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Ambulatory Percutaneous Nephrolithotomy: Initial Series in Iran

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About this report

This open peer review (OPR) report shows the public comments made on this article during peer review, by the reviewers, the associate editor and the editor-in-chief, for every revision round, together with the authors' replies. Comments appear only with the consent of the people who wrote them. Reviewers who chose to sign their report are named; the others are shown as "Referee". Comments are edited for language only, and confidential remarks to the editors are not included.

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1 Original submission

0 comments

No public comments in this round.

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Revision 1

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Dear Editor,

We appreciate the time and effort you and the reviewers have dedicated to providing valuable feedback on our manuscript.

We are grateful to the reviewers for their insightful comments on our paper.

We have been able to incorporate changes to reflect all of the suggestions provided by the reviewers.

We have highlighted the changes within the manuscript in yellow color.

Here is a point-by-point response to the reviewers' comments and concerns.

We look forward to hearing from you regarding our submission and to responding to any further questions and comments you may have.

Kindest regards,

Behnam Shakiba, Corresponding author

Dear reviewer,

Special thanks for your consideration. We appreciate your time and valuable comments.

Here is the point-by-point reply to your valuable comments.

Comment 1: Please review your thesis natively and upload the proof in this space. Several grammatical mistakes was seen.

Response to comment 1:

Comment 2: You mentioned the cost of PCNL in America. It would be good to mention its cost in Iran by comparing 24 or 48 hour outpatient and inpatient treatment, because the title of your article is about the country of Iran. (You can move lines 210 to 216 to the beginning of the article with some interventions).

Response to comment 2: Dear reviewer, thanks for mentioning this important issue. We agree, and according to your valuable comment, we added one sentence about the PCNL's cost in Iran in both the Abstract and Introduction parts.

Abstract:

In developing countries such as Iran, bed occupancy is one of the issues negatively influencing healthcare performance

Introduction:

In Iran, the PCNL's cost is much lower. However, bed occupancy is one of the critical issues in the healthcare system, and it can negatively affect healthcare performance(3,4).

Comment 3: Instead of grouping A and B, it is better to use the words ((case)) and ((control)) to name the groups.

Response to comment 3: We agree. According to your valuable comment, Group A and B were changed in the manuscript.

Comment 4: In line 145, you have mentioned the TABLE 2 and the length of the access, while firstly it is not clear whether you exactly mean the Time of the access?? or something else..., secondly, this item is not included in the table at all, and you have also mentioned the number of accesses, which is also not clear in the table. There is also a spelling mistake.

Response to comment 4: Thanks for mentioning this. We agree. The length of the access and number of accesses were removed from line 145.

As presented in Table 2, stone-free rate, transfusion number, and perioperative complications did not significantly differ between the two groups.

Comment 5: In the surgical techniques section on line 95 you mentioned that the tubeless technique was used for all patients, but later we see the presence of nephrostomy or double J in the patients. As you know, the tubeless technique refers to the absence of any nephrostomy or double J in PCNL surgery.

Response to comment 5: Dear reviewer, thank you for your accuracy. The main technique in our center is the tubeless technique. However, in patients who require double J or nephrostomy, we replace them. We agree with you and we change this sentence in the surgical technique part depending on your comment.

The tubeless technique was the main technique. However, in cases that required double J or nephrostomy, they were placed

2 Revision 1

1 comment · 14 Feb 2024

Associate Editor

ACCEPT 14 Feb 2024

Accept