

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

ESPS manuscript NO: 18532

Title: Impact of surgical delay on outcomes in elderly patients undergoing emergency surgery: A single center experience

Reviewer's code: 01588974

Reviewer's country: Japan

Science editor: Xue-Mei Gong

Date sent for review: 2015-04-23 16:57

Date reviewed: 2015-05-26 15:42

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

This is a retrospective study for evaluating time delay of operation for abdominal emergency in elderly (over 65 years old) patients. Results suggested that there was no correlation between delay on surgery and mortality. However, postoperative complication rate was higher in cases operated more than 24 hours after onset. Although cases analyzed were small in number, the result they presented is reasonable. I have several minor comments regarding this paper as follows. 1. IBM SPSS ver 2.0. seems to be a very old version. I think it may be version 20. 2. Please give us the reasons why taking CT scan need such a long time. If patients had abdominal symptoms at the arrival of ED, CT scan would be taken ASAP.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

ESPS manuscript NO: 18532

Title: Impact of surgical delay on outcomes in elderly patients undergoing emergency surgery: A single center experience

Reviewer's code: 00505440

Reviewer's country: Australia

Science editor: Xue-Mei Gong

Date sent for review: 2015-04-23 16:57

Date reviewed: 2015-05-26 23:11

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

The 2 main issues with this manuscript are: 1) definition of emergency cases 2) definition of morbidity these need to be addressed and the data re analysed taking all complications into consideration.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

ESPS manuscript NO: 18532

Title: Impact of surgical delay on outcomes in elderly patients undergoing emergency surgery: A single center experience

Reviewer's code: 00053659

Reviewer's country: Japan

Science editor: Xue-Mei Gong

Date sent for review: 2015-04-23 16:57

Date reviewed: 2015-05-25 06:39

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input checked="" type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Dr. Ong et al. reported clinical outcomes in the elderly patients who came to ER in the single center. They reviewed morbidity and mortality of the 144 patients and tried to identify clinical factors to predict poor clinical outcomes. Overall manuscript is well written, but the tables are hard to understand. In the Table 2, total 34 patients supposed to have surgical reoperations. However, total morbidity was 20 patients. What is this discrepancy? In addition, unplanned return to OR is also difficult to understand. How many planned patients did return to OR? In the Table 3, stratification of the group in the text was 1-6hrs, 7-12hrs, 13-24hrs, and more than 24hrs. The morbidity was decreased by 24 hrs and then increased, wasn't it? You should discuss this in the text. I would like you to ask mentioning brief summary of the Charlson's comorbidity index in the methods.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

ESPS manuscript NO: 18532

Title: Impact of surgical delay on outcomes in elderly patients undergoing emergency surgery: A single center experience

Reviewer's code: 02550474

Reviewer's country: Argentina

Science editor: Xue-Mei Gong

Date sent for review: 2015-04-23 16:57

Date reviewed: 2015-05-29 05:49

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
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		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

The article is interesting. Some language polishing should be done. But in general terms it is Ok for publication.