

Reviewer comments 1:

Reviewer #1: In this case report the authors present a novel surgical technique based on a clinical case with three-year follow-up which is very effective, even after failed previous procedures. Based on this case report with long term follow up, further research should be performed such as a case series in selected patients with good articular surfaces of the first metacarpal and os trapezium. The work is good and interesting, it could be accepted in the present form.

THANK YOU SO MUCH FOR YOUR COMMENTS. WE REALLY APPRECIATE IT.

Reviewer comments 2:

Please provide language certificate letter by professional English language editing companies (Classification of manuscript language quality evaluation is B).

For manuscripts submitted by non-native speakers of English, please provide language certificate by professional English language editing companies mentioned in 'The Revision Policies of BPG for Article'.

THANKS FOR YOUR COMMENT. THIS STUDY WAS PERFORMED AT COLUMBIA UNIVERSITY MEDICAL CENTER, NEW YORK. DR FREIBOTT AND DR ROSENWASSER ARE BOTH NATIVE ENGLISH SPEAKERS AND PROOF-READ THE ARTICLE BEFORE SUBMISSION.

Please provide the decomposable figure of all the figures, whose parts are all movable and editable, organize them into a PowerPoint file, and submit as "Manuscript No. - image files.ppt" on the system. Make sure that the layers in the PPT file are fully editable. For figures, use distinct colors with comparable visibility and consider colorblind individuals by avoiding the use of red and green for contrast.

Please read these four important guidelines carefully and modify your figure(s) accordingly:

First, all submitted figures, including the text contained within the figures, must be editable. Please provide the text in your figure(s) in text boxes.

Second, for line drawings that were automatically generated with software, please provide the labels/values of the ordinate and abscissa in text boxes.

Third, please prepare and arrange the figures using PowerPoint to ensure that all graphs or text portions can be reprocessed by the editor.

Fourth, in consideration of color-blind readers, please avoid using red and green for contrast in vector graphics or images.

For pictures with multiple parts, please create text box in the upper left corner with uppercase letters A, B, etc. ; please use SmartArt, text box and shape to draw the flowchart directly in PowerPoint;

Please revise and perfect your manuscript according to peer-reviewers' comments.

THANKS WE MADE ALL EFFORTS AND SUBMITTED THE IMAGE FILES IN A PPT FILE ACCORDING TO THE INSTRUCTIONS.

XXX (family name should be put first in full, followed by middle names and first name in abbreviation with first letter in capital) designed research; XXX performed research; XXX contributed new reagents or analytic tools; XXX analyzed data; XXX wrote the paper. An author may list more than one contribution, and more than one author may have contributed to the same aspect.

THANKS WE ADDED EACH INDIVIDUAL AUTHOR CONTRIBUTION

Please add it here (Informed consent statement)

THANKS WE ADDED EVERYTHING ACCORDINGLY

Please rewrite the abstract as following

BACKGROUND (no more than 80 words)

What does this case report add to the medical literature? Why did you write it up?

CASE SUMMARY (no more than 150 words)

Chief complaints, diagnoses, interventions, and outcomes.

CONCLUSION (no more than 20 words)

What is the main “take-away” lesson from this case?

THANKS WE ARRANGED AND REWROTE EVERYTHING AS RECOMMENDED

Core tip/ Audio core tip:

In order to attract readers to read your full-text article, we request that the author make an audio file describing your final core tip, it is necessary for final acceptance. Please refer to Instruction to authors on our website or attached Format for detailed information.

WE ADDED A CORE TIP AND AUDIO CORE TIIP. BOTH ARE UPLOADED.

Please correct it as [1,2]

THANKS. WE CHANGED ALL REFERENCES ACCORDINGLY.

Please rewrite this part according the reminders below. CASE PRESENTATION (should include chief complaints, history of present illness, history of past illness, physical examination, laboratory testing, imaging examination, and genetic testing, etc.)

THANKS WE REARRANGED OUR MANUSCRIPT ACCORDINGLY

Add Final diagnosis

THANKS. WE CHANGED IT ACCORDINGLY

Change follow up and outcomes to outcome and follow-up

WE CHANGED THE TITLE.

Please add experiences and lessons.

WE ADDED THIS SECTION.

Please check and confirm that there are no repeated references!

Please add PubMed citation numbers and DOI citation to the reference list and list all authors. Please revise throughout. The author should provide the first page of the paper without PMID and DOI.

PMID (<http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=PubMed>) DOI (<http://www.crossref.org/SimpleTextQuery/>) (Please begin with DOI: 10.**)

ALL REFERENCES WERE CHECKED. FOR LADD ET AL AND ARMSTRONG ET AL NO DOI NUMBERS WERE FOUND. PMID ARE LISTED.