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 "**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 "Calcified Ball Thrombus in the Right Atrium: A Case Report"

Author(s): Bo Zhang, Zhong Wei Tian, Ji Zhang, Kun Mao Yuan, Hong Yu

Review Timeline:

Submit Date: 10 Jun 2019
Revised Date: 7 Nov 2019
Accepted Date: 12 Nov 2019

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) — 4 Jul 2019

Dear AE,
1- This case report needs some grammatical corrections.
2- According to the patient's clinical history of atrial fibrillation, the mass in the right atrium is highly suspected of a calcified clot.
3- Cardiac MRI assessment as a non-invasive diagnostic method for tissue characterization to differentiate a clot from a cardiac mass, is not performed.
Thanks.

REFEREE: Reviewer | **Revision** (0) — 6 Jul 2019

Dear AE,
The submitted manuscript dealt with a case of round, calcified thrombus ball found in the right atrial luminal space of a 72-year-old female.
The major concerns with the manuscript are as follows:
1- There are a few grammatical points to be rectified.
2- Please describe the “activities for 3 days” mentioned in the 2nd line of the “Case Presentation” section.
3- Using “isoechoic” rather than “isointense” in terms of ultrasonic findings might be preferred.

4- It is recommended to describe the Doppler flow findings of the lesion.
5- Please determine whether non-contrasted CT was performed to determine its "enhancement".
6- Please clarify why the MRI assessment of the lesion was not performed.
7- The clinical outcome of the patient following surgical removal of the lesion is not explained.
8- Describe what the "arrow" in Figure-1 is addressing in its legend (connection of the lesion to the atrial septum).
Thanks.

REFEREE: Associate Editor | **Revision (0)** 12 Jul 2019

Dear EIC,
Based on made reviews, the submitted manuscript requires MAJOR REVISION to be re-assessed.
Thanks.

REFEREE: EIC | **Revision (0)** 13 Jul 2019

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

Reply to Reviewers

Reviewer 1:

1- This case report needs some grammatical corrections

We have revised the grammatical problems throughout the full text carefully.

2- According to the patient's clinical history of atrial fibrillation, the mass in the right atrium is highly suspected for a calcified clot

Yes, we also think about it as calcified clot. But the findings of contrast enhanced CT is rare. It is also need to differentiate with tumor.

3- Cardiac MRI assessment as a non-invasive diagnostic method for tissue characterization to differentiate a clot from a cardiac mass, is not performed.

Contrast enhanced CT is the first choice for diagnosis. The patient underwent surgery without MRI examination. MR examination need waiting for one week according to schedule. But it is good choice for making a diagnosis.

Reviewer 2:

The submitted manuscript dealt with a case of round, calcified thrombus ball found in the right atrial luminal space of a 72-year-old female.

The major concerns with the manuscript are as follows:

1- There are a few grammatical points to be rectified.

We have revised the grammatical problems throughout the full text carefully.

2- Please describe the "activities for 3 days" mentioned in the 2nd line of "Case Presentation" section.

The sentence has been revised as "A 72-year-old female patient was admitted to our hospital with chest tightness and bilateral lower extremity edema over three days on July 24, 2017."

3- Using "Isoechoic" rather than "Isointense" in terms of ultrasonic findings might be preferred.

We have revised in the text.

4- It is recommended to describe the Doppler flow findings of the lesion.

We describe the Doppler flow finding as "there is no obvious abnormal blood flow in the upper or lower heart chambers".

5- Please determine whether non-contrasted CT was performed to determine its "enhancement".

Non-contrasted CT was performed Routinely.

6- Please clarify why MRI assessment of the lesion was not performed.

Contrast enhanced CT is the first choice for diagnosis. The patient underwent surgery without MRI examination. MR examination need waiting for one week according to schedule. But it is good choice for making a diagnosis.

7- The clinical outcome of the patient following surgical removal of the lesion is not explained.

During the two years of follow-up, the patient had no discomfort and was able to live independently. This sentence has been added in the revised manuscript.

8- Describe what the "arrow" in Figure-1 is addressing in its legend (connection of the lesion to the atrial septum).

The arrow in Figure-1 with no meaning has been deleted.

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.

Abbas Arjmand Shabestari: Reviewer | **Revision** (1) — 9 Oct 2019

Dear AE,
The revised manuscript appropriately responded to the asked questions and clarifications.
Thanks.

Abbas Arjmand Shabestari: Associate Editor | **Revision** (1) — 9 Oct 2019

Dear EIC,
Based on the made review, the revised manuscript might be accepted for publication in IJR.
Thanks.

Mehranoosh Dolatshahi: Associate Editor | **Revision** (1) — 29 Oct 2019

Dear EIC,
The author may respond to all comments one by one. Then, highlight any changes to make in the manuscript.
1- In the Case report section, “A yellowish cross-section of the mass resembling the necrotic tissues. The mass with calcified margin showing some gritty resistance to cutting and the dark red areas in the local marginal regions of the mass (Fig.4).
Do you mean, “A yellowish cross-section of the mass resembles necrotic tissue? The mass with a calcified margin shows gritty resistance to cutting and there are dark red areas in the local marginal regions of the mass (Fig.4).”?
Please clarify and rewrite.
2- In the discussion, “The inconsistency in this case compared with cases reported previously,….” This sentence is incomplete.
Do you mean, “The inconsistency, in this case, has been compared to cases reported previously.”? Please clarify and rewrite.
3- In Figure 2, there are two images. Please explain these two parts separately as A and B.
Thank you.

Kavous Firouznia: EIC | **Revision** (1) — 30 Oct 2019

Dear Authors,
According to the reviewer your article needs Minor Revision.

Regards

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.

Reply to Reviewers (Revision2)

Associate Editor 2:

1-In the Case report section, "A yellowish cross-section of the mass resembling the necrotic tissues. The mass with calcified margin showing some gritty resistance to cutting and the dark red areas in the local marginal regions of the mass (Fig.4).
Do you mean, "A yellowish cross-section of the mass resembles necrotic tissue. The mass with a calcified margin shows gritty resistance to cutting and there are dark red areas in the local marginal regions of the mass (Fig.4)."?
Please clarify and rewrite.

The sentence has been revised as "The mass with a calcified margin shows gritty resistance to cutting. On cross-section, the yellowish areas resemble necrotic tissue in the centre regions, while the dark red areas are thrombotic-like tissues in the local marginal regions of the mass."

2- In the discussion, "The inconsistency in this case compared with cases reported previously,… ."This sentence is incomplete.
Do you mean, "The inconsistency in this case has been compared

to cases reported previously."?

Please clarify and rewrite.

The sentence has been revised as "Compared with cases reported previously, this case is valuable for following reasons:"

3-In Figure 2, there are two images. Please explain these two parts separately as A and B.

The legend of Figure 2 has been revised as "Fig. 2. CT cross-section views showed an oval hypointense mass in the right atrium, with marginal shell-like calcifications (A). The merged volumetric rendering technique and multiplanar reconstruction images demonstrate the mass more clearly with a smooth surface (B)."

OPEN PEER REVIEW

Revision (2)

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

Mehranoosh Dolatshahi: Associate Editor | **Revision** (2) 11 Nov 2019

Dear EIC
The reviewer(s) have recommended publication.
Kind regards,
Associate Editor

Kavous Firouznia: EIC | **Revision** (2) 12 Nov 2019

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