



**PEER-REVIEW REPORT**

**Name of journal:** *World Journal of Clinical Cases*

**Manuscript NO:** 89800

**Title:** Ultrasound diagnosis of congenital Morgagni hernias: Ten years of experience at two Chinese centers

**Provenance and peer review:** Unsolicited manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer’s code:** 03372482

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Academic Research, Professor

**Reviewer’s Country/Territory:** Egypt

**Author’s Country/Territory:** China

**Manuscript submission date:** 2023-11-13

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-11-14 05:16

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**Review time:** 1 Hour

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Novelty of this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
<b>Creativity or innovation of this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation



<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<b>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

Background: Morgagni hernias are rare anomalies that are easily misdiagnosed or missed. We aimed to summarize the ultrasound imaging characteristics of Morgagni hernias through a comparison of imaging and surgical results. Methods The records of children with Morgagni hernias who were hospitalized at two hospitals between January 2013 and November 2023 were retrospectively reviewed in terms of clinical findings, ultrasound (US) features, and operative details. Results Between 2013 and 2023, we observed nine (five male and four female) children with Morgagni hernias. Upper abdominal scanning revealed a widening of the prehepatic space, with an abnormal channel extending from the xiphoid process to the right or left side of the thoracic cavity. The channel had intestinal duct and intestinal gas echoes. Hernia contents were found in the transverse colon (n = 6), the colon and small intestine (n = 2), and the colon and stomach (n = 1). Among the patients, seven had a right-sided lesion, two had a left-sided lesion, and all of them had hernial sacs. Conclusions US imaging can accurately determine the location, extent, and content of Morgagni hernias. For suspected Morgagni hernias, we recommend performing a sonographic screening first. In General:



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it's a good paper and the subject of the manuscript is applicable and useful. Title: the title properly explains the purpose and objective of the article Abstract: abstract contains an appropriate summary for the article, the language used in the abstract is easy to read and understand, and there are no suggestions for improvement. Finally, this was an attractive article. In its current state, it adds much new insightful information to the field. Therefore, I accept that paper to be published in your journal.