

Specific Comments to Authors:

My main concerns are:

1. The authors are recommended to well describe the main pathology of suprasellar tumor. Is it a Squamous cell carcinoma? If so, SCC within a suprasellar tumor is a rare entity and its association with an osteochondroma is really scarce in the literature.

Thank you for this comment. Upon review of the medical record, the mass was a pineal germinoma which is a common suprasellar tumor treated with chemotherapy and radiation. This has been amended in the manuscript.

2. Intracranial SCC requires whole brain radiotherapy (WBRT) and not total body radiotherapy (TBI). Therefore, I strongly disagree with the conclusion that the lumbar osteochondroma is the result of radiotherapy for suprasellar SCC. Instead, I would call it a spontaneous osteochondroma associated to suprasellar SCC.

Thank you for your comment. The conclusion in the manuscript states that given the patient's history of a pineal germinoma that required chemotherapy and radiation, the associated spinal lesion was potentially radiation-induced. We agree with you that there is no proven causation and merely an association. The manuscript has been changed to reflect This by stating "Given our patient's history of a suprasellar pineal germinoma requiring chemotherapy and radiation, the spinal lesion was potentially radiation-induced."

3. The authors are recommended to provide sagittal CT images depicting the involvement of L5/S1 facet joint to justify the use of bone scalpel to resect the tumor.

Thank you for this comment. Sagittal CT imaging of the mass has been provided with a caption stating the following: Figure 3: Sagittal CT at the level of the L5/S1 facet joint depicts mass involvement of the right inferior articular process of L5. An ultrasonic bone scalpel was used to remove the mass en bloc from the articular process without disrupting the facet capsule.

(1) *Science editor*: 5 Issues raised:

(1) The title is too long, and it should be no more than 18 words;

Thank you for this comment. We have changed the title of the manuscript to "Atypical Osteochondroma of the Lumbar Spine Associated with Suprasellar Pineal Germinoma: A Case Report."

(2) The "Author Contributions" section is missing. Please provide the author contributions;

Thank you for this comment. Author contributions have been added to the Title Page.

Contributions are as follows:

Patrik Suwak, DO – psuwak@lsuhsc.edu (Contribution: case report design, image formatting, manuscript preparation)

Scott A. Barnett, MD – sbarn6@lsuhsc.edu (Contribution: image formatting, manuscript preparation)

Bryant M. Song, MS – bsong1@lsuhsc.edu (Contribution: image formatting, manuscript preparation)

Michael J. Heffernan, MD – mheff1@lsuhsc.edu (Contribution: case report design, manuscript preparation)

(3) The authors did not provide original pictures. Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor

Thank you for this comment. The original images have been provided as requested

(4) PMID and DOI numbers are missing in the reference list. Please provide the PubMed numbers and DOI citation numbers to the reference list and list all authors of the references. Please revise throughout; and

Thank you for this comment. The PMID and DOI references have been added to the references in the manuscript as requested.

(5) The "Case Presentation" section was not written according to the Guidelines for Manuscript Preparation. Please re-write the "Case Presentation" section, and add the "FINAL DIAGNOSIS", "TREATMENT", and "OUTCOME AND FOLLOW-UP" sections to the main text, according to the Guidelines and Requirements for Manuscript Revision. 6 Recommendation: Conditional acceptance.

Thank you for this comment. The Case Presentation has been adjusted to fit the required format.