**OPEN PEER REVIEW**

## Open Peer Review (OPR)

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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
- 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:

Peer Review

Journal of Kermanshah University of Medical Sciences
Article DOI: https://doi.org/10.5812/jkums.113798
Published in: Journal of Kermanshah University of Medical Sciences: 25(2) ; e113798

# Peer Review Report for "Bacterial Etiology of Lower Respiratory Tract Infections in Turkey: A Systematic Review"

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**Review Timeline:**

| | |
|---|---|
| Submit Date: | 14 Feb 2021 |
| Revised Date: | 19 Apr 2021 |
| Accepted Date: | 20 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.

**REFEREE** : Associate Editor

16 Mar 2021

Dear EIC
The reviewer(s) have recommended publication, but also suggest some minor revisions to the manuscript. Therefore, I invite the author to respond to the reviewer(s)' comments and revise his manuscript.
Kind regards,

**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.

**Revision answers**

1- In this article, there is no classification between nosocomial and outpatient infections and intubated patients because the type of microbes in each of these infections may be different.

Answer 1: In Table 1, all studies (excluding non-reporting) inpatient, outpatient and intensive care patients are classified.

2- Infection type is not considered in people at risk such as malignant disease, COPD, immunodeficiency, etc. Because the type of infection may be different in the presence of underlying diseases. There is no such category in this article.

Answer 2: Comorbidities of patients in all studies (excluding those who did not report) are shown in Table 1.

3- The articles have not been evaluated and evaluated in point of quality, because contamination with a microbe may be different from the real infection and therefore the determination of the real infection is effective as a result. Therefore, it is better to confirm the presence or absence of bias in the articles. For example, Acinetobacter is unlikely to be considered the most common cause of respiratory infections in all people unless it is only the case with nosocomial infections, so it is best to consider this classification.

Answer 3: The bias assessment could not be made due to the inhomogeneity of the data included in the studies and the lack of information diversity. Most of the studies included (you will see in Table 1) already consisted of intensive care and inpatients. Almost all patients have predisposing factors that predispose to underlying infection.

## OPEN PEER REVIEW

### Revision (1)

**OPEN PEER REVIEW**

**Revision (2)**

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"FIGURE LEGENDS, Figure 1: Flowchart diagram of the systematic review" has been added to the end of the text.

## OPEN PEER REVIEW

### Revision (2)