

# OBSTETRICS & GYNECOLOGY



**NOTICE:** This document contains comments from the reviewers and editors generated during peer review of the initial manuscript submission and sent to the author via email.

Questions about these materials may be directed to the *Obstetrics & Gynecology* editorial office:  
[obgyn@greenjournal.org](mailto:obgyn@greenjournal.org).

**Date:** Jun 21, 2022  
**To:** "Denise J. Jamieson" [REDACTED]  
**From:** "The Green Journal" em@greenjournal.org  
**Subject:** Your Submission ONG-22-1117

RE: Manuscript Number ONG-22-1117

A Primer on Monkeypox Virus for Obstetrician-Gynecologists: Diagnosis, Prevention and Treatment

Dear Dr. Jamieson:

Thank you for sending us your work for consideration for publication in Obstetrics & Gynecology. Your manuscript has been reviewed by the Editorial Board and by special expert referees. The Editors would like to invite you to submit a revised version for further consideration.

If you wish to revise your manuscript, please read the following comments submitted by the reviewers and Editors. Each point raised requires a response, by either revising your manuscript or making a clear argument as to why no revision is needed in the cover letter.

To facilitate our review, we prefer that the cover letter you submit with your revised manuscript include each reviewer and Editor comment below, followed by your response. That is, a point-by-point response is required to each of the EDITOR COMMENTS (if applicable), REVIEWER COMMENTS, and EDITORIAL OFFICE COMMENTS below. Your manuscript will be returned to you if a point-by-point response to each of these sections is not included.

The revised manuscript should indicate the position of all changes made. Please use the "track changes" feature in your document (do not use strikethrough or underline formatting).

Your submission will be maintained in active status for 7 days from the date of this letter. If we have not heard from you by Jun 28, 2022, we will assume you wish to withdraw the manuscript from further consideration.

#### EDITOR COMMENTS:

Thank you for your submission to O&G. We have a few comments for you to consider below. The journal will pursue fast-track publication online if you can send your revision back to us quickly. Randi Zung will send you an edited MS Word file in a separate message with some light edits.

#### REVIEWER COMMENTS:

Reviewer #1:

This is a comprehensive review of monkeypox. I have a few comments / suggestions.

-there is no description of the typical/average/range clinical course of monkeypox. how long are people sick, what are their symptoms, what is the fatality rate, how long does it last, are there any long term effects? that should probably go right before or after the infectivity section.

-the review would probably benefit from a more structured, sectioned, approach. for example: background, clinical presentation, transmission, clinical course, evaluation of possible monkeypox, treatment, then a final section on pregnancy, then resources. or something like that. it can also be significantly shorter.

-page 6, line 115. this is very vague. are the authors suggesting that OBGYNs obtain a travel history from every patient at every visit?

-page 8, line 156. what is meant by putting the word "healthy" in quotation marks?

Reviewer #2: The authors submit a primer on monkeypox virus for ob-gyns. I have the following comments regarding the manuscript:

#### Abstract

1. It sounds like the authors are recommending a genital and anal exam on everyone who presents with a rash. I do not think this is what was intended and likely just needs to be reworded. And do you mean rectal? Or anal and perianal?

#### Main manuscript

1. In the first paragraph that talks about monkeypox virus in general. There are two sentences in a row that state it can be spread through respiratory secretions. This can be deleted from the second sentence as it is repetitive. The sentence would then simply read, "While monkeypox is not classically considered a sexually transmitted infection, it can be transmitted through during close, intimate contact."

2. Would suggest printing directly a few photos from the CDC website as figures in the manuscript. You could still link them to the site for more, but a photo or two embedded within the publication as figures would be helpful. I do not believe any of the CDC resources are copyrighted so I think this would be acceptable.

3. In terms of reduction of transmission, should it say explicitly that sexual contact in the setting of anogenital lesions should be avoided? Consider adding when you discuss wearing clothing to cover lesions.

4. Consider changing "intrauterine fetal demise" to "stillbirth" throughout the paragraph about monkeypox and pregnancy.

#### Reviewer #3:

Line 74: In the following sentence, please change "remains" to "is." The sentence should read: "In addition, orthopoxviruses pose unique concerns during pregnancy and while little "is" known about monkeypox and pregnancy, prompt diagnosis, prevention and treatment may reduce the known risk of adverse outcomes."

Line 80-81: Please edit the sentence as follows: "On May 17, 2022, the first case in the United States of the West African strain Monkeypox virus was confirmed..."

Line 157: It should say "laboratories and the CDC..." here.

#### EDITORIAL OFFICE COMMENTS:

1. Could you add a line to your text that discusses how "monkeypox" is considered discriminatory and will be changed by the WHO? It seems that we'll have to use "monkeypox" unless the new word is announced before we finalize the paper for publication.

2. If your article is accepted, the journal will publish a copy of this revision letter and your point-by-point responses as supplemental digital content to the published article online. You may opt out by writing separately to the Editorial Office at em@greenjournal.org, and only the revision letter will be posted.

3. When you submit your revised manuscript, please make the following edits to ensure your submission contains the required information that was previously omitted for the initial double-blind peer review:

- \* Funding information (ie, grant numbers or industry support statements) should be disclosed on the title page and at the end of the abstract. For industry-sponsored studies, describe on the title page how the funder was or was not involved in the study.
- \* Include clinical trial registration numbers, PROSPERO registration numbers, or URLs at the end of the abstract (if applicable).
- \* Name the IRB or Ethics Committee institution in the Methods section (if applicable).
- \* Add any information about the specific location of the study (ie, city, state, or country), if necessary for context.

4. Obstetrics & Gynecology's Copyright Transfer Agreement (CTA) must be completed by all authors. When you uploaded your manuscript, each coauthor received an email with the subject, "Please verify your authorship for a submission to Obstetrics & Gynecology." Please ask your coauthor(s) to complete this form, and confirm the disclosures listed in their CTA are included on the manuscript's title page. If they did not receive the email, they should check their spam/junk folder. Requests to resend the CTA may be sent to em@greenjournal.org.

5. ACOG uses person-first language. Please review your submission to make sure to center the person before anything else. Examples include: "People with disabilities" or "women with disabilities" instead of "disabled people" or "disabled women"; "patients with HIV" or "women with HIV" instead of "HIV-positive patients" or "HIV-positive women"; and "people who are blind" or "women who are blind" instead of "blind people" or "blind women."

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7. Make sure your manuscript meets the following word limit. The word limit includes the manuscript body text only (for example, the Introduction through the Discussion in Original Research manuscripts), and excludes the title page, précis, abstract, tables, boxes, and figure legends, reference list, and supplemental digital content. Figures are not included in the word count.

Current Commentary: 3,000 words

8. Specific rules govern the use of acknowledgments in the journal. Please review the following guidelines and edit your title page as needed:

- \* All financial support of the study must be acknowledged.
- \* Any and all manuscript preparation assistance, including but not limited to topic development, data collection, analysis, writing, or editorial assistance, must be disclosed in the acknowledgments. Such acknowledgments must identify the entities that provided and paid for this assistance, whether directly or indirectly.
- \* All persons who contributed to the work reported in the manuscript, but not sufficiently to be authors, must be acknowledged. Written permission must be obtained from all individuals named in the acknowledgments, as readers may infer their endorsement of the data and conclusions. Please note that your response in the journal's electronic author form verifies that permission has been obtained from all named persons.
- \* If all or part of the paper was presented at the Annual Clinical and Scientific Meeting of the American College of Obstetricians and Gynecologists or at any other organizational meeting, that presentation should be noted (include the exact dates and location of the meeting or indicate whether the meeting was held virtually).
- \* If your manuscript was uploaded to a preprint server prior to submitting your manuscript to Obstetrics & Gynecology, add the following statement to your title page: "Before submission to Obstetrics & Gynecology, this article was posted to a preprint server at: [URL]."
- \* Do not use only authors' initials in the acknowledgement or Financial Disclosure; spell out their names the way they appear in the byline.

9. Provide a précis for use in the Table of Contents. The précis is a single sentence of no more than 25 words that states the conclusion(s) of the report (ie, the bottom line). The précis should be similar to the abstract's conclusion. Do not use commercial names, abbreviations, or acronyms in the précis. Please avoid phrases like "This paper presents" or "This case presents."

10. Be sure that each statement and any data in the abstract are also stated in the body of your manuscript, tables, or figures. Statements and data that appear in the abstract must also appear in the body text for consistency. Make sure there are no inconsistencies between the abstract and the manuscript, and that the abstract has a clear conclusion statement based on the results found in the manuscript.

In addition, the abstract length should follow journal guidelines. Please provide a word count.

Current Commentary: 250 words

11. Only standard abbreviations and acronyms are allowed. A selected list is available online at <http://edmgr.ovid.com/ong/accounts/abbreviations.pdf>. Abbreviations and acronyms cannot be used in the title or précis. Abbreviations and acronyms must be spelled out the first time they are used in the abstract and again in the body of the manuscript.

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13. ACOG avoids using "provider." Please replace "provider" throughout your paper with either a specific term that defines the group to which are referring (for example, "physicians," "nurses," etc.), or use "health care professional" if a specific term is not applicable.

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Please make sure your references are numbered in order of appearance in the text.

16. Figures: The Reviewers have requested a few figures be added to the submission. If you add figures, please cite them within the manuscript and include a legend. From the URL you've included, we would suggest ones that belongs to the CDC and not from another source (two of them are from the UK/NHS).

17. Authors whose manuscripts have been accepted for publication have the option to pay an article processing charge and publish open access. With this choice, articles are made freely available online immediately upon publication. An information sheet is available at <http://links.lww.com/LWW-ES/A48>. The cost for publishing an article as open access can be found at <https://wkauthorservices.editage.com/open-access/hybrid.html>.

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If you submit a revision, we will assume that it has been developed in consultation with your coauthors and that each author has given approval to the final form of the revision.

Sincerely,  
Dwight J. Rouse, MD, MSPH  
Associate Editor, OB

2020 IMPACT FACTOR: 7.661  
2020 IMPACT FACTOR RANKING: 3rd out of 83 ob/gyn journals

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