

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Radiology*

**Manuscript NO:** 74748

**Title:** Expanding utility of cardiac computed tomography in infective endocarditis: A contemporary review

**Provenance and peer review:** Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 02446694

**Position:** Editorial Board

**Academic degree:** FACC, FACP, FAHA, FESC, MD, PhD

**Professional title:** Director

**Reviewer's Country/Territory:** Japan

**Author's Country/Territory:** United States

**Manuscript submission date:** 2022-01-05

**Reviewer chosen by:** Xin Liu

**Reviewer accepted review:** 2022-04-15 19:29

**Reviewer performed review:** 2022-04-22 22:06

**Review time:** 7 Days and 2 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>Peer-reviewer statements</b>	Peer-Review: [ <input checked="" type="radio"/> ] Anonymous [ <input type="radio"/> ] Onymous Conflicts-of-Interest: [ <input type="radio"/> ] Yes [ <input checked="" type="radio"/> ] No
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## SPECIFIC COMMENTS TO AUTHORS

Describes the usefulness of imaging studies, especially contrast-enhanced computed tomography, in the diagnosis and treatment of infective endocarditis (IE). Although some of the images are informative, there are several issues. #1 The use of contrast-enhanced computed tomography (CT) may enhance the diagnosis and evaluation of complications of IE, especially in prosthetic valves. A serious problem is that the review describes the usefulness of cardiac CT (CCT), which is a CT scan that evaluates the coronary arteries, usually synchronized with an electrocardiogram, and is useful only for preoperative evaluation of the coronary arteries and for reoperation in patients who have undergone CABG. In the case of other complications, especially systemic embolization, a conventional contrast CT scan should be sufficient. The cases in which CCT is useful seem to be quite limited. #2 The numbering and description of references is not that of WJR. Please follow the submission rules of this journal.

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**Peer-review model:** Single blind

**Reviewer's code:** 06179999

**Position:** Editorial Board

**Academic degree:** PhD

**Professional title:** Assistant Professor, Associate Research Scientist

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** United States

**Manuscript submission date:** 2022-01-05

**Reviewer chosen by:** Dong-Mei Wang

**Reviewer accepted review:** 2022-05-06 00:48

**Reviewer performed review:** 2022-05-15 14:31

**Review time:** 9 Days and 13 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



**Baishideng  
Publishing  
Group**

7041 Koll Center Parkway, Suite  
160, Pleasanton, CA 94566, USA  
**Telephone:** +1-925-399-1568  
**E-mail:** bpgoffice@wjgnet.com  
<https://www.wjgnet.com>

<b>Peer-reviewer statements</b>	Peer-Review: [ <input checked="" type="checkbox"/> ] Anonymous [ <input type="checkbox"/> ] Onymous Conflicts-of-Interest: [ <input type="checkbox"/> ] Yes [ <input checked="" type="checkbox"/> ] No
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#### **SPECIFIC COMMENTS TO AUTHORS**

authors aim to review the available evidence for the use of CCT in IE. this review article is well-organized and comprehensive. The reviewer suggests that it could be accepted for possible publication.

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Reviewer's code:** 02446694

**Position:** Editorial Board

**Academic degree:** FACC, FACP, FAHA, FESC, MD, PhD

**Professional title:** Director

**Reviewer's Country/Territory:** Japan

**Author's Country/Territory:** United States

**Manuscript submission date:** 2022-01-05

**Reviewer chosen by:** Li-Li Wang

**Reviewer accepted review:** 2022-06-27 14:16

**Reviewer performed review:** 2022-06-27 14:21

**Review time:** 1 Hour

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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statements

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

## **SPECIFIC COMMENTS TO AUTHORS**

Regarding the revised manuscript, I have no further comments.