'analysis', 'observation', and 'investigation' are avoided.	[Y]
	The title does not start with 'The' and does not include any Arabic	
	numbers or uncommon abbreviations.	
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6	names are listed on the title page and are consistent with those	[Y]
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	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	[Y]
	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	
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8	support and includes the corresponding identification number(s)	[N]
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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. 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. 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). The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized, and each keyword is separated by a semicolon. The "citation" contains authors' names and manuscript title. The name of the first author should be typed in bold letters; the family		The 'Corresponding author' passage provides the corresponding	
(including zip code) and e-mail (written in all lowercase), and contains no spelling errors. 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. 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). The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized, and each keyword is separated by a semicolon. The "citation" contains authors' names and manuscript title. The name of the first author should be typed in bold letters; the family		author's full first and family (sur)names, abbreviated title (e.g., MD,	
contains no spelling errors. 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. 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). The 'Key words' list provides 5-10 keywords that reflect the main content of the study. The first letter of each keyword is capitalized, and each keyword is separated by a semicolon. The "citation" contains authors' names and manuscript title. The name of the first author should be typed in bold letters; the family	9	PhD), affiliated institute's name and complete postal address	[Y]
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name of the first author should be typed in bold letters; the family		and each keyword is separated by a semicolon.	
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	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	
14	study that outlines the most innovative and important arguments	[Y]
	and core contents of the paper and will serve to effectively attract	[+]
	readers.	
	The 'INTRODUCTION' section clearly describes the relevant	
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	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.,	[Y]
	"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	
	describes all materials and methods used to obtain the data	
16	presented in the article and is adequate for a reader to repeat the	[Y]
	study.	
	The 'RESULTS' section concisely describes the observational and	
	experimental results. Representative data and data that have	
	scientific significance are emphasized. Data is presented in either	
17	the text, a table or figure (<i>i.e.</i> , chart, diagram, graph or image), but is	[V]
1/		[Y]
	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.	



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	Statistical symbols are accurate. Statistical significance is expressed	
	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 P values, ${}^{c}P < 0.05$ and ${}^{d}P < 0.01$ are used,	[Y]
	and a third series of P values is expressed as $^{\rm e}P$ < 0.05 and $^{\rm f}P$ < 0.01.	
	Statistical data is expressed as mean \pm SD or mean \pm SE.	
	The 'DISCUSSION' section (1) describes the main purpose and	
	hypothesis of the study; (2) summarizes the most important results;	
	(3) illustrates and explains the results (but does not simply repeat	
10	the data) and draws conclusions or inferences based on the results;	F2/1
19	(4) points out the limitations of the study and their impact on the	[Y]
	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	
	individuals or organizations for technical support (i.e., providing	
20	instrumentation, equipment or experimental materials, and/or	ENTI
20	assistance in experimental work), non-technical services (i.e., useful	[N]
	inspiration, suggestions, guidance, or review), and/or any other	
	auxiliary work.	
01	The 'ARTICLE HIGHLIGHTS' section provides comments for	F2/1
21	original articles in accordance with the specified format.	[Y]
	The 'REFERENCES' section lists the references in the Vancouver	
	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	
22	number should be placed following the name (i.e, "Pang et al"). For	[Y]
	citations where no author is indicated, a superscript number should	

be placed at the end of the sentence. Respective examples are: "Ma[1] reported", "Pan et al[2-5] indicated"; "PCR has a high sensitivity^[6,9]." No superscript numbers are used when the



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	reference number is described in the text; for example, "The	
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	style of reference citations in tables is the same as that in the text	
	(e.g., Pan et al ^[2-5] , please see reference [8]).	
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	references not yet included in PubMed: the name of Chinese	
23	journals is spelled out using Chinese Pinyin, with the first letter of	[Y]
23	each word capitalized (e.g., Shijie Huaren Xiaohua Zazhi); the name of	[1]
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24	Commentary: no less than 50;	13/1
24	Review: no less than 100;	[Y]
	Article: no less than 30/26;	
	Case Report and Letter to the Editor: no less than 1.	
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25	manuscript type (e.g., Manuscript NoInstitutional review board	[Y]
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26	at the end of the paper (e.g., P-Reviewer: Hugot D S-Editor: Wang	[Y]
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	The order and numerical labeling of tables and figures is consistent	
	with their appearance and presentation in the text. Symbols in	
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27	footnotes. Only one legend is provided for each multi-panel figure	[V]
27	consisting of color graphs, black and white graphs, or line graphs	[Y]
	that depicts data of the same theme. For example: Figure 1	
	Pathological changes in atrophic gastritis tissue before and after	
	treatment. A:; B:; C:; E:; F:	
	Split pictures include flow charts, line graphs, histograms, and	F2/2
28	graphs including text. Unsplit pictures include meta-analysis	[Y]
	diagrams, PCR amplification curves, and survival curves.	
20	The author(s) highlighted the changes made to the manuscript	[3/]
29	according to the peer-reviewers' comments.	[Y]
20	The responses to the peer-reviewers' comments are consistent with	[3/]
30	the changes made to the manuscript.	[Y]
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