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PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surge	ery
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Manuscript NO: 73656

Title: Laparoscopic-assisted endoscopic full-thickness resection of a large gastric

schwannoma: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00043819 Position: Editorial Board Academic degree: MD

Professional title: Associate Professor, Professor, Surgeon

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

Manuscript submission date: 2021-12-08

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-10 08:21

Reviewer performed review: 2021-12-13 13:01

Review time: 3 Days and 4 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Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish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) [] Minor revision [] Major revision [Y] Rejection
Re-review	[]Yes [Y]No



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Peer-reviewer statements

Peer-Review: [Y] Anonymous [] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

This is a case report of combined endoscopic-laparoscopic assisted resection of large gastric schwannoma. Although interesting, this case does not add new or relevant informations on this topic.



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Reviewer's code: 06183516 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Syria

Author's Country/Territory: China

Manuscript submission date: 2021-12-08

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-09 09:39

Reviewer performed review: 2021-12-14 05:49

Review time: 4 Days and 20 Hours

Scientific quality	[Y] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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
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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

Thank you all for these efforts and academic writing. ** In paragraph of Physical examination - CASE PRESENTATION: I prefer to put the common units of measure for body temperature (celsius or fahrenheit), blood pressure (mmHg); OR please add the reference range for units that have been used. Kind regards, Reviewer



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Peer-review model: Single blind

Reviewer's code: 03072151 Position: Editorial Board Academic degree: MD, MSc

Professional title: Associate Professor, Attending Doctor, Surgeon

Reviewer's Country/Territory: Taiwan

Author's Country/Territory: China

Manuscript submission date: 2021-12-08

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-10 16:24

Reviewer performed review: 2021-12-18 02:37

Review time: 7 Days and 10 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) [] Minor revision [] Major revision [Y] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer statements

Peer-Review: [Y] Anonymous [] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

This case study reported a successful clinical course of a patient presented with large gastric schwannoma (GS) resected using combined laparoscopic-assisted endoscopic full-thickness resection (EFTR) techniques. I have the following comments for the authors to improve the manuscript. The informed consent provided is not in the acceptable style. It is a consent to agree for surgery, not for academic writing. In line 122-123, the authors claimed the following: "body temperature, 309.15 K; blood pressure, 15.99/12.53 kPa..." I think the units applied are misleading. Please use arrows and/or other symbols to label the pathognomonic features in the illustrative histopathological figure 3. It may be useful to add a time line figure to demonstrate the clinical course more easily to the readers. I would recommend the authors to add an additional review table including all reported cases that discuss on the same problem with citing references to support that this is a rare case worth to be presented and published to raise the awareness of the clinician. It may then undoubtedly add contribution to the scarce literature on this particular topic.