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315-321 Lockhart Road,
Wan Chai, Hong Kong, China

ESPS Peer-review Report

Name of Journal: World Journal of Anesthesiology

ESPS Manuscript NO: 7259

Title: Acute Coagulopathy of Trauma : Mechanism, Monitoring, Management

Reviewer code: 00502808

Science editor: Gou, Su-Xin

Date sent for review: 2013-11-12 12:21

Date reviewed: 2013-11-20 10:00

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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 type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

Overall it is a nicely written review covering most of the aspects of coagulopathy in trauma. Some minor points are suggested to further improve the manuscript. ? The authors have used many abbreviations without their full forms. All the abbreviations should be written in full form at the first use in the manuscript. ? At certain places, the statements appear to be contradictory. For example, on pages 7 & 8, while writing about hypothermia, the authors mention that mild to moderate hypothermia (33-36° C) rarely has an effect on coagulation in isolation and then they mention that hypothermia is an independent risk factor for mortality. ? Similarly on page 11, it is mentioned, “The presence of two or more abnormal values from clot initiation, amplification or clot strength and stability is regarded as clinical coagulopathy.” However, the next paragraph mentions, “there is no standard accepted definition of clinical coagulopathy defined by TEG or TEM”. Some linking sentence may improve the understanding of the concept e.g. “Although according to a study the presence of two or more abnormal values from clot initiation, amplification or clot strength and stability is regarded as clinical coagulopathy; there is no standard accepted definition of clinical coagulopathy defined by TEG or TEM.” ? On page 10, paragraph 3; while writing about PT and PTT, it is mentioned that a value of > 1.2 is regarded as the clinically significant threshold for defining ACoT. Is this the value of INR or 1.2 times normal PT and PTT? Moreover, should it be 1.2 or 1.5? ? On page 13, paragraph 2, initial 3 sentences appear to be repetitive and may be removed. ? Page 13, 3rd line from below: Reference number needs to be added to the study by Maegele et al. ? On page 15, while writing about antifibrinolytics, the dose of tranexamic acid is mentioned in ‘mg’ in the last sentence (Probably a typing error).



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ESPS Manuscript NO: 7259

Title: Acute Coagulopathy of Trauma : Mechanism, Monitoring, Management

Reviewer code: 02497108

Science editor: Gou, Su-Xin

Date sent for review: 2013-11-12 12:21

Date reviewed: 2013-11-21 21:52

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

Trauma is a leading cause of death and disability. Hemorrhage is the major mechanism responsible for death during the first 24 hours following trauma. One quarter of severely injured patients present in the emergency room with acute coagulopathy of trauma (ACoT) and shock [J Trauma. 55(1):39-44, 2003]. The authors in this literature clearly and comprehensively review the mechanism of ACoT and describes the different ways of monitoring and management. The article provides valuable information and is with potential for clinical application. Minor Comments Some typographical error in part of this issue should be corrected. For example, One word “describes the “different” ways of” on page 2, line 6, should be corrected to “different”. Another typing error ““hypocoagulability” is often seen in the presence of” on page 7, line 3, should be corrected to “Hypocoagulability”.



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ESPS Peer-review Report

Name of Journal: World Journal of Anesthesiology

ESPS Manuscript NO: 7259

Title: Acute Coagulopathy of Trauma : Mechanism, Monitoring, Management

Reviewer code: 00860826

Science editor: Gou, Su-Xin

Date sent for review: 2013-11-12 12:21

Date reviewed: 2013-11-22 23:15

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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 type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> [Y]Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

Thanks for the opportunity reviewing the review article "Acute Coagulopathy of Trauma : Mechanism, Monitoring, Management". In this review the authors provides no new information regarding coagulation disorder and nor the recent advancement in components therapy. The manuscript was poorly written and difficult to understand.