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

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Peer Review Report for "A Case Report of Late-Onset Neonatal Meningitis Caused by SARS-CoV-2"

Author(s): Zahra Jamali, Fatemeh Dehghani, Ali Hosseininasab

Review Timeline:

Submit Date: 17 Feb 2021
Revised Date: 20 Apr 2021
Accepted Date: 25 Apr 2021

Revision (0)

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

Fariba Hemmati: Reviewer | Revision (0) 8 Mar 2021

Dear AE,
I review the manuscript with the title “Late-onset Neonatal Meningitis Caused by SARS-CoV-2” and ID number: 113879.
It was an interesting case but I have the following questions and recommendations:
- The words “case report” should be added to the title.
- Describe the relevant neurologic examination in the case presentation. What were the positive findings in history and physical examination, that change your diagnostic assessment (check PCR test covid 19 in CSF)?
- Why polymerase Chain reaction (PCR) test for COVID-19 was checked in both cerebrospinal fluid (CSF) and nasopharynx for the first time in this case?
- Are you checked PCR in CSF for covid-19 in all newborns admitted with the impression of sepsis and had CSF analysis?
- What are the primary “take-away” lessons of this case report?
- If we checked all CSF samples for covid 19 during the pandemic, there are diagnostic challenges such as access and financial problems and it was logical that after a positive test of nasopharynx for covid 19 and pleocytosis in CSF, repeat lumbar puncture and request PCR of covid in CSF.
- Are you checked PCR of COVID19 in blood? If NO, why isn’t done? If YES, what was the result?

- Discussion of the relevant medical literature must be added. (for example, a case report in 6th reference)
- You untold the strengths and limitations in your approach to this case in the discussion and it must be added.
- There are some mistakes in grammar that some highlighted and comments added.
Thanks

REFEREE: Reviewer | **Revision** (0) 19 Mar 2021

Dear AE,
Thanks for your valuable case report. There are some comments:
Abstract
-"This study report is wrong". It is a case report, not a study. Some English revisions are needed.
- Introduction, case presentation, and …. Should be written in the abstract.
Case presentation
- Why didn't you begin antiviral therapy such as remdesivir for the patient?
- Figure-1 is not necessary and delete it. Only report CXR was normal is sufficient.
Table-1 should be deleted and only briefly report the laboratory tests in your case presentation.
Discussion
-There are some English problems. Please consult with an expert in English.
- It is a case report not a study. Please delete "the study".
References
At least 10 references are necessary for a case report. Please add another one.
Thanks.

Ali Amanati: Associate Editor | **Revision** (0) 20 Mar 2021

Dear EIC,
Please the authors follow the reviewer's comments and reply in a point-by-point manner.
Please highlight new changes in the manuscript.
English copy-editing is warranted before the next submission.
Thanks

REFEREE: EIC | **Revision** (0) 27 Mar 2021

Dear Authors,
My decision about this manuscript (minor revision).
Thanks.

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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.

Reviewers' Comments:

Reviewer 1:
Dear corresponding author
I review your manuscript with title of “Late-onset Neonatal Meningitis Caused by SARS-CoV-2” and ID number: 113879.
It was interesting case but I have the following questions and recommendations:
The words “case report” should be added in the title.

Describe the relevant neurologic examination in case presentation. What was the positive findings in history and physical examination, that change your diagnostic assessment (check PCR test covid 19 in CSF)?

It were described and highlighted in the manuscript

Why polymerase Chain reaction (PCR) test for COVID-19 was checked in both cerebrospinal fluid (CSF) and nasopharynx at the first time in this case?

Due to the pandemic of COVID-19 and the history of upper respiratory tract infection in his siblings, in addition CSF analysis showed viral involvement pattern, the patient underwent nasopharynx and CSF polymerase Chain reaction (PCR) test for COVID-19.

Are you checked PCR in CSF for covid-19 in all newborns admitted with impression of sepsis and had CSF analysis?

No

What’s the primary “take-away” lessons of this case report?

The lesson to be learned from this case report is that the new coronavirus may be the cause of neonatal meningitis.

If we checked all CSF samples for covid 19 during pandemic, there are diagnostic challenges

such as access and financial problems and it was logical that after positive test of nasopharynx for covid 19 and pleocytosis in CSF, repeat lumbar puncture and request PCR of covid in CSF.

PCR test results of nasopharyngeal was positive for SARS-CoV-2. some cerebrospinal fluid was available in the laboratory and we decided to check SARS-CoV-2 on the CSF sample

Are you checked PCR of COVID19 in blood? If NO, why isn't done? If YES, what was the result?

Blood PCR is not checked. Virus is not very important for the infection of this virus. We did not think about this at all.

Discussion of the relevant medical literature must be added. (for example, case report in 6th reference).

Corrected

You untold the strengths and limitations in your approach to this case in the discussion and it must be added.

We didn't check the blood PCR for SARS-CoV-2 and this is one of the limitations of this report.

There are some mistakes in grammar that some highlighted and comments added.

Corrected

Reviewer 2:
Thanks for your valuable case report. There are some comments:
Abstract

-“This study reports is wrong”. It is a case report not study. Some English revisions is needed.

Corrected

-Introduction, case presentation and …. Should be written in abstract.
Case presentation

Corrected

-Why didn’t you begin antiviral therapy such as remdesivir for the patient?

The effect of antiviral drugs in children is not known. We do not have experience in antiviral therapy for the treatment of children in our center, and due to the recovery of the baby with supportive care, antiviral therapy was not performed.

-Figure-1 is not necessary and delete it. Only report CXR was normal is sufficient.

Corrected

Table-1 should be deleted and only briefly report the laboratory tests in your case presentation.
Discussion

Corrected

-There are some English problems. Please consult with an expert in English.

Corrected

-It is a case report not study. Please delete “the study”.

Corrected

References
At least 10 references are necessary for a case report. Please add another one.

Added

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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.

Ali Amanati: Associate Editor | **Revision** (1) 13 Apr 2021

Dear EIC,
The manuscript's overall presentation improved after amendments; however, some comments should consider in the new submission.
- The abstract should be structured based on journal style. (Introduction, Case presentation, and Conclusion)
- Add a separate heading for "Conclusion" following the discussion section.
Other shortcomings:
- Use lowercase for "meningitis" in the text.
Thanks.

REFEREE: EIC | **Revision** (1) 17 Apr 2021

Dear Authors,
My decision about this manuscript is a minor revision.
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.

Dear Editor in chief.

The abstract was structured based on journal style. (Introduction, Case presentation, and Conclusion).

Added a separate heading for "Conclusion" following the discussion section.

Used lowercase for "meningitis" in the text, except at the beginning of sentences.

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Revision (2)

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

Ali Amanati: Associate Editor | **Revision** (2) 22 Apr 2021

Dear EIC,
I read the revised manuscript, I have no further comments to add. I thank the authors for their very detailed replies to my comments.
Thanks.

REFEREE: EIC | **Revision** (2) 25 Apr 2021

Dear Authors,
My decision about this manuscript is accepting.
Thanks.