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PEER-REVIEW REPORT

Name of journal: World Journal of Orthopedics

Manuscript NO: 64122

Title: Correlation of Stress Radiographs to Injuries Associated with Lateral Ankle

Instability

Reviewer's code: 05234767 Position: Peer Reviewer Academic degree: MS

Professional title: Assistant Professor

Reviewer's Country/Territory: India

Author's Country/Territory: United States

Manuscript submission date: 2021-02-17

Reviewer chosen by: Ya-Juan Ma

Reviewer accepted review: 2021-03-03 09:31

Reviewer performed review: 2021-03-19 18:58

Review time: 16 Days and 9 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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 statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No



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SPECIFIC COMMENTS TO AUTHORS

1. The author should have given numbers to each line and page number for easier reference. 2.In the figure 2 description the radiograph B is mentioned as depicting anterior drawer while it is actually depicting tibo talar tilt angle. (Page 3 Line 98) 3. Page 6 line line 141 "Personal Tendon Tear" should be replaced with "Peroneal tendon tear" 4.Page 9 line 205 "Threshold values of 10° on the anterior drawer test or 10 mm on the talar tilt test" should be replaced as "Threshold values of 10 mm on the anterior drawer test or 10° on the talar tilt test" 5. The authors have evaluated only two associated conditions peroneal tears and OLT what about the other associated conditions contributing to the pain and how were they excluded ? 6. As the sensitivity, specificity, PPV and NPV are very low for the conditions described, how are the stress radiographs going to help clinicians in the decision making ? The patients with chronic pain and clinical features of instability will be ultimately subjected to ultrasound or MRI or CT scan to get the final diagnosis. 7. The conclusion should have a clear message about the utility of stress radiographs.