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

Archives of Clinical Infectious Diseases
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Peer Review Report for "The Prevalence of Viruses in the Cerebrospinal Fluid of Children with Aseptic Meningitis in Shiraz, Iran"

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Review Timeline:

Submit Date: 11 Jan 2020
Revised Date: 2 Nov 2020
Accepted Date: 8 Nov 2020

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)

13 Jun 2020

Dear AE,
There are some comments which should be addressed by the author:
Major points:
1- My specific point is about Methods and Materials part. Why and HOW did the respected authors detect viral infections by qreal time PCR:" Real-time PCR was performed using the Superscript III/Platinum One-step qRT-PCR system"?!!!! and if they really used this technique, why they did not report related viral load of each infection????!!!
2- They must explain their method completely for example if they used multiplex PCR or conventional PCR,…. Also they must present data on qreal time PCR standards and primer/probe sequences?!!!
3- English and scientific writing of this manuscript must be reviewed. Some parts must be changed and re- written for example: " The mean age of children was 42.7 months (range: 1-190 months)." OR " Summer with 21 (38.9 %) cases was peak aseptic meningitis season in this study (fig. 1)."!!!!! Besides figures and tables (!!!) must be reviewed. (How does brucellosis relate to this research original paper????)
4- Based on MESH documents "child is A person 6 to 12 years of age or An individual 2 to 5 years old is CHILD, PRESCHOOL." Therefore how Children aged 1 month to 16 years

with suspected viral meningitis were enrolled in this study??!!
5- First part of discussion and also conclusion part are written weakly and did not provide enough data to discuss about research findings.
Minor points:
1- What is the meaning of this sentence:" Commercially available Primer kits (Primer Design, UK) were used for enterovirus, mumps, measles, adenovirus, EBV, CMV, VZV, hhv 6and rubella viruses"?!!!!!
My decision is Major revision.
Thanks.

REFEREE: Reviewer | **Revision** (0) 15 Sep 2020

Dear AE,
- The manuscript is well-written nut nedds revision.
- In the Method part, " partially treated meningitis " should be defined.
- Unfortunately, the tables are compeletely irrelevant and related to another manuscript. So the review of the results and discussion was not possible.
- The authors should subsitute tables.
Thanks.

REFEREE: Associate Editor | **Revision** (0) 20 Sep 2020

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) 27 Sep 2020

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

Thanks for reading and revising our manuscript entitled “The Prevalence of Viruses in the Cerebrospinal Fluid of Children with Aseptic Meningitis in Shiraz, Iran”. We carefully considered your comments and have applied suggested changes into the manuscript.

Dear Prof. Babak Abdinia,

Thank you for submitting your valuable manuscript to our journal. We would like to inform you that the peer review process of your manuscript is complete and requires "**Major Revision**". Although it has several useful points, it needs **Major Revision** to be reviewed again. Below you can find the abstracts of the peer review decision made by our editorial board members.

Reviewers' Comments:

Reviewer 1:

Major points:

1- My specific point is about Methods and Materials part. Why and HOW did the respected authors detect viral infections by qreal time PCR:" Real-time PCR was performed using the Superscript III/Platinum One-step qRT-PCR system"?!!!! and if they really used this technique, why they did not report related viral load of each infection????!!!

Response: We used quantitative real-time PCR due to its high sensitivity compared with conventional PCR that can detect low copy numbers (10 copies) of template nucleic acid. We used TaqMan real-time PCR in the present study and more detail on the procedure have been added to the method section. Viral load in the CSF was not important for us and did not account. Based on standard curve, patients were considered positive when viral DNA or RNA copy numbers were higher than 20.

2- They must explain their method completely for example if they used multiplex PCR or conventional PCR,…. Also they must present data on qreal time PCR standards and primer/probe sequences?!!!

Response: More detail has been added in the method section to clarify real-time procedure. The primers and probes used in the study were commercial and their sequences are not available.

3- English and scientific writing of this manuscript must be reviewed. Some parts must be changed and re- written for example: " The mean age of children was 42.7 months (range: 1-190 months)." OR "Summer with 21 (38.9 %) cases was peak aseptic meningitis season in this study (fig. 1)."!!!!! Besides figures and tables (!!!) must be reviewed. (How does brucellosis relate to this research original paper????)

Response: The manuscript has been edited by professional editor. I'm sorry we made an error in tables section. We replaced it, also.

4- Based on MESH documents "child is a person 6 to 12 years of age or An individual 2 to 5 years old is CHILD, PRESCHOOL." Therefore how Children aged 1 month to 16 years with suspected viral meningitis were enrolled in this study??!!

Response: According to the WHO definition for children, "A child is a person 19 years or younger unless national law defines a person to be an adult at an earlier age." Also, in our country, people under 18 years of age who needed hospitalization, would be admitted in pediatric wards.

5- First part of discussion and also conclusion part are written weakly and did not provide enough data to discuss about research findings.

Response: Some changes in the discussion section were made for more clarification. Also, we have rewritten the conclusion section.

Minor points:

1- What is the meaning of this sentence:" Commercially available Primer kits (Primer Design, UK) were used for enterovirus, mumps, measles, adenovirus, EBV, CMV, VZV, hhv 6and rubella viruses"?!!!!!

Response: The primer sets and probes used in this study were commercial ones. For more clarification about real-time PCR, this sentence was changed and some explanation were added to the method section.

My decision is Major revision.

Reviewer 2:

Dear Editor

The manuscript is well written nut nedds revision.

In Method part, "partially treated meningitis" should be defined.

Response: "Partially treated meningitis" are patients that received one or more doses of antibiotics before admission to the hospital. This definition was added.

Unfortunately the tables are completely irrelevant and related to other manuscript. So the review of the results and discussion was not possible. The authors should substitute tables.

Response: We deeply apology for this mistake and corrected it.

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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.

Masoud Mardani: EIC | **Revision (1)** 8 Nov 2020

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