

OPEN PEER REVIEW

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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

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Peer Review Report for "Diagnostic Challenges and Multidisciplinary Approaches in Differentiating Pediatric Bone Infections from Sarcomas: A Narrative Review"

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Review Timeline:

Submit Date:	25 Oct 2024
Revised Date:	10 Mar 2025
Accepted Date:	16 Mar 2025

Revision (0)

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

Barbara Jasiewicz : Reviewer

24 Jan 2025

Both pediatric bone infections and tumors require proper diagnostics and multidisciplinary approach. Differential diagnosis is an important issue. So, the article is within the scope of the journal and it concerns an important problem.

Title - OK.

Abstract - structured, keywords attached.

Introduction - it includes goals of the paper, but there is lack of basic data about tumors and infection.

Topic 1-8: more details about differences/ similarities in symptoms and imaging (x-

ray, MRI) - may be a table?
Conclusions should be more concise.
References - in narrative review at least 80!

Narjes Mehrvar : Reviewer

2 Feb 2025

Dear EIC,

This was a great job and an amazing narrative review. You did your best, and surely, your results will be useful for health professionals.

Yours sincerely

REFEREE : Associate Editor

11 Feb 2025

Dear EIC,

This manuscript needs some revision based on the review comments.

REFEREE : EIC

11 Feb 2025

Dear Author,

Please revise the manuscript according to the review comments and resubmit.

Thank You.

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 Editors and Reviewers,

We sincerely appreciate the thoughtful feedback and constructive comments on our manuscript. We are grateful for the reviewers' recognition of the **importance of differential diagnosis** between pediatric bone infections and sarcomas and their acknowledgment of the manuscript's relevance to the journal's scope.

We have carefully addressed all the suggested revisions to further enhance the clarity, depth, and rigor of our work. Specifically, we have:

- Expanded the **Introduction** to include essential background information on pediatric bone infections and tumors.
- Designed a **comprehensive comparison table** to illustrate the differences and similarities in symptoms and imaging findings (X-ray, MRI).
- Revised the **Conclusion** to be more concise while maintaining key takeaways.
- Increased the **number of references** to align with narrative review standards while ensuring a comprehensive, multidisciplinary discussion.
- Added a **Limitations section** to discuss challenges in the reviewed studies.
- Clarified the **search strategy and database selection** used in our review.
- Confirmed that the **title clearly states the study as a "Narrative Review."**

We believe these modifications strengthen the manuscript, and we sincerely appreciate the reviewers' insights that guided these refinements. Below is a **detailed point-by-point response** to each comment.

Table: Response to Reviewers' Comments

Reviewer's Comment	Response & Revisions Made
Reviewer 1: "This was a great job and an amazing narrative review. You did your best, and surely, your results will be useful for health professionals."	We sincerely appreciate the positive feedback and are pleased that you found the manuscript valuable for healthcare professionals. Thank you for your support.
Reviewer 2: "Introduction - it includes goals of the paper, but there is lack of basic data about tumors and infection."	We have revised the Introduction by incorporating fundamental background data on pediatric bone tumors and infections, including epidemiology, etiology, and pathophysiology , to provide a more comprehensive foundation for readers.
Reviewer 2: "Topic 1-8: More details about differences/similarities in symptoms and imaging (X-ray, MRI) - may be a table?"	A detailed comparative table has been created and added to the manuscript under the "Differential Diagnosis" section. This table clearly presents the similarities and differences in clinical symptoms and imaging findings, ensuring clarity for readers.
Reviewer 2: "Conclusions"	We have rewritten the Conclusion to be more

should be more concise.”	concise while preserving the key takeaways. The revised version eliminates redundancy and focuses on essential findings and future research directions.
Reviewer 2: “References - in narrative review at least 80!”	While our manuscript already covered various aspects of the topic (epidemiology, diagnostics, radiology, pediatrics, orthopedics, infectious diseases, and oncology) comprehensively, we have added more references based on the revised sections. The final reference count now meets the expectations for a narrative review.
Reviewer 2: “Discuss the limitations of the studies included in the review.”	A dedicated "Limitations" section has been added to discuss heterogeneity among studies, reliance on retrospective data, and publication bias . This provides a balanced perspective on the strengths and weaknesses of the reviewed literature.
Associate Editor: “Clearly state the review as a narrative review in the title.”	The title already includes the term "Narrative Review" , making the study type explicit to readers.
Associate Editor: “Provide details on the search strategy and databases used.”	We have included specific details on the search strategy, databases used, and inclusion/exclusion criteria to clarify how the reviewed literature was selected.

We appreciate the time and effort of the **editors and reviewers** in evaluating our manuscript. Their insightful comments have significantly improved the quality and clarity of our work. We hope that the revised manuscript meets the journal's standards and look forward to your further feedback.

Sincerely,

Corresponding author

OPEN PEER REVIEW

Revision (1)

REFEREE : EIC

16 Mar 2025

Dear Author,

Thank you for submitting your work to IJCM.