



**Baishideng
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PEER-REVIEW REPORT

Name of journal: World Journal of Radiology

Manuscript NO: 43002

Title: Incidental extravascular findings (EVIF) in patients undergoing upper limb computed tomographic angiography (CTA) performed for upper limb arterial assessment with special focus on undiagnosed malignancy

Reviewer's code: 00189260

Reviewer's country: Czech Republic

Science editor: Jia-Ping Yan

Date sent for review: 2018-10-24

Date reviewed: 2018-10-27

Review time: 2 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Incidentalomas are important issue. However, many such incidental findings are of little importance because they are immediately recognized as unrelated to any condition that



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would threaten the patient's health. 61% of all cases of RCC being detected incidentally on CT scans performed for another indication. However, the overall death rate from RCC has changed little, despite a marked increase in early detection. Practitioners in all medical disciplines recognize the high frequency of incidentally detected findings, that is, findings that do not have associated clinical symptoms. The economic burden of these findings has been sparsely studied in the published literature to date. Therefore I suggest to give more consideration to the ACR Incidental Findings Committee recommendation. I miss in this article also clear practical recommendation how to report this incidentalomas and how to follow up these findings.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- The same title
- Duplicate publication
- Plagiarism
- No

BPG Search:

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PEER-REVIEW REPORT

Name of journal: World Journal of Radiology

Manuscript NO: 43002

Title: Incidental extravascular findings (EVIF) in patients undergoing upper limb computed tomographic angiography (CTA) performed for upper limb arterial assessment with special focus on undiagnosed malignancy

Reviewer's code: 03569706

Reviewer's country: Romania

Science editor: Jia-Ping Yan

Date sent for review: 2018-11-19

Date reviewed: 2018-11-26

Review time: 7 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	(General priority)	Peer-reviewer's expertise on the topic of the manuscript:
<input type="checkbox"/> Grade E: Do not publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Minor revision	<input checked="" type="checkbox"/> Advanced
		<input checked="" type="checkbox"/> Major revision	<input type="checkbox"/> General
		<input type="checkbox"/> Rejection	<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Title: do not include any abbreviation in the title of the manuscript. Abstract: - Write the aim of the study at past tense. - define the EVIFs abbreviation. - where the study



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was conducted? - provide the 95% confidence intervals for all %. - since this is not a population study use frequency instead of incidence. - the conclusions must be supported by the reported results. Introduction: - what "reduce cost" mean? and the cost is reduce compared to what? Materials and methods: - Provide the number and the date of the ethics approval. - Include in this section just the inclusion and exclusion criteria. Do not include in this section any information regarding the number of investigated cases. - Where the study was conducted? - describe the statistical analysis performed in this study. Results: - all %s must associate the 95% confidence intervals whenever the sample size is higher than 30 to allow a proper interpretation. Opposite, report the number of cases to n. Discussion: - "Incidental findings discovered on CT are defined as an unforeseen pathology encountered in a patient being scanned for another indication [11]. In the case of CT angiography, EVIFs are becoming ever more frequently encountered in daily clinical practice, especially with the exponential proliferation of CT imaging and the gradual phasing out of DSA as a first-line modality for peripheral arterial disease and acute emergent arterial imaging ." belongs to Introduction. - "In 13 (8.4%) patients, the EVIF were identified as requiring immediate follow-up with further diagnostic tests. " this is a result. - Start this section by discussing your results with reference to your tables. - "In our study, follow-up data was available in 5/13 (38.5%) of Category A EVIFs" this is a result. Do not include any new results in this section. - Discuss the clinical utility of your findings. Conclusions: - Do not repeat here the results. - You can talk about a population of the sample size of 79 just for rare diseases. - The conclusions must be supported by your results. Tables: - Do not include % for a sample size of 13 (Table 1 and 3).

INITIAL REVIEW OF THE MANUSCRIPT

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BPG Search:

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- No



PEER-REVIEW REPORT

Name of journal: World Journal of Radiology

Manuscript NO: 43002

Title: Incidental extravascular findings (EVIF) in patients undergoing upper limb computed tomographic angiography (CTA) performed for upper limb arterial assessment with special focus on undiagnosed malignancy

Reviewer’s code: 02669684

Reviewer’s country: Egypt

Science editor: Jia-Ping Yan

Date sent for review: 2018-11-26

Date reviewed: 2018-12-01

Review time: 5 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input checked="" type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input checked="" type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer’s expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

work is very interesting reflecting the importance of careful evaluation of any study for the non-related findings. language needs revision. references need revision according



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to the guidelines.

INITIAL REVIEW OF THE MANUSCRIPT

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