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 "**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:

Peer Review

Anesthesiology and Pain Medicine
Article DOI: https://doi.org/10.5812/aapm.121648
Published in: Anesthesiology and Pain Medicine: 12(1) ; e121648

Peer Review Report for "Pre-operative Ultrasonographic Evaluation of the Internal Jugular Vein Collapsibility Index and Inferior Vena Cava Collapsibility Index to Predict Post Spinal Hypotension in Pregnant Women Undergoing Caesarean Section"

Author(s): Amr Arafa Elbadry, Ahmed El dabe, Motaz Amr Abu Sabaa

Review Timeline:

Submit Date:	8 Dec 2021
Revised Date:	6 Feb 2022
Accepted Date:	8 Feb 2022

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

24 Dec 2021

I suppose following suggestions would be better considered:
Minor English revision is required.
The ultrasound devise specifications need to be mentioned (line 70).
The position of the patients during spinal anesthesia was not mentioned (line 90).
Please correct the 20gram fentanyl dose and clarify the location of injection which, of course, was not into the intervertebral space (line 90).
Please correct the definition of bradycardia (line 99)

The level of the sympathetic block that occurred with sensory block, could affect the incidence and the severity of hypotension. It would have been better if this had been considered in the study, for example, those with sensory blocks higher than T4 were excluded from the study, or at least it had been mentioned as one of the limitations of the study.

Please explain AUC, below Table 4. (Line 297).

Suggest the following four references:

Kasem Rashwan SA, Bassiouny AAE, Badawy AA, Mohammed AR. The relation between common carotid artery diameter and central venous pressure for assessment of intravascular fluid status after major surgeries; an observational study. Anesth Pain Med. 2020;10(4). e105138.

Kasem SA, Ahmed AG, Nagm Eldeen H, Kassim DY. Non-invasive Assessment of Intravascular Volume Status for Postoperative Patients: The Correlation Between the Internal Jugular Vein/Common Carotid Artery Cross-sectional Area Ratio and the Inferior Vena Cava Diameter. Anesth Pain Med. 2021;11(3):e114597.

Rajabi M, Razavizade M, Hamidi-Shad M, Tabasi Z, Akbari H, et al. Magnesium Sulfate and Clonidine; Effects on Hemodynamic Factors and Depth of General Anesthesia in Cesarean Section. Anesth Pain Med. 2020;10(5):e100563.

Shafeinia A , Ghaed M A , Nikoubakht N . The Effect of Phenylephrine Infusion on Maternal Hemodynamic Changes During Spinal Anesthesia for Cesarean Delivery. Anesth Pain Med. 2020;10(1):e99094.

Sincerely,

REFEREE : EIC

7 Jan 2022

Major Revision

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.

- Q1: [Was the patients ultrasound performed by one person or by several people?]
- R: [All examinations were performed by the same anesthesiologist, Line 72]
- Q2: [Please correct the dose of Fentanyl to 20 mcg in explanation of the study method.]
- R: [20 mcg fentanyl] Page3, Line 90.
- Q3: [Minor English revision is required]
- R: [All Manuscript has been revised]
- Q4: [The ultrasound devise specifications need to be mentioned]
- R: [a sonosite M-Turbo ultrasound machine] Page3, Line 69.
- Q5: [Was the patients ultrasound performed by one person or by several people?]
- R: [All examinations were performed by the same anesthesiologist] Page3, Line 72
- Q6: [The position of the patients during spinal anesthesia was not mentioned]
- R: [cases were positioned supine] Page 3, Line 89.
- Q7: [The level of the sympathetic block that occurred with sensory block, could affect the incidence and the severity of hypotension. It would have been better if this had been considered in the study, for example, those with sensory blocks higher than T4 were excluded from the study, or at least it had been mentioned as one of the limitations of the study]
- R: [those with sensory blocks higher than T4 were excluded from the study] Page 7, Line 201.
- Q8: [Please explain AUC, below Table 4]
- R: [AUC: area under the curve] Page 13, Line 307.
- Q9: [Cross-sectional studies measure parameters at a single point of time. The term ‘prospective’ should be eliminated]
- R: [This cross-sectional blinded] Page 1, Line 12.
- Q10: [Using ROC curve analysis as the basis for choosing cut-off values for IVCCI and IJVCI should be explained in statistical analysis]
- R: [Receiver Operating Characteristic curve (ROC-curve) analysis was also performed to show the diagnostic accuracy] Page 4, Line 115,116.
- Q11: [In the results section it is mentioned that ‘Ephedrine was needed in significantly higher doses in the PSAH group (11.08 vs. 1.86 130 mg in the other group’. As I understand, the basis for dividing the participants into two groups was the occurrence of hypotension and need for ephedrine. I would be pleased if the authors could clarify the issue]
- R: [That was an old version of our manuscript, we had corrected it in this new version]
- Q12: [As a minor query, there are spelling mistakes in the text. For instance: Line 90 Units of medications used in spinal anesthesia are misspelled.]
- R: [20 mcg] Page 3, Line 90.
- Q13: [Line 99 Bradycardia, defined as a heart rate ‘more’ than 50 beats ….
- Line 125 ‘Heart rate’…
- Line 128 ‘baseline’….]
- R: [Heart rate, baseline] Page 5, line 126, 129.

OPEN PEER REVIEW

Revision (1)

REFEREE : EIC

28 Jan 2022

Minor Revision

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.

Q: [*Figure 1 which has been mentioned in the text is not uploaded nor added in the manuscript. The Figures should be uploaded as separate files on the journal website.*]

R: [Figure 1 has been uploaded separately on the journal website]

OPEN PEER REVIEW

Revision (2)

Farnad Imani : EIC

8 Feb 2022

Dear Authors,

We are pleased to inform you that your manuscript has been accepted for publication. The reviewers found your work to be valuable, scientifically sound, and a meaningful contribution to the field. We appreciate the effort and dedication you invested in this study, and we thank you for choosing our journal to share your research. Congratulations on this achievement, and we look forward to your future submissions.