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ESPS Peer-review Report
Name of Journal: World Journal of Clinical Cases
ESPS Manuscript NO: 10519
Title: Challenging Rescue of a 4 year old boy with H1N1 Infection by Extracorporeal Membrane Oxygenator: A Case Report
Reviewer code: 02903452
Science editor: Ling-Ling Wen
Date sent for review: 2014-04-06 09:51
Date reviewed: 2014-04-20 11:47

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[ ] Grade A: Priority Publishing	Google Search:	[ ] Accept
[Y] Grade B (Very good)	[Y] Grade B: minor language polishing	[ ] Existed	[ ] High priority for publication
[ ] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	[ ]Rejection
[ ] Grade D (Fair)	[ ] Grade D: rejected	BPG Search:	[Y] Minor revision
[ ] Grade E (Poor)		[ ] Existed	[ ] Major revision
		[ ] No records	

COMMENTS TO AUTHORS
I'd like to thank the authors for the opportunity to review your work.The paper have some merrits, however, a few minor revision are needed. Thank you and best regards. Yours sincerely

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ESPS Peer-review Report
Name of Journal: World Journal of Clinical Cases
ESPS Manuscript NO: 10519
Title: Challenging Rescue of a 4 year old boy with H1N1 Infection by Extracorporeal Membrane Oxygenator: A Case Report
Reviewer code: 02496740
Science editor: Ling-Ling Wen
Date sent for review: 2014-04-06 09:51
Date reviewed: 2014-05-08 18:36

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[ ] Grade A: Priority Publishing	Google Search:	[ ] Accept
[ ] Grade B (Very good)	[Y] Grade B: minor language polishing	[ ] Existed	[ ] High priority for publication
[ ] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	[Y]Rejection
[Y] Grade D (Fair)	[ ] Grade D: rejected	BPG Search:	[ ] Minor revision
[ ] Grade E (Poor)		[ ] Existed	[ ] Major revision
		[ ] No records	

COMMENTS TO AUTHORS
This manuscript lights on the problem of the ECMO cannulation in emergency and in the pediatric patient, and indicate as a solution the use of the dialysis catheter instead of the double lumen pediatric ECMO's cannula. In that clinical case that solution was enough to bridge the patient to the definitive cannulation type but this message could not be appropriate especially for the not ECMO expert users, because the y could not know that dialysis catheter is built for different blood flow, it could create high recirculation, is not heparin or bio-coated and the connector are not for suited for the ? tubes of the pediatric ECMO circuit.

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ESPS Peer-review Report
Name of Journal: World Journal of Clinical Cases
ESPS Manuscript NO: 10519
Title: Challenging Rescue of a 4 year old boy with H1N1 Infection by Extracorporeal Membrane Oxygenator: A Case Report
Reviewer code: 00106145
Science editor: Ling-Ling Wen
Date sent for review: 2014-04-06 09:51
Date reviewed: 2014-05-15 15:43

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[Y] Grade A: Priority Publishing	Google Search:	[Y] Accept
[Y] Grade B (Very good)	[ ] Grade B: minor language polishing	[ ] Existed	[ ] High priority for publication
[ ] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	[ ]Rejection
[ ] Grade D (Fair)	[ ] Grade D: rejected	BPG Search:	[ ] Minor revision
[ ] Grade E (Poor)		[ ] Existed	[ ] Major revision
		[ ] No records	

COMMENTS TO AUTHORS
The Authors describe what is somehow the most probable clinical course of the most aggressive presentations of H1N1 infection, i.e., in order of severity, ICU admission, HFOV, and, eventually ECMO. Although necessarily anecdotal, the technical pitfalls may be helpful. Perhaps, the Authors could point out that, as previously described (Norfolk et al, Crit Care Med 2010;38:2103, the report includes 3 pediatric ECMO pts. but no specific details), patients in the first decade of life have a higher probability of successful outcome. Prognosis in this setting is actually quite good, which strengthens indications for aggressive support including ECMO.