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
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Peer Review Report for "Invasive Airway "Intubation" in COVID-19 Patients; Statistics, Causes, and Recommendations: A Review Article"

Author(s): Mostafa Mohammadi, Alireza Khafaee Pour Khamseh, Hesam Aldin Varpaei

Review Timeline:

Submit Date: 18 May 2021
Revised Date: 16 Jun 2021
Accepted Date: 16 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)

21 May 2021

Dear AE,
My comments for the authors are as follows:
1- Perform meta-analyses for relevant outcomes based on adjusted methods for example the Knapp–Hartung adjustment.
2- Your keywords should be in the Mesh
3- Please insert and discuss the three following articles in the introduction:
- Mahmoodpoor A, Shadvar K, Ghamari AA , Mohammadzadeh Lameh M , Asghari Ardebili R , et al. Management of Critically Ill Patients with COVID-19: What We Learned and What We Do, Anesth Pain Med. 2020;10(3):e104900.
- 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.
4- It is better to provide a table which shows characteristics of all the included studies in their review as below:
Year Authors Study Design Subject of Study

5- In the systematic review, RCTs and level one evidence should be considered; otherwise the level of recommendation would not be valuable.
6- What were the criteria for quality assessment? There are specific criteria regarding each type of study, such as 11 criteria for RCTs.
There should be exclusion criteria considering the type of study (e.g. case report or series less than 10 patients), the number of included patients, language, and age of cases.
The level of evidence for case-control studies should be mentioned in the result.
7- Limitations should be discussed.
8- Please provide GARDE Table
Thanks.

REFEREE: Reviewer | **Revision (0)** 24 May 2021

Dear AE,
Thanks for the opportunity given to me.
The article was written well and useful. I Recommend the authors to add below 5 references:
- 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.
- 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.
Thanks.

REFEREE: Reviewer | **Revision (0)** 26 May 2021

Dear AE,
Thanks for sending the manuscript to me.
It has not any plagiarism topics, analytic methods were well, references were due to journal scope. For increasing the quality of the article recommends considering these references:
- Rahmani F, Mahmoodpoor A, Salmasi S, Ebrahimi Bakhtavar H. Safety of Healthcare Workers During the Airway Management in Adult and Pediatric Patients with COVID-19, Anesth Pain Med. 2021;11(2):e112508.
- Hassani V, Amniati S, Ahmadi A, Mohseni M, Sehat-Kashani S, et al. Emergency Tracheostomy in Two Airway Trauma Patients Suspected of COVID-19: A Case Report, Anesth Pain Med. 2020;10(4):e104648.
Amri P, Nikbakhsh N, Modaress SR , Nosrati R. Upper Airway Nerve Block for Rigid Bronchoscopy in the Patients with Tracheal Stenosis: A Case Serie, Anesth Pain Med.

2020;10(4):e99796.
- Javaherforooshzadeh F, Gharacheh L. The Comparison of Direct Laryngoscopy and Video Laryngoscopy in Pediatric Airways Management for Congenital Heart Surgery: A Randomized Clinical Trial, Anesth Pain Med. 2020;10(3):e99827.
- Naguib TM, Ahmed SA. Evaluation of Flexible Laryngeal Mask Airway® in Tongue Trauma Repair: A Randomized Trial, Anesth Pain Med. 2019;9(4):e92929.
best regards

REFEREE: Associate Editor | **Revision** (0) 26 May 2021

Dear EIC,
Based on the mentioned recommendations I think this manuscript needs minor revision and adding recommended 13 references before considering it for publication.
Regards

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.

Reply to reviewers and EIC

Dear EIC, reviewers

We hereby provide you an edited version of out manuscript

Reviewer 1: **Thank you for your response, I provide you the answer of each items as follow**
My comments is as follows:
1- Perform meta-analyses for relevant outcomes based on adjusted-methods for example the Knapp–Hartung adjustment. **This is a narrative review, not a meta-analysis. Therefore, it does not need.**
2- Your keywords should be in the Mesh. **All Corrected according to Mesh.**
3- Please insert and discuss the three following articles in the introduction:
- Mahmoodpoor A, Shadvar K, Ghamari AA , Mohammadzadeh Lameh M , Asghari Ardebili R , et al. Management of Critically Ill Patients with COVID-19: What We Learned and What We Do, Anesth Pain Med. 2020;10(3):e104900. **Added.**
- 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. **Added.**
- 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. **Added.**
4- It is better to provide a table which shows characteristics of all the included studies in their review as below:
Year Authors Study Design Subject of Study
We added this table (table 2)
5- In systematic review, RCTs and level one evidence should be considered; otherwise the level of recommendation would not be valuable. **We added this table (table 2)**
6- What were the criteria for quality assessment? There are specific criteria regarding each type of study, such as 11 criteria for RCTs. **We added this table (table 2)**
There should be exclusion criteria considering type of study (e.g. case report or series less than 10 patients), number of included patients, language and age of cases.
Level of evidence for case-control studies should be mentioned in result. **We added this table (table 2)**
7- Limitations should be discussed. **Added n limitation part (end of article)**
8- Please provide GARDE Table.

Reviewer 2:
Thanks for sending the manuscript for me. **Thank you for your response, we have added all supposed manuscripts.**
It has not any plagiarism topics, analytic methods were well , references were due to journal scope. For increasing the quality of article recommend to consider these references:
Rahmani F, Mahmoodpoor A, Salmasi S, Ebrahimi Bakhtavar H. Safety of Healthcare Workers During the Airway Management in Adult and Pediatric Patients with COVID-19, Anesth Pain Med. 2021;11(2):e112508. **Added.**
Hassani V, Amniati S, Ahmadi A, Mohseni M, Sehat-Kashani S, et al. Emergency Tracheostomy in Two Airway Trauma Patients Suspected of COVID-19: A Case Report, Anesth Pain Med. 2020;10(4):e104648. **Added.**

Amri P, Nikbakhsh N, Modaress SR , Nosrati R. Upper Airway Nerve Block for Rigid Bronchoscopy in the Patients with Tracheal Stenosis: A Case Serie, Anesth Pain Med. 2020;10(4):e99796. **Added.**
Javaherforooshzadeh F, Gharacheh L. The Comparison of Direct Laryngoscopy and Video Laryngoscopy in Pediatric Airways Management for Congenital Heart Surgery: A Randomized Clinical Trial, Anesth Pain Med. 2020;10(3):e99827. **Added.**
Naguib TM, Ahmed SA. Evaluation of Flexible Laryngeal Mask Airway® in Tongue Trauma Repair: A Randomized Trial, Anesth Pain Med. 2019;9(4):e92929. **Added.**
best regards

Reviewer 3:
Hello and thanks for the opportunity given to me. **Thank you for your response, we have added all supposed manuscripts.**

The article was written good and useful. Recommend to add below 5 references:
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. **Added.**
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. **Added.**
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. **Added.**
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. **Added.**
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. **Added.**

Associate Editor's Comments:

Associate Editor 1:
Dear Editor in Chief
Based on the mentioned recommendations I think this manuscript needs minor revision and adding recommended 13 references before considering it for publication.
Regards
AE

Dear Dr, AE

Thank you for your consideration, according to your suggestion we have added all 13 references. However, some of points of the first reviewer are not appropriate for our narrative review manuscript. We are waiting for your response

Yours Sincerely

OPEN PEER REVIEW

Revision (1)

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

REFEREE: Reviewer | **Revision** (1) 13 Jun 2021

Dear AE,
Fortunately, the author could correct the majority of the requested items. The main concern is the references' numbering in the References Section.
- References should be numbered in the order in which they appear in the text
- The author, at first, numbered the references (59-72) in the References Section, then placed them in the text.
- Therefore please up data numbering in the References Section based on their place in the main text.
Regards

REFEREE: Associate Editor | **Revision** (1) 13 Jun 2021

Dear EIC,
I read with interest this revised format and based on reviewers' comments it needs some corrections (reference numbering) before publishing.
Regards

REFEREE: EIC | **Revision** (1) 13 Jun 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 (2)

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.

Reply to reviewers and EIC

Dear EIC, reviewers

We hereby provide you an edited version of out manuscript

:Reviewers' Comments

Reviewer 1:

Dear Editor in Chief

Fortunately author could correct the majority of requested item. The main concern is references numbering at References Section.

References should be numbered in the order in which they appear in the text

The author, at first, numbered the references (59-72) at the References Section, then placed them in the text. ***All Done***

There for please up data numbering in the References Section based on their place in the main text.

Final decision: Minor revision

Regards

AE

:Associate Editor's Comments

:Associate Editor 1

Dear Editor in Chief

Prof Farnad Imani

I read with interest this revised format, and based on reviewers' comments it need some .corrections (reference numbering) before publishing

Final decision: Minor revision

AE

Dear Dr, AE

All references edited. We are waiting for your response

Yours Sincerely

OPEN PEER REVIEW

Revision (2)

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** (2) 16 Jun 2021

Dear EIC,
The author could correct the reference numbering, and it can be considered for publishing.
Regards

REFEREE: EIC | **Revision** (2) 16 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.