



SDI Review Form 1.6

Journal Name:	Asian Journal of Case Reports in Medicine and Health
Manuscript Number:	Ms_AJCRMH_60872
Title of the Manuscript:	COVID-19 Patient Associated with Rare Pneumatocele Finding: CT Features and Case Report
Type of the Article	Case report

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound. To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<http://www.sciencedomain.org/journal/10/editorial-policy>)

PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Compulsory REVISION comments	<p>The entire description of case is very typical of bacterial pneumonia complicated as infected pneumatocele/pyo-pneumatocele and pneumothorax. Except for initial COVID RTPCR positive report, none of the symptoms, clinical signs and investigations suggest COVID infection. No hypoxia, No distress, No evidence of inflammation or dysregulated immunity. Attempt to isolate organism from blood or drainage fluid was seen. Staphylococci, klebsiella, pseudomonas are common organisms. LDH, procalcitonin, ferritin would help to differentiate. Resolution HRCT was not mentioned.</p> <p>Patho-physiologically, it is very unlikely that you will get pneumatocele in COVID -19 because the hallmark of COVID pathology is disruption of alveolar-endothelial barrier leading to accumulation of fluid in alveoli causing V/Q mismatch. During resolution fibroproliferative processes dominates, thus having remote chance of air trapping and loculation, rather atelectasis is commonly seen.</p> <p>Thus, pneumatocele in this case doesn't appears to be due to COVID, but seems to primarily bacterial.</p>	
Minor REVISION comments	Some grammar, punctuation and sentence correction.	
Optional/General comments	During this pandemic period, it is happening that we are ascribing many of the known disease condition to COVID based on single positive RTPCRT report. In-fact RTPCR is very sensitive test and require highly trained person and better primers & controls. There are high chances of contamination if scrupulous methods are not followed. Our clinical judgement should be based on total picture of the illness and not on single test.	



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PART 2:

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Are there ethical issues in this manuscript?	<i>(If yes, Kindly please write down the ethical issues here in details)</i>	

Reviewer Details:

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