



## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 59062

**Title:** Recurrent thrombosis in the lower extremities after thrombectomy in a patient with polycythemia vera: a case report

**Reviewer's code:** 00058523

**Position:** Peer Reviewer

**Academic degree:** FRCS, FRCS (Ed), FRCS (Gen Surg), MBChB, MD

**Professional title:** Doctor, Lecturer, Postdoc, Senior Lecturer, Surgeon

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

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

**Manuscript submission date:** 2020-09-08

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-09-11 02:02

**Reviewer performed review:** 2020-09-15 04:35

**Review time:** 4 Days and 2 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 Grade E: Do not publish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
<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**

Thank you for the opportunity to review this. I do not find this case particularly rare, but it is written well in a way that is educational and clear. I am presuming he does not have an aortic aneurysm?

Response:

Dear Editors and Reviewers:

Thank you for your letter and for the reviewer's comments concerning our manuscript entitled "Recurrent thrombosis in the lower extremities after thrombectomy in a patient with polycythemia vera: a case report" (ID:59062). We are so sorry to have kept you waiting so long. These comments are valuable and helpful for revising our paper. We have studied comments carefully and made some changes in our manuscript. Our responses to the reviewer's comments are as follows:

Reviewer #1: I am presuming he does not have an aortic aneurysm?

Answer: It is really true as Reviewer suggested that this patient does not have an aortic aneurysm. During his hospitalization, the Chest CT scan (Figure 1) and echocardiography (Figure 2) showed no chest vascular lesions. Meanwhile, his family members have no records of vascular diseases. We have add these two points into our "History of present illness" part and "Family history" part of "CASE PRESENTATION" in our manuscript. We would like to re-submit this revised manuscript to World Journal of Clinical Cases and hope it is acceptable for publication in the journal.

Looking forward to your reply soon.

Best wishes,

Yours sincerely

Bu-Ping Jiang et al.



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Attachments:

Figures



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浙江省衢州市人民医院  
浙江衢州医学影像中心

螺旋CT (SCT) 诊断报告

姓名: [redacted] 性别: 男 年龄: [redacted] 住院号: [redacted]  
科室: 急诊外科 床号: / 病人编号: [redacted]  
检查部位 胸部CT平扫

所见:

两侧胸廓对称, 气管居中。肺窗示两肺纹理增多, 肺野透光度轻度增高, 右肺中叶见微小结节影 (SN: 3-IM38), 边界清楚。右肺中叶内侧段、左肺上叶下舌段及下叶见少量条片状密度增高影, 边界尚清, 余肺未见明显异常密度影, 气管、支气管腔通畅, 两肺门不大。纵隔窗示纵隔无偏移, 心影及大血管形态未见异常, 主动脉弓及冠状动脉见多发小片状钙化影。纵隔内未见肿块及肿大淋巴结。两侧胸腔未见积液征像。所见两侧肋骨未见异常。

印象:

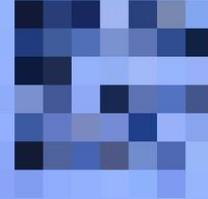
1. 支气管病变, 肺气肿;
  2. 右肺中叶及左肺上叶舌段、下叶少量慢性炎性病变;
  3. 右肺中叶微小结节, 建议随访复查 (间隔6-12月);
  4. 主动脉、冠状动脉粥样硬化。
- 附见: 右肝钙化灶。

报告日期: 2020-02-29 15:49 报告医师: [redacted] 审核医师: [redacted]

此报告仅供临床医生参考, 不作医疗证明之用! 下次就诊时请将本片带来, 以便对照!

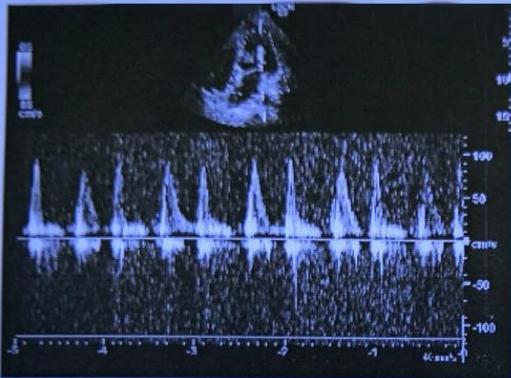


衢州市人民医院  
彩色超声检查报告单



超声号: USY524417

姓名: [redacted] 性别: 男 年龄: 68岁 科别: 血管外科  
住院号: [redacted] 床: [redacted] 临床诊断: 1: 下肢动脉栓塞



超声所见:

心功能参数:

AO: 2.3cm IVSd: 1.12cm LVIDd: 4.9cm LVEF: 54%  
LA: 3.0cm LVPWd: 1.12cm LVIDs: 3.5cm FS: 28%

心脏各房室腔内径正常, 室壁厚度正常, 腔内未见明显异常回声, 房室间隔连续完整。各瓣膜形态、活动回声正常。主动脉、肺动脉内径正常, 心包腔内未见明显液性暗区。二尖瓣口血流频谱PW示VE/VA<1, CDFI: 三尖瓣口可见少量反流信号, 余瓣膜未见明显异常血流信号, 左室收缩功能正常。

超声印象:

三尖瓣少量反流

检查医生: [redacted]

审核医生: [redacted]

检查日期: 2020-03-02 09:57

此报告仅供临床参考!