

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Endoscopy*

Manuscript NO: 77930

Title: Role of Endoscopic Ultrasound in Evaluation of Patients with Missed Common Bile Duct Stones

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02542351

Position: Editorial Board

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: Mexico

Author's Country/Territory: Egypt

Manuscript submission date: 2022-06-02

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-06-03 15:00

Reviewer performed review: 2022-06-15 15:46

Review time: 12 Days

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input 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 checked="" type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input checked="" type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Peer-reviewer statements	Peer-Review: [<input checked="" type="radio"/>] Anonymous [<input type="radio"/>] Onymous Conflicts-of-Interest: [<input type="radio"/>] Yes [<input checked="" type="radio"/>] No
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SPECIFIC COMMENTS TO AUTHORS

I read with interest the manuscript Role of Endoscopic Ultrasound in Evaluation of Patients with Missed Common Bile Duct Stones. The authors assess and compare the diagnostic accuracy of EUS and MRCP in intermediate choledocholithiasis risk and presumed idiopathic acute pancreatitis patients. The manuscript is well written and it confirms previous observations from several other similar publications. Table 1 adds nothing to the results and could be deleted. Results and discussion could add or consider mention more on the acute pancreatitis groups on regards outcomes and findings since it would be of great clinical interest and improve the overall significance of the study.

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Title: Role of Endoscopic Ultrasound in Evaluation of Patients with Missed Common Bile Duct Stones

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05492083

Position: Peer Reviewer

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Egypt

Manuscript submission date: 2022-06-02

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-06-16 01:59

Reviewer performed review: 2022-06-25 08:00

Review time: 9 Days and 6 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
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SPECIFIC COMMENTS TO AUTHORS

This article was to investigate the Role of Endoscopic Ultrasound in Evaluation of Patients with Missed Common Bile Duct Stones. The results showed that EUS is more accurate than MRCP in detecting non-floating stones in the papillary region and small stones, especially those less than 5 mm, and defining the size and number of stones. Some questions exist in the manuscript as below: 1. There are differences in endoscopic skill between endoscopists, it is better to analyze the data for expert and non-expert separately. 2. EUS and MRCP, which one was performed first? As well as whether the double-blind experiment is adopted, determined the accuracy of the experimental results. 3. MRCP is non-invasive and easy to perform. Is the coincidence rate of MRCP combined with EUS higher than that of single diagnosis? It should be considered in the experimental group design. 4. The format of letters and numbers should be consistent. 5. Tables 4 and 5 might be better combined. 6. Published after modification.