

Review Form 1.7

| | |
|--------------------------|--|
| Journal Name: | Asian Journal of Pediatric Research |
| Manuscript Number: | Ms_AJPR_100821 |
| Title of the Manuscript: | Pulmonary embolism complicating infective endocarditis: a case report |
| Type of the Article | Case study |

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound. To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<https://www.journalajpr.com/index.php/AJPR/editorial-policy>)

Review Form 1.7

PART 1: Review Comments

| | Reviewer's comment | Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here) |
|---|---|--|
| <p>Compulsory REVISION comments</p> <p>1. Is the manuscript important for scientific community? (Please write few sentences on this manuscript)</p> <p>2. Is the title of the article suitable? (If not please suggest an alternative title)</p> <p>3. Is the abstract of the article comprehensive?</p> <p>4. Are subsections and structure of the manuscript appropriate?</p> <p>5. Do you think the manuscript is scientifically correct?</p> <p>6. Are the references sufficient and recent? If you have suggestion of additional references, please mention in the review form.</p> <p><u>(Apart from above mentioned 6 points, reviewers are free to provide additional suggestions/comments)</u></p> | <p>1 – Yes. 2 – Yes. 3 – Yes. 4 – Yes, but scarce. 5 – Yes. 6 - Yes.</p> <p>Well-structured work, being important due to the severity of the clinical situation of bacterial endocarditis and its fatal complications, and having quality in the form of a case study, descriptive, although rare, evaluated in the objective of early diagnosis and proper use of complementary diagnostic means.</p> <p>As for its opportunity, the improvement of child and pediatric health care, the prevention of endocarditis and the early diagnosis of post-endocarditis pulmonary embolism, and the warning sign for the incidence of an often fatal clinical situation, demonstrate the opportunity of the study .</p> <p>As for relevance, the public presentation of a serious disease in a scientific context, the need to detect more clinical cases in children other than adults, and the use of specific treatment protocols in children that improve prognosis and survival, underlie this study. .</p> <p>As for methodological correctness, the documental format of the case report is concise and successful; the structure, description and logic of the development of the work are good; the abstract explains the objectives of the study, the discussion and the conclusion; the keywords are sufficient (although "child health" could be changed to "child and youth health", and early diagnosis and therapy could be added); the introduction is sparse; the presentation of the case is correct, individualizing clinical symptoms, auxiliary means of diagnosis and medical therapy; the discussion is sufficient, although it does not mention cardiac magnetic resonance as a potential means of diagnosis; the conclusion articulates with the summary, pointing out the advantage of identifying other cases; consent is expressed and the requirement for ethical approval is referred to, which will be anonymous; bibliographical references are adequate although scarce.</p> <p>The work is well systematized, without serious epidemiological violations and with well-founded clinical, diagnostic and therapeutic considerations.</p> <p>As for the content, this is a study adjusted to the severity of the clinical problem, with a proposal for new recommendations to reduce morbidity and mortality.</p> <p>In global analysis, the work "Pulmonary embolism complicating infective en-docarditis: a case report" is good work, as identification and description of a problem and potential new clinical attitudes.</p> | |
| <p>Minor REVISION comments</p> <p>1. Is language/English quality of the article suitable for scholarly communications?</p> | <p>1 – Yes. Cardiac magnetic resonance imaging should be referred to as a means of diagnosis.</p> | |
| <p>Optional/General comments</p> | <p>The importance of preventing bacterial endocarditis could be mentioned.</p> | |

PART 2:

| | Reviewer's comment | Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here) |
|--|---|--|
| <p>Are there ethical issues in this manuscript?</p> | <p><i>(If yes, Kindly please write down the ethical issues here in details)</i></p> | |

[Review Form 1.7](#)

Reviewer Details:

| | |
|----------------------------------|--|
| Name: | Hernâni Pombas Caniço |
| Department, University & Country | University of Coimbra, Portugal |