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CHECKLIST OF RESPONSIBILITIES FOR SCIENTIFIC EDITORS

Manuscript page number: 32

Manuscript word count: 8558

		Comments
Item No.	Specific items for verification	Yes=[Y]
		No= [N]
	General Information of the Manuscript	
	Name of journal: World Journal of Critical Care Medicine	
	Manuscript NO.: 65898	
	Column: Review	
1	Title: Orosomucoid-like protein 3, rhinovirus and asthma	[2/]
1	Authors: You-Ming Zhang	[Y]
	Reviewer code: 05432496, 00005290, and 00005290	
	First decision: 2021-04-06 16:41	
	Scientific Editor: Li-Li Wang	
	Date of signature: August 20, 2021 (month/day/year)	
	Editorial Office's Comments	
	Science Editor: 1 Scientific quality: The manuscript describes a	
	Review of the ORMDL3, rhinovirus and asthma. The topic is within	
	the scope of the WJCCM. (1) Classification: Grade A and Grade B;	
2	(2) Summary of the Peer-Review Report: The quality of the	[Y]
	manuscript is very good. Authors should discuss more about	
	expression of ORMDL3 in eosinophils The questions raised by the	
	reviewers should be answered; (3) Format: There are 2 tables; (4)	
	References: A total of 107 references are cited, including 10	



Baishideng **Publishing**

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references published in the last 3 years; (5) Self-cited references: self-cited references; and References (6)recommendations (kindly remind): 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 and Grade B. The authors are native English speakers. 3 Academic norms and rules: No academic misconduct was found in the Bing search. 4 Supplementary comments: This is an invited manuscript. No financial support was obtained for the study. The topic has not previously been published in the WJCCM. 5 Issues raised: (1) The "Author Contributions" section is missing. Please provide the author contributions; (2) PMID and DOI numbers are missing in the reference list. Please provide the PubMed numbers and DOI citation numbers to the reference list and list all authors of the references. Please revise throughout. 6 Recommendation: Conditional acceptance.

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



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	of the World Journal of Critical Care Medicine, 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.	
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]
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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	
	have read and approve the final manuscript."	
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8	support and includes the corresponding identification number(s)	[N]
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	The 'Corresponding author' passage provides the corresponding	
	author's full first and family (sur)names, abbreviated title (e.g., MD,	
9	PhD), affiliated institute's name and complete postal address	[Y]
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10	started, First decision, Revised, Accepted, Article in press, and	[]/]
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	
	name of the first author should be typed in bold letters; the family	
13	(sur) name of all authors should be typed with the first letter	[V]
13	capitalized, followed by their abbreviated first and middle initials.	[Y]
	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,	



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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	[N]
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,	
45	with the full name of abbreviations given upon first appearance in	D.C.
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	[NI]
10	presented in the article and is adequate for a reader to repeat the	[N]
	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.e., 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.	



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18	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).	
	If there are other series of P values, $^{c}P < 0.05$ and $^{d}P < 0.01$ are used,	[N]
	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	
40	the data) and draws conclusions or inferences based on the results;	
19	(4) points out the limitations of the study and their impact on the	[N]
	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	
20	assistance in experimental work), non-technical services (i.e., useful	[N]
	inspiration, suggestions, guidance, or review), and/or any other	
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	citations where no author is indicated, a superscript number should	
	be placed at the end of the sentence. Respective examples are: "Ma ^[1]	
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	sensitivity ^[6,9] ." No superscript numbers are used when the	
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	reference number is described in the text; for example, "The	
	experimental method used has been described in reference [8]." The	
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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	[Y]
23	each word capitalized (e.g., Shijie Huaren Xiaohua Zazhi); the name of	
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	The number of cited references is appropriate for the article type, as	
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24	Review: no less than 100;	[Y]
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	Case Report and Letter to the Editor: no less than 1.	
	The ethics-related statements are provided in accordance with the	
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	statement, Manuscript NoAnimal care and use statement, etc.).	
	The names of the peer reviewers and the scientific editor are present	
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	
	tables (e.g., +, -, \times , \div , *) correctly correspond to the definitions in the	
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	
28	graphs including text. Unsplit pictures include meta-analysis	[N]
	diagrams, PCR amplification curves, and survival curves.	
29	The author(s) highlighted the changes made to the manuscript	[5/]
29	according to the peer-reviewers' comments.	[Y]
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