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PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 70878

Title: Large polyps: Pearls for the referring and receiving endoscopist

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05469117 Position: Editorial Board Academic degree: PhD

Professional title: Adjunct Professor, Chief Physician, Deputy Director

Reviewer's Country/Territory: China

Author's Country/Territory: United States

Manuscript submission date: 2021-08-19

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-08-23 16:04

Reviewer performed review: 2021-08-29 17:32

Review time: 6 Days and 1 Hour

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous



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

SPECIFIC COMMENTS TO AUTHORS

The authors review important considerations and methods to best manage large colonic polyps. 1. Since large polyps significantly increase the risk of canceration and the probability of lymph node metastasis, whether endoscopic ultrasonography should be considered for such polyps. 2. There is no mention of the circumstances in which biopsy is required before resection, especially when "if lesion fails to lift". 3. Considering the relationship between polyp canceration rate and tumor location (such as colon and rectum), and the relationship between polypectomy method and polyp location, should it be discussed separately? 4.Please check the REFERENCES. For example, reference 2, the year of publication is missing.