OPEN PEER REVIEW

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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
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- Education of both authors and new students
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You can find out more at:
https://sites.kowsarpub.com/kowsar/knowledgebase/category/tree.html#opr.html

Archives of Neuroscience
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Peer Review Report for "Long-Term Outcome Following Decompressive Craniectomy in Pediatric Penetrating Blast Brain Injury; a Prospective Study"

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Review Timeline:

Submit Date:	21 Jun 2021
Revised Date:	26 Oct 2021
Accepted Date:	30 Oct 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) — 5 Sep 2021

Dear AE,
Thanks very much because of the discussion on this relevant topic.
As the authors have written in the manuscript, it is very very homogenous.
If the authors want to recommend that decompressive cranitomy be a method for preserving the patients' survival it is a little bit difficult because they just do surgery on three cases.
Although, I think it is a good manuscript for publication and it may be better to focus on duration time of anisocoria if it is clear/, the variation range of ICP after surgery, GOS after discharge and also the anatomical brain damage in operated cases.
Best regards

REFEREE: Reviewer | Revision (0) — 14 Sep 2021

Dear AE,
1. I congratulate the authors for successfully managing difficult paediatric head injury patients.
2. There are only three patients who underwent DC in this study of 15 patients. A comparison of conservative vs surgical management could have made the study more

interesting.
3. Three children who underwent surgery had no option but to undergo a DC, as it appears from the text. that they survived with good outcomes can be a piece of encouraging information while dealing with poor GCS paed patients but, it cannot be a statement to support DC.
Thanks.

REFEREE: Associate Editor | **Revision** (0) 14 Sep 2021

Dear EIC,
The manuscript is studied, and there are some comments which should be addressed by the author. According to the comments, the document needs major revision.
Kind regards,

REFEREE: EIC | **Revision** (0) 14 Sep 2021

Dear Author,
The reviewers' comments are mentioned. Please correct the details as mentioned above carefully according to reviewers' request.
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 Editor,

I really appreciate you and the great reviewers for their valuable comments regarding the manuscript entitled “Long term outcome following decompressive craniectomy in pediatric penetrating blast brain injury; a prospective study”.

The changes are highlighted in yellow and the prepared answers for recommended items are as follows:

Reviewer 1

We agree that the findings could not be generalized according to the limited number of cases. Therefore, the limitations of study and its results are emphasized again in abstract, introduction and conclusions. Moreover, Characteristics of reported patients are more explained in details.

Reviewer 2

1- Thanks for your kind recommendation about comparative study; that would be great and ideal. However, the patients were pediatric victims of blast injuries by land mines, which is quite infrequent and therefore, comparative study was not applicable. Due to the critical status of patients, aggressive neurosurgical resuscitation according to combat guidelines was performed.
2- The limited value of study and findings are emphasized again in different parts, such as the following paragraph:
Survivors of pediatric blast brain injury had favorable outcome after decompressive craniectomy in the current paper. Early post traumatic GCS did not seem to predict the outcome in survivors of blast-related injuries, especially in the absence of major general trauma. However, there was limited number of patients and the results could not be generalized. There was no possibility for comparative controlled study. Further research in this regard with larger sample size is recommended.

I appreciate again and hope the changes made in the manuscript meet your expectations.

With kind regards.

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) 30 Oct 2021

Dear AE,
A case series reporting successful management of pediatric cases of penetrating head injuries with poor GCS on presentation showing encouraging outcomes. Not many similar case reports exist and can be a valuable addition to the volume of information available on the subject.
Worth Publishing in the journal.
Thanks.

REFEREE: Associate Editor | **Revision** (1) 30 Oct 2021

Dear EIC
Based on the authors' answers to the reviewers' comments, the reviewer(s) have recommended publication.
Kind regards.

REFEREE: EIC | **Revision** (1) 30 Oct 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.