

## PEER-REVIEW REPORT

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

**Manuscript NO:** 71315

**Title:** Early warning prevention and control strategies to reduce perioperative venous thromboembolism in patients with gastrointestinal cancer: A comparative retrospective cohort study

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

**Peer-review model:** Single blind

**Reviewer's code:** 03478404

**Position:** Editor-in-Chief

**Academic degree:** MD, PhD

**Professional title:** Associate Professor

**Reviewer's Country/Territory:** Romania

**Author's Country/Territory:** China

**Manuscript submission date:** 2021-09-03

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-09-17 15:18

**Reviewer performed review:** 2021-09-17 18:13

**Review time:** 2 Hours

<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 Grade E: Do not publish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>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 type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection



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<b>Re-review</b>	[ <input checked="" type="checkbox"/> ] Yes [ <input type="checkbox"/> ] No
<b>Peer-reviewer statements</b>	Peer-Review: [ <input checked="" type="checkbox"/> ] Anonymous [ <input type="checkbox"/> ] Onymous Conflicts-of-Interest: [ <input type="checkbox"/> ] Yes [ <input checked="" type="checkbox"/> ] No

### **SPECIFIC COMMENTS TO AUTHORS**

This original study, regarding early preventive actions and control strategies to reduce perioperative venous thromboembolism in patients with gastrointestinal cancer, showed the success of such a program. I am impressed with the authors' work and general results. Their manuscript is of high quality and with huge importance for practice. The whole structure is respected and paragraphs are tidy and written with attention to details. Introduction: nicely introduces the importance of the issue and the necessity of such an early preventive program. Aim: clearly presented (maybe it could be expanded, as the authors studied more outcomes). Discussion paragraph is well conceived and approached. A very good manuscript overall. Minor comments: 1. Abstract: Results: The following sentence contains an error, compared with data from the main text and Table 2. The authors wrote: "The correct rates of VTE risk assessment by the nurses and standard implementation rate of VTE preventive measures were 65.6% vs 86.8% and.... in early warning and control groups, respectively (all  $P < 0.001$ )."

Please correct to "86.8% vs 65.6%" in early warning and control groups, respectively.

2. Keywords: It would be advisable to include as keywords terms that do not belong to the title. This would increase the likelihood of the paper being found by readers. The importance of Keywords is to improve indexing.

3. Materials and Methods: I suggest to delete at the beginning "The statistical methods of this study were reviewed by [name(s) of individual(s)] from [name(s) of organization(s)]". Other than that, patients (including inclusion and exclusion criteria), repartition in groups and their description, and expected outcomes details were clearly written. Statistical analyses are adequately



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presented and pertinent. 4. Results: The authors followed all the mentioned outcomes (occurrence of DVT, correct rate of VTE assessment by nurses – before and after the implementation of preventive strategy, coagulation indicators in the two groups, and the mastery of VTE knowledge by the nurses – before and after the implementation). Besides, multiple regression detected the independent risk factors for post-operative DVT. Results are mentioned in text and illustrated in tables. Correct and clear. Maybe some data could be mentioned just in 1 place (either main text or table, as they are similar), in order to avoid redundancy. Table 5 would be enough. 5. All tables are explicit. Just please correct in Table 3 – $P < 0.001$  for D-dimers on the 7th day. Same for fibrinogen degradation products, on the 3rd and 7th day. 6. Please correct name of journal – reference nr. 3 7. There are no « Conflict-of-Interest Disclosure Form » and « Copyright License Agreement ». Please add.