



**PEER-REVIEW REPORT**

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

**Manuscript NO:** 49486

**Title:** Fish bone-induced myocardial injury leading to a misdiagnosis of acute myocardial infarction: A case report

**Reviewer’s code:** 00506608

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Associate Professor, Doctor, Surgeon

**Reviewer’s country:** United States

**Author’s country:** China

**Reviewer chosen by:** Na Ma

**Reviewer accepted review:** 2019-09-02 11:59

**Reviewer performed review:** 2019-09-02 12:06

**Review time:** 1 Hour

| SCIENTIFIC QUALITY                                     | LANGUAGE QUALITY  | CONCLUSION                                 | PEER-REVIEWER STATEMENTS                      |
|--|---|--|---|
| <input type="checkbox"/> Grade A: Excellent            | <input type="checkbox"/> Grade A: Priority publishing       | <input type="checkbox"/> Accept            | Peer-Review:                                  |
| <input checked="" type="checkbox"/> Grade B: Very good | <input checked="" type="checkbox"/> Grade B: Minor language | (High priority)                            | <input checked="" type="checkbox"/> Anonymous |
| <input type="checkbox"/> Grade C: Good                 | polishing   | <input checked="" type="checkbox"/> Accept | <input type="checkbox"/> Onymous              |
| <input type="checkbox"/> Grade D: Fair                 | <input type="checkbox"/> Grade C: A great deal of           | (General priority)                         | Peer-reviewer’s expertise on the              |
| <input type="checkbox"/> Grade E: Do not               | language polishing  | <input type="checkbox"/> Minor revision    | topic of the manuscript:                      |
| publish  | <input type="checkbox"/> Grade D: Rejection                 | <input type="checkbox"/> Major revision    | <input checked="" type="checkbox"/> Advanced  |
|  |   | <input type="checkbox"/> Rejection         | <input type="checkbox"/> General              |
|  |   |  | <input type="checkbox"/> No expertise         |
|  |   |  | Conflicts-of-Interest:                        |
|  |   |  | <input type="checkbox"/> Yes                  |
|  |   |  | <input checked="" type="checkbox"/> No        |

**SPECIFIC COMMENTS TO AUTHORS**



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This is a very interesting case, but I have a few questions: 1) Why was the patient loaded with Plavix? - I understand the role of anti-platelet agents in STEMI, but this did not appear to be a STEMI 2) You mention the surgery was a "thoracotomy" - why was this chosen over "sternotomy" given the circumstances? 3) Can the authors explain maybe how the bone, which eroded posterior ended up injuring the left ventricle which is more of an anterior lateral structure (vs the left atrium?) - where on the LV? Where there any intra-operative pictures? - how did the surgeon fix this? 4) How did they manage the hole in the esophagus? technically, with the erosion - there was a hole?  
thank you

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- The same title
- Duplicate publication
- Plagiarism
- No

##### ***BPG Search:***

- The same title
- Duplicate publication
- Plagiarism
- No