

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 78454

Title: Emergent use of tube tip in pharynx technique in “cannot intubate cannot oxygenate” situation: A case report

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 03724259

Position: Editor-in-Chief

Academic degree: MBBS, MD

Professional title: Additional Professor

Reviewer’s Country/Territory: India

Author’s Country/Territory: Taiwan

Manuscript submission date: 2022-09-03

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-09-03 03:29

Reviewer performed review: 2022-09-03 03:42

Review time: 1 Hour

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 Grade E: Do not publish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 checked="" type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<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
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

The authors have described a case of parotid swelling that was planned for surgery. The intubation was difficult to begin with (authors have themselves written that tracheostomy was planned but they had decided to intubate. This is something which is beyond comprehension. Why an awake tracheostomy was not considered only instead of having multiple failures before doing a tracheostomy. The images clearly show a reduced oropharyngeal space due to compression by the parotid mass The tube in pharynx technique is nothing new as pharyngeal insufflation of oxygen is a well accepted technique for para oxygenation. What strategies were adopted by the author for preoxygenation and para-oxygenation considering it was an anticipate difficult airway? How was airway prepared for awake intubation? Was any sedation given to ensure the ETT is tolerated by the patient it is also surprising that "Throughout the course, the SpO2 remained 100%, no tumor bleeding nor gastric distention had been noticed" considering multiple attempt to intubation were taken

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Peer-review model: Single blind

Reviewer's code: 03244406

Position: Peer Reviewer

Academic degree: MD

Professional title: Chief Physician

Reviewer's Country/Territory: China

Author's Country/Territory: Taiwan

Manuscript submission date: 2022-09-03

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-09-03 01:47

Reviewer performed review: 2022-09-10 02:09

Review time: 7 Days

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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 checked="" type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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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

Dear author, This is a definite difficult airway before you preanesthesia visit and assessment. However, you selected a wrong way of securing the patent airway (a rapid sequence induction), and at the same time CICO occurred, consequently increased the severity of trauma and damage (emergent tracheostomy), why not you use FOB or retrograde guided intubation. Be remember, a wrong way for putting the patient in life threatening situation is definitely not permitted. So I decided to reject the manuscript.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Peer-review model: Single blind

Reviewer's code: 03244406

Position: Peer Reviewer

Academic degree: MD

Professional title: Chief Physician

Reviewer's Country/Territory: China

Author's Country/Territory: Taiwan

Manuscript submission date: 2022-09-03

Reviewer chosen by: Jing-Jie Wang

Reviewer accepted review: 2022-10-08 12:45

Reviewer performed review: 2022-10-08 13:22

Review time: 1 Hour

Scientific quality	<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
Language quality	<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
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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statements

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The revised manuscript answer the question which I cared about.