



PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 95257

Title: Splenic subcapsular hematoma following endoscopic retrograde cholangiopancreatography: A case report and literature review

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05142913

Position: Peer Reviewer

Academic degree: Doctor, MBBS

Professional title: Doctor

Reviewer's Country/Territory: Saudi Arabia

Author's Country/Territory: China

Manuscript submission date: 2024-04-06

Reviewer chosen by: AI Technique

Reviewer accepted review: 2024-05-18 20:30

Reviewer performed review: 2024-05-18 20:32

Review time: 1 Hour

Scientific quality	<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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation



Baishideng Publishing Group

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

Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Good case report



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Title: Splenic subcapsular hematoma following endoscopic retrograde cholangiopancreatography: A case report and literature review

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Reviewer's code: 00504187

Position: Editorial Board

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

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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
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
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Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
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	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This paper is reporting a rare complication of ERCP, worth to be cited. However, the text should be more concise and many details may be avoided. Moreover, English style must improve. Going into the specific: -In the “history of the past illness” it is written that “the patient was diagnosed with multiple tumors of the colon and underwent laparoscopic surgery with minimal invasiveness”. What type of surgery? Knowing it could help to better understand the pathogenesis (specific adhesions?) of the splenic hematoma. -left lobe hepatectomy, performed one year before, could determine adhesions with the spleen which could favor tears of the spleen capsule. A possibility which could be mentioned. -indeed, the whole history may be superfluous and certainly could be shortened, while the concerning ERCP, are important. -why the pancreatic duct was stented? Images do not visualize a stenotic or compressed pancreatic duct, as well as the common bile duct, which was normal. -symptoms observed at 7th day are more likely consequent to the migrated bile stent more than to the hematoma, This could be specified and discussed. -the discussion is appropriate, but the last phrase “. It is important to note that subjective evaluations have been excluded from this analysis”,



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may be cancelled. -in the conclusion the statement that “splenic rupture can appear immediately or with a delay of a few minutes to a week” should be changed. How can you differentiate the interval between “immediately” and “few minutes”? References and images are appropriate. Particularly useful the Table 1