OPEN PEER REVIEW

Open Peer Review (OPR)

As a new feature for progressing towards transparency, we decided to open a new window for all of our editors as well as authors titled "**Open Peer Review**". We hope by this new facility, our reviewers will be more motivated and authors will be more satisfied with the review process. We believe that publishing our peer review reports could make a transparent and clear environment for all our efforts within a journal, but not all reviewers tend to publish their comments.

What is "Open Peer Review" process?

An "Open Peer Review" process is making the details of all review process (including reviewers, associate editors, and EICs comments) as "Public" as it is agreed by EIC, Authors, and reviewers.

Advantages of "Open Peer Review" process

- More transparency, constructiveness and tactful comments of the peer review process: leads to an increase in the quality of reviews
- More motivations for all involved roles in the review process
- Authors' satisfactions from the review process: Increases honesty between authors and reviewers
- Education of both authors and new students
- Prevents reviewers from following their individual agendas and leading to the detection of reviewers' conflicts of interests

You can find out more at:
https://sites.kowsarpub.com/kowsar/knowledgebase/category/tree.html#opr.html

Anesthesiology and Pain Medicine
Article DOI: 10.5812/aapm.115827
Published in: Anesthesiology and Pain Medicine: 11(4); e115827

Peer Review Report for "An Umbrella Review of Clinical Efficacy and Adverse Cardiac Events Associated with Hydroxychloroquine or Chloroquine with or Without Azithromycin in Patients with COVID-19"

Author(s): Kavous Shahsavarinia, Morteza Ghojazadeh, Amir Ghabousian, Faezeh Hatefnia, Maryam Soleimanpour, Hassan Soleimanpour

Review Timeline:

Submit Date:	3 May 2021
Revised Date:	19 Jun 2021
Accepted Date:	28 Jun 2021

Revision (0)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

REFEREE: Reviewer | **Revision** (0) — 15 May 2021

Dear AE,
- Recommendations are consistent with the finding.
- Referencing and citations were correct.
- English writing was acceptable.
Thanks.

REFEREE: Reviewer | **Revision** (0) — 21 May 2021

Dear AE,
Thanks to the authors. I reviewed the article. It is valuable research in the pandemic era. The title, introduction, methodology, and conclusion are appropriate. There is no plagiarism in it. The writing is appropriate and completely understandable.
Thanks.

REFEREE: Reviewer | **Revision** (0) 25 May 2021

Dear AE,
- It is better to display the results in the form of a forest plot.
- in line 65: The present study examined a total of 62 papers and 22632 cases, including patients with mild pneumonia to critically-ill intubated patients, but in line 84: Fiolet et al. conducted a systematic review on 29 studies, including 32,943 cases. ,the number of cases in a study of meta-analysis is greater than the total number of study cases!
Thanks.

REFEREE: Associate Editor | **Revision** (0) 28 May 2021

Dear EIC
According to the reviewers, the research framework is appropriate for data collection and analysis. The principles of conducting a systematic review have been followed. It needs to be modified and added below Eight references:
- Pergolizzi JJ, Magnusson P, LeQuang JA, Breve F, Paladini A, Rekatsina M, et al. The current clinically relevant findings on COVID-19 pandemic. Anesth Pain Med. 2020;10(2). e103819.
- Kafan S, Tadbir Vajargah K, Sheikhvatan M, Tabrizi G, Salimzadeh A, et al. Predicting Risk Score for Mechanical Ventilation in Hospitalized Adult Patients Suffering from COVID-19, Anesth Pain Med. 2021;11(2):e112424.
- Rahimzadeh P, Amniati S, Faiz SHR, Farahmandrad R, Emami SH. Clinical characteristics of critically ill patients infected with COVID-19 in rasoul akram hospital in Iran: A single center study. Anesth Pain Med. 2020;10(5):1-7.
- Ali H, Ismail AA, Abdalwahab A . Mental Stress in Anesthesia and Intensive Care Physicians During COVID-19 Outbreak, Anesth Pain Med. 2020;10(5):e106623.
- Rahimzadeh P, Faiz HR , Farahmandrad R, Hassanlouei B, Habibi A, et al. Clinical Features and Prognosis of Invasive Ventilation in Hospitalized Patients with COVID-19: A Retrospective Study, Anesth Pain Med. 2020 ;10(6):e108773.
- Aminnejad R, Hashemi SM, Safari S, Dadkhah P, Bastanhagh E. Impact of COVID-19 on Advanced Cancer Patients' Pain Care: Warning About Chloroquine and Hydroxychloroquine, Anesth Pain Med. 2021;11(1):e111641.
- Haryalchi K, Heidarzadeh A, Abedinzade M , Olangian-Tehrani S, Ghazanfar Tehran S . The Importance of Happy Hypoxemia in COVID-19, Anesth Pain Med. 2021;11(1):e111872.
- Mohammed Sheata I , Smith S R , Kamel H , Varrassi G , Imani F, et al. Pulmonary Embolism and Cardiac Tamponade in Critical Care Patients with COVID-19; Telemedicine's Role in Developing Countries: Case Reports and Literature Review, Anesth Pain Med. 2021;11(2):e113752.
Final decision: Minor revision
Respectfully
Thanks

REFEREE: EIC | **Revision** (0) 29 May 2021

Dear Author,
Your article is reviewed by the reviewers carefully. According to their comments, this

document needs minor revision. Please follow their comments as requested.

Thanks.

OPEN PEER REVIEW

Revision (1)

Reply to Reviewers

Ideally, the reviewing process can significantly improve the submitted manuscripts by allowing the authors to take into account the advice of reviewers. Author(s) must reply to all reviewers' comments in a separate Word file, point by point. A "**Reply to Reviewers**" document is submitted along with revised manuscript during submission of revised files, summarizing the changes that the authors made in response to the reviewers' comments. The responses to reviewers' comments specifies how the authors addressed each comment the reviewers made.

You can read the authors' responses to the reviewers' comments in the next page.

Dear Respected EIC and reviewers

Many thanks for your nice comments regarding our article. You can find our reply in the below and so all modification as yellow highlight in the main manuscript.

Dear Reviewer 1
On behalf of all authors, I appreciate you for reviewing our manuscript so meticulously and mentioning very important comments. We really respect you for devoting your time and energy for reviewing our manuscript. Below you could find our reply to your comments.

Q1: - It is better to display the results in the form of a forest plot.

Answer 1: In this review, according to the type of variables, the reported indexes were not the same, so that in some studies Incidence and in others Relative Risk was reported. Also, there was not enough information to convert these indexes into each other. In addition, the arms studied were different. Therefore, drawing a forest plot based on the reported indexes was not possible

Q2: - in line 65: The present study examined a total of 62 papers and 22632 cases, including patients with mild pneumonia to critically-ill intubated patients, but in line 84: Fiolet et al. conducted a systematic review on 29 studies, including 32,943 cases. ,the number of cases in a study of meta-analysis is greater than the total number of study cases!

Answer 2: I really appreciate you for your comprehensive comments. Extraction table and discussion section are well written based on the references but there are mistakes in the case numbers of 3 articles in line 65 that is corrected as well

Review 2 and 3:

Dear Reviewer# 2, 3 and Associate editor
On behalf of all authors, I appreciate you for reviewing our manuscript so meticulously and mentioning very important comments. We really respect you for devoting your time and energy for reviewing our manuscript. Below you could find our reply to your comments.

Q1: *Reviewer 2:*
Dear associate editor
Thanks to the authors. I reviewed the article. It is valuable research in the pandemic era. The title, introduction, methodology, and conclusion are appropriate. There is no plagiarism in it. The writing is appropriate and completely understandable.

Answer 1: Thank you so much for your kind words regarding our article.

Q2: *Reviewer 3:*
Recommendations are consistent with the finding.
Referencing and citations were correct.
English writing was acceptable.

Answer 2: Thank you so much for your kind words regarding our article.

Q3: *Associate Editor 1:*
Dear EIC
According to the reviewers, the research framework is appropriate for data collection and analysis. The principles of conducting a systematic review have been followed. It needs to be modified and adding below Eight references:

.*Pergolizzi JJ, Magnusson P, LeQuang JA, Breve F, Paladini A, Rekatsina M, et al. The current clinically relevant findings on COVID-19 pandemic. Anesth Pain Med. 2020;10(2). e103819.*

Kafan S, Tadbir Vajargah K, Sheikhvatan M, Tabrizi G, Salimzadeh A, et al. Predicting Risk Score for Mechanical Ventilation in Hospitalized Adult Patients Suffering from COVID-19, Anesth Pain Med. 2021;11(2):e112424.

Rahimzadeh P, Amniati S, Faiz SHR, Farahmandrad R, Emami SH. Clinical characteristics of critically ill patients infected with COVID-19 in rasoul akram hospital in Iran: A single center study. Anesth Pain Med. 2020;10(5):1-7.

Ali H, Ismail AA, Abdalwahab A . Mental Stress in Anesthesia and Intensive Care Physicians During COVID-19 Outbreak, Anesth Pain Med. 2020;10(5):e106623.

Rahimzadeh P, Faiz HR , Farahmandrad R, Hassanlouei B, Habibi A, et al. Clinical Features and Prognosis of Invasive Ventilation in Hospitalized Patients with COVID-19: A Retrospective Study, Anesth Pain Med. 2020 ;10(6):e108773.

Aminnejad R, Hashemi SM, Safari S, Dadkhah P, Bastanhagh E. Impact of COVID-19 on Advanced Cancer Patients' Pain Care: Warning About Chloroquine and Hydroxychloroquine, Anesth Pain Med. 2021;11(1):e111641.

Haryalchi K, Heidarzadeh A, Abedinzade M , Olangian-Tehrani S, Ghazanfar Tehran S . The Importance of Happy Hypoxemia in COVID-19, Anesth Pain Med. 2021;11(1):e111872.

Mohammed Sheata I , Smith S R , Kamel H , Varrassi G , Imani F, et al. Pulmonary Embolism and Cardiac Tamponade in Critical Care Patients with COVID-19; Telemedicine's Role in Developing Countries: Case Reports and Literature Review, Anesth Pain Med. 2021;11(2):e113752.

Answer 3: Thank you for guiding us. All suggested references is added to the article.

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Revision (1)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

REFEREE: Associate Editor | **Revision** (1) 25 Jun 2021

Dear EIC,
Fortunately, the author tried to reply to the all requested items as well. Now, it is acceptable for publishing.
Final decision: Acceptance
Regards

REFEREE: EIC | **Revision** (1) 28 Jun 2021

Dear Author,
The document is reviewed carefully by the reviewers. According to their comments and your revisions as requested, this manuscript is accepted.
Thanks.