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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 82147

Title: Laparoscopic common bile duct exploration to treat choledocholithiasis in situs

inversus patients: A technical review

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05320660 Position: Peer Reviewer Academic degree: MBBS

Professional title: Assistant Professor

Reviewer's Country/Territory: Iran

Author's Country/Territory: Taiwan

Manuscript submission date: 2022-12-06

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-12-06 18:11

Reviewer performed review: 2022-12-09 16:20

Review time: 2 Days and 22 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer	Peer-Review: [] Anonymous [Y] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Thanks for submitting the manuscript entitled " Laparoscopic common bile duct exploration to treat choledocholithiasis in situs inversus patients: a technical review." Suggest authors determine the type of review according to BPG's standards for manuscript type and the appropriate topically-relevant category Title: The title of the manuscript is interesting, and the research question is worth asking There are many grammatical errors, and Help from a professional agency may be sought if required Examples Abstract In these cases, the major problem is to overcome overcoming the left-right condition for right-handed surgeons. has been shown equivalent efficacy and (are)less responsible. fewer procedural interventions, cost-effectivenmess effectiveness Core Tip: LCBDE has shown shorter hospital stays, fewer procedures, and more cost-effective cost-effectiveness in recent studies Herein we present an analysis of published SI patients with choledocholithiasis treated by LCBDE and our own case focusing on the technical aspects. RESULT most of them reported a four-port technique with America American mirror style[25, 26, 28] and many minor grammatical errors in other parts of the manuscripts. Case report Suggest authors divide the case report into subsections like History, Physical examination, Laboratory values (with normal range listed), Other investigative modalities used, Differential diagnosis, Detailed Treatment/Plan, and finally the Outcome. Authors must provide details on their suggested treatment plan for such cases step by step so that other clinicians can utilize the treatment protocol in case they ever encounter such a case in their practice. Suggest authors determine the specifications of the Laparoscopic Set. Suggest authors add a figure of the laparoscopic port position. Discussion Suggest authors answer the below



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questions: What are the new phenomena that were found through experiments in this study? What are the new findings of this study? What are the new concepts that this study proposes? What are the limitations of the study and its findings? What are the future directions of the topic described in this manuscript? What are the questions/issues that remain to be solved? What are the questions that this study prompts for the authors to do next? References Suggest authors decrease the number of references, and just cite the latest, important and authoritative references



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Reviewer's code: 06468659 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Taiwan

Manuscript submission date: 2022-12-06

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-12-14 11:13

Reviewer performed review: 2022-12-14 13:42

Review time: 2 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[Y] Accept (High priority) [] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-Review: [Y] Anonymous [] Onymous Peer-reviewer statements Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This study by Shu-Hung Chuang (MD, PhD) and colleagues is very interesting. The authors have conducted a complicated biliary surgery and reviewed LCBDE in situs inversus patients with choledocholithiasis, which is very meaningful. However, I may ask a few questions about this manuscript. 1. Choledocholithiasis in situs inversus patients is rare, a timely diagnosis is difficult. Can you simply summarize the symptoms of patients with choledocholithiasis in situs inversus patients, so that emergency physicians or young doctors can make early judgments on this disease; 2. LCBDE and ERCP are both important surgical methods to deal with choledocholithiasis. To date, some situs inversus patents with choledocholithiasis have been successfully treated with ERCP. Would you please add some data of the treatment of ERCP. 3. SILCBDE is an very excellent approach. Compared with LCBDE, can you briefly introduce the selection criteria for SILCBDE in your center.