



SDI Review Form 1.6

Journal Name:	<u>Cardiology and Angiology: An International Journal</u>
Manuscript Number:	2014_CA_12229
Title of the Manuscript:	Changes of pre ejection period and left ventricular ejection time during head up tilt
Type of the Article	Short Research Article

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/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)



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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)
<u>Compulsory</u> REVISION comments	<p>The article is not novel, since a lot has been studied especially about the variation of Ejection Time in patients with syncope and in control groups. One of those manuscripts is</p> <p style="text-align: center;">“Assessment of Systolic Ejection Time as a Hemodynamic Marker of Incipient Bradycardic Vasovagal Syncope. A Pilot Study”</p> <p>By Fucà et al, PACE 2011; 34:954–962. The references of the same article are also relevant source of information.</p> <p>The authors should rewrite the manuscript in accordance with the scientific knowledge in this field and appropriately reposition what they think is novel.</p>	<p>First of all, I appreciate your valuable notes and recommendations.</p> <p>This study involved only healthy people, not complaining of any disease, in order to evaluate the changes in PEP and ET, a lot of researches had been done on changes of SV, CO, HR and BP, but only little was done on PEP and ET. Putting in mind different ethnicity and environmental factors between different areas of the world.</p> <p>The manuscript (Assessment of Systolic Ejection-----etc) involved patients with Bradycardic Vasovagal Syncope. I will work hard to rewrite the manuscript. Best wishes</p>
<u>Minor</u> REVISION comments		
<u>Optional/General</u> comments		