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Flat C, 23/F., Lucky Plaza, 315-321 Lockhart Road, Wan Chai, Hong Kong, China

ESPS Peer-review Report

Name of Journal: World Journal of Cardiology

ESPS Manuscript NO: 8206

Title: Timely reperfusion for ST-segment elevation myocardial infarction: effect of direct transfer to

primary angioplasty on time delays and clinical outcomes

Reviewer code: 00227522

Science editor: Zhai, Huan-Huan Date sent for review: 2013-12-22 19:41

Date reviewed: 2013-12-29 02:15

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[] Grade A (Excellent)	[Y] Grade A: Priority Publishing	Google Search:	[Y] Accept
[Y] Grade B (Very good)	[] Grade B: minor language polishing	[] Existed	[] High priority for
[] Grade C (Good)	[] Grade C: a great deal of	[] No records	publication
[] Grade D (Fair)	language polishing	BPG Search:	[]Rejection
[] Grade E (Poor)	[] Grade D: rejected	[] Existed	[] Minor revision
		[] No records	[] Major revision

COMMENTS TO AUTHORS

In this article Estevez-Loureiro et al review the effect of direct transfer to primary angioplasty on time delays and clinical outcomes. This review is very important. Moreover the manuscript is clear and concise. Authors should well define some abbreviations. There are also some spelling errors. Authors should adjust the references according to the standards of the journal



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Title: Timely reperfusion for ST-segment elevation myocardial infarction: effect of direct transfer to

primary angioplasty on time delays and clinical outcomes

Reviewer code: 02639907

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-12-22 19:41

Date reviewed: 2014-01-07 14:20

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[Y] Grade A (Excellent)	[Y] Grade A: Priority Publishing	Google Search:	[Y] Accept
[] Grade B (Very good)	[] Grade B: minor language polishing	[] Existed	[] High priority for
[] Grade C (Good)	[] Grade C: a great deal of	[] No records	publication
[] Grade D (Fair)	language polishing	BPG Search:	[]Rejection
[] Grade E (Poor)	[] Grade D: rejected	[] Existed	[] Minor revision
		[] No records	[] Major revision

COMMENTS TO AUTHORS

Some typo should be corrected as the attached file.



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Name of Journal: World Journal of Cardiology

ESPS Manuscript NO: 8206

Title: Timely reperfusion for ST-segment elevation myocardial infarction: effect of direct transfer to

primary angioplasty on time delays and clinical outcomes

Reviewer code: 01194590

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-12-22 19:41

Date reviewed: 2014-01-07 23:53

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[] Grade A (Excellent)	[] Grade A: Priority Publishing	Google Search:	[] Accept
[Y] Grade B (Very good)	[Y] Grade B: minor language polishing	[] Existed	[Y] High priority for
[] Grade C (Good)	[] Grade C: a great deal of	[] No records	publication
[] Grade D (Fair)	language polishing	BPG Search:	[]Rejection
[] Grade E (Poor)	[] Grade D: rejected	[] Existed	[] Minor revision
		[] No records	[] Major revision

COMMENTS TO AUTHORS

In the invited review, Estévez-Loureiro and his colleagues focused on timely reperfusion for ST-segment elevation myocardial infarction, especially the effect of direct transfer to primary angioplasty. The review seemed good. However, there was a recent paper relevant to this manuscript. (Menees DS, Peterson ED, Wang Y, Curtis JP, Messenger JC, Rumsfeld JS, Gurm HS. Door-to-balloon time and mortality among patients undergoing primary PCI. N Engl J Med. 2013;369:901-9.) Please add the paper and discuss it. Besides, there were several typo and grammatical errors. 1. In the abstract: misspelling "transafer" 2. The reference pattern in the following sentence "On the other hand, those patients of low risk or presenting late are less affected by the delays in reperfusion (36), (37),(38, 39)" should be changed. 3. The grammatical error was noted in the following sentence "The fact of diagnose STEMI in the prehospital setting, activate the interventional team and move the patient directly to the catheterization theater bypassing the emergency department or the coronary care unit is what we call direct transfer strategy (DT)."