

CHECKLIST OF RESPONSIBILITIES FOR SCIENTIFIC EDITORS

Manuscript page number: 9

Manuscript word count: 1928

		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.: 66102	
	Column: Case Report	
	Title: Excimer laser coronary atherectomy for a severe calcified	
1	coronary ostium lesion: A case report	[Y]
	Authors: Fang-Jie Hou, Xiao-Teng Ma, Yujie Zhou and Jun Guan	
	Reviewer code: 03496799	
	First decision: 2021-07-05 09:44	
	Scientific Editor: Jia-Ru Fan	
	Date of signature: <u>Octobe/21/2021 (month/day/year)</u>	
	Editorial Office's Comments	
	Science Editor: 1 Scientific quality: The manuscript is a case report	
	of everely calcified coronary ostial lesion in which excimer laser	
2	coronary atherectomy (ELCA) was used to modify the calcified	
	plaque. The topic is within the scope of the WJCC. (1) Classification:	[Y]
	Grade C; (2) Summary of the Peer-Review Report: this paper is	
	well written and interesting to read. However please addresse the	
	following concerns, authors need to demonstrate plaque	



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modification by showing IVUS images including changes in plaque morphology after ELCA and balloon dilatation before stenting, provide practical considerations on choosing between rotational atherectomy and ELCA to ablate severe calcium for vessel preparation in the aorto-ostial lesion. (3) Format: There are 1 figure; (4) References: A total of 6 references are cited, including 1 reference published in the last 3 years; (5) Self-cited references: There is no self-cited references. The self-referencing rates should be less than 10%. Please keep the reasonable self-citations (i.e. those that are most closely related to the topic of the manuscript) and remove all other improper self-citations. If the authors fail to address the critical issue of self-citation, the editing process of this will manuscript be terminated: and (6) References recommendations: The authors have the right to refuse to cite improper references recommended by the peer reviewer(s), especially references published by the peer reviewer(s) him/herself (themselves). If the authors find the peer reviewer(s) request for the authors to cite improper references published by him/herself (themselves), please send the peer reviewer's ID number to editorialoffice@wjgnet.com. The Editorial Office will close and remove the peer reviewer from the F6Publishing system immediately. 2 Language evaluation: Classification: Grade B. Certificate from MedE Editing Service was issued. 3 Academic norms and rules: The authors provided the CARE Checklist-2016. No academic misconduct was found in the Google/Bing search. 4



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Supplementary comments: This is an unsolicited manuscript. The topic has not previously been published in the WJCC. 5 Issues raised: (1) The authors did not provide original pictures. Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor; (2) References should be updated to recent literature; (3) Figure legends should be written per journal standard; (4) Manuscript format should be updated per journal standard; (5) Copyright License Agreement and Conflict-of-Interest Disclosure Form are missing. (6) Current informed consent is not acceptable, please provide the content on the hospital letterhead. **Re-Review**: Required. 7 6 Recommendation: Conditional acceptance.

Company Editor-in-Chief: 1 Scientific quality: The manuscript is a case report of everely calcified coronary ostial lesion in which excimer laser coronary atherectomy (ELCA) was used to modify the calcified plaque. The topic is within the scope of the WJCC. (1) Classification: Grade C; (2) Summary of the Peer-Review Report: this paper is well written and interesting to read. However please addresse the following concerns, authors need to demonstrate plaque modification by showing IVUS images including changes in plaque morphology after ELCA and balloon dilatation before stenting, provide practical considerations on choosing between rotational atherectomy and ELCA to ablate severe calcium for vessel preparation in the aorto-ostial lesion. (3) Format: There are 1



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figure; (4) References: A total of 6 references are cited, including 1 reference published in the last 3 years; (5) Self-cited references: There is no self-cited references. The self-referencing rates should be less than 10%. Please keep the reasonable self-citations (i.e. those that are most closely related to the topic of the manuscript) and remove all other improper self-citations. If the authors fail to address the critical issue of self-citation, the editing process of this will be terminated; (6) manuscript and References recommendations: The authors have the right to refuse to cite improper references recommended by the peer reviewer(s), especially references published by the peer reviewer(s) him/herself (themselves). If the authors find the peer reviewer(s) request for the authors to cite improper references published by him/herself (themselves), please send the peer reviewer's ID number to editorialoffice@wjgnet.com. The Editorial Office will close and remove the peer reviewer from the F6Publishing system immediately. 2 Language evaluation: Classification: Grade B. Certificate from MedE Editing Service was issued. 3 Academic norms and rules: The authors provided the CARE Checklist-2016. No academic misconduct was found in the Google/Bing search. 4 Supplementary comments: This is an unsolicited manuscript. The topic has not previously been published in the WJCC. 5 Issues raised: (1) The authors did not provide original pictures. Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or



	text portions can be reprocessed by the editor; (2) References	
	should be updated to recent literature; (3) Figure legends should be	
	written per journal standard; (4) Manuscript format should be	
	updated per journal standard; (5) Copyright License Agreement	
	and Conflict-of-Interest Disclosure Form are missing. (6) Current	
	informed consent is not acceptable, please provide the content on	
	the hospital letterhead. 6 Re-Review: Required. 7	
	Recommendation: Conditional acceptance.	
3	The fixed headings are copied.	[Y]
	The title concisely summarizes the main topic of the study and is	
	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.	
5	A short running title is provided (no more than 6 words).	[Y]
	The authors' full family (sur)names and full/abbreviated first	
6	names are listed on the title page and are consistent with those	[Y]
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	contribution(s) made by each author. The author's names are listed	
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	abbreviated first and middles names.	
	<i>e.g.,</i> "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	
	have read and approve the final manuscript."	



8	The 'Supported by' statement describes the source(s) of financial	
	support and includes the corresponding identification number(s)	[N]
	and program ID(s) if available, and contains no spelling errors.	
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9	PhD), affiliated institute's name and complete postal address	[Y]
	(including zip code) and e-mail (written in all lowercase), and	
	contains no spelling errors.	
	The Manuscript Tracking information (i.e., Received, Peer review	
10	started, First decision, Revised, Accepted, Article in press, and	D/1
10	Published online) are provided along with the corresponding editor	[Y]
	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:	
44	Non-structured abstract that is no less than 200 words.	
11	Field of Vision, Case Report and Letter to the Editor:	[Y]
	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	
12	content of the study. The first letter of each keyword is capitalized,	[Y]
	and each keyword is separated by a semicolon.	
	The "citation" contains authors' names and manuscript title. The	
13	name of the first author should be typed in bold letters; the family	[Y]
	(sur) name of all authors should be typed with the first letter	
	1	



	1	
	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	
14	study that outlines the most innovative and important arguments	
14	and core contents of the paper and will serve to effectively attract	[Y]
	readers.	
	The 'INTRODUCTION' section clearly describes the relevant	
	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.,	[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	
16	describes all materials and methods used to obtain the data	
	presented in the article and is adequate for a reader to repeat the	[N]
	study.	



17	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	
	the text, a table or figure (<i>i.e.</i> , chart, diagram, graph or image), but is	[N]
	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	
	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, ${}^{c}P < 0.05$ and ${}^{d}P < 0.01$ are used,	[N]
	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	
	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;	[Y]
19	(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	
	individuals or organizations for technical support (<i>i.e.</i> , providing	
20	instrumentation, equipment or experimental materials, and/or	
	assistance in experimental work), non-technical services (<i>i.e.</i> , useful	[N]
	inspiration, suggestions, guidance, or review), and/or any other	
	auxiliary work.	
	The 'ARTICLE HIGHLIGHTS' section provides comments for	
21	original articles in accordance with the specified format.	[N]
-	1	1



	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	
	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]	[Y]
	reported", "Pan et al ^[2-5] indicated"; "PCR has a high	
	sensitivity ^[6,9] ." 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> ^[2-5] , please see reference [8]).	
	Journal references have been verified to ensure that there are no	
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	references not yet included in PubMed: the name of Chinese	
22	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	
	follows:	
24	<u>Commentary:</u> no less than 50;	[1/]
24	<u>Review:</u> no less than 100;	[Y]
	<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	
25	manuscript type (e.g., Manuscript NoInstitutional review board	[N]
	statement, Manuscript NoAnimal care and use statement, etc.).	



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	
	with their appearance and presentation in the text. Symbols in	
	tables (e.g., +, -, ×, \div , *) correctly correspond to the definitions in the	
27	footnotes. Only one legend is provided for each multi-panel figure	[]/]
21	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:; D:; E:; F:	
	Split pictures include flow charts, line graphs, histograms, and	
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	[Y]
29	according to the peer-reviewers' comments.	
•••	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	
	NoReview; <i>e.g.</i> , 870- Review).	
01	The letter of peer-reviewers' comments is provided (file name:	15 (1
31	Manuscript NoPeer-review(s); <i>e.g.</i> , 870-Peer-review(s)).	[Y]
	The response letter is provided (file name: Manuscript	
	NoAnswering reviewers; <i>e.g.</i> , 870-Answering reviewers).	
32	The related ethics and relevant documents are provided, such as (1)	
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	approval document(s) (file name: Manuscript NoGrant application	[3/]
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	name: Manuscript NoConflict-of-interest statement); (4) Clinical	



	trial registration statement (file name: Manuscript NoClinical trial	
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	or document (file name: Manuscript NoInstitutional review board	
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	approval form or document (file name: Manuscript	
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	journal", "Manuscript No.", "Columns", "Title" and "Author list".	
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		1
	(e.g., 870-CrossCheck report). The Google searches have also been	
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38	The text of the manuscript is typed in Book Antiqua font, 12 pt, with 1.5 line spacing.	[Y]
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	legends; (3) accurate and appropriate presentation of symbols (e.g. +,	-, ×, ÷, %, *) in
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	according to the reviewers' comments.	
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