The Editor
World Journal of Surgical Procedures

Dear Sir or Madam,

We would like to thank the reviewers for their time and effort to review our manuscript #75485. We have read the constructive criticisms and made the necessary changes.

We would like to submit a revision to be considered for publication. The changes are outlined in point form below:

• Reviewer 1 Commented: Thanks for your paper. It has a good language and scientific quality. The use of freehand device is not very common, but I find it useful in some settings. However, you described this as pilot study, but I didn't find which are the primary and secondary endpoints of this study. What do you want to demonstrate? Is there a control group vs. another? Please, elaborate.

Thank you for your comment. We understand that this manuscript does not fit the traditional definition of a pilot study. In fact, our aim was to document the feasibility of introducing the robotic arm in a low resource nation and to document the short-term outcomes using the Freehand Robot for Colorectal Surgery. Therefore, we have changed the title to "Freehand-Robot-Assisted Laparoscopic Colorectal Surgery: Initial Experience in the Trinidad & Tobago" which we think better describes the content of the paper.

• Reviewer 2 Commented: Overall, the paper is good. The authors illustrated their initial experience in a pilot study using the FreeHand® robotic camera holder (Freehand 2010 Ltd., Guildford, Surrey, UK) for laparoscopic colorectal surgery in Trinidad & Tobago. However, the sample size is really limited and only five patients were enrolled in the trial. Additionally, the lack of follow-up evaluation including oncological and functional outcome after colorectal surgery is another limitation. I hope the author could make a follow-up and recruit more patients in the revision file, otherwise it could not fulfill the criteria of publication in the form of pilot study.

We would like to thank the reviewer for their encouraging comments. We note the comment that the sample size is small and we totally agree with the reviewer. We have extended the study and now incorporated nine patients – which we agree is still small – but it is difficult to accrue large numbers because financial limitations in most Caribbean countries limit the use of this type of technology. This is the very reason that we have submitted this paper to show that in select cases, advanced technology can be incorporated into the health care systems in low-resource nations. Therefore, we hope that the reviewers understand this and find the expanded data set acceptable.

We have already noted above that the term pilot study may not be the best descriptor for this study. Therefore, the title has been changed to "Freehand-Robot-Assisted Laparoscopic Colorectal Surgery: Initial Experience in the Trinidad & Tobago"

We also note the reviewer's comment regarding the lack of oncologic and functional outcomes. We have, therefore, included the following oncologic data (node harvest, proximal margins, distal margins) and outcome data (overall survival, cancer related mortality, disease free survival). However, we have also included a statement to say that, due to the study design, there may be insufficient follow up time to make meaningful assessments of survival outcomes.

Editor Commented: Authors are requested to send their revised manuscript to a
professional English language editing company or a native English-speaking expert
to polish the manuscript further. When the authors submit the subsequent polished
manuscript to us, they must provide a new language certificate along with the
manuscript.

The authors are all native English language speakers and therefore a language editing company would not be necessary. We have included a cover letter to confirm this statement.

• The Editor Commented: Title: Abbreviations are not permitted. Please spell out any abbreviation in the title.

We confirm that there are no abbreviations in the title. Therefore, no changes have been made.

• The Editor Commented: Running title: Abbreviations are permitted. Also, please shorten the running title to no more than 6 words.

The running title has no abbreviations and it is exactly six words.

• The Editor Commented: Abstract: Abbreviations must be defined upon first appearance in the Abstract.

The running title has no abbreviations. Therefore, no changes have been made.

 The Editor Commented: Key Words: Abbreviations must be defined upon first appearance in the Key Words. There are no abbreviations present in the Key Words. Therefore, no changes have been made.

• The Editor Commented: Core Tip: Abbreviations must be defined upon first appearance in the Core Tip.

There are no abbreviations present in the Core Tip. Therefore, no changes have been made.

• The Editor Commented: Main Text: Abbreviations must be defined upon first appearance in the Main Text.

We confirm that all abbreviations are defined upon their first appearance in the main text

• The Editor Commented: Article Highlights: Abbreviations must be defined upon first appearance in the Article Highlights.

We confirm that all abbreviations are defined upon their first appearance in the Article Highlights

• The Editor Commented: Figures: Abbreviations are not allowed in the Figure title. For the Figure Legend text, abbreviations are allowed but must be defined upon first appearance in the text.

This manuscript contains no figures. No changes are required in response to this comment.

• The Editor Commented: Tables: Abbreviations are not allowed in the Table title. For the Table itself, please verify all abbreviations used in tables are defined (separated by semicolons) directly underneath the table.

We confirm that there are no tables in this manuscript. Therefore, no changes were made in response to this comment.

• Science editor Commented: The authors illustrated their initial experience in a pilot study using the FreeHand® robotic camera holder (Freehand 2010 Ltd., Guildford, Surrey, UK) for laparoscopic colorectal surgery in Trinidad & Tobago. However, some major issues have to be addressed:1 the sample size is really limited and only five patients were enrolled in the trial.

We would like to thank the reviewer for their encouraging comments. We note the comment that the sample size is small and we totally agree with the reviewer. We have extended the study and now incorporated nine patients – which we agree is still small – but it is difficult to accrue large numbers because financial limitations in most Caribbean countries limit the use of this type of technology. This is the very reason that we have submitted this paper to show that in select cases, advanced technology can be incorporated into the health care systems in low-resource nations. Therefore, we hope that the reviewers understand this and find the expanded data set acceptable.

- Science editor Commented: 2 the lack of follow-up evaluation including oncological and functional outcomes after colorectal surgery is another limitation.
  - We note the comment regarding the lack of oncologic and functional outcomes. We have, therefore, included the following oncologic data (node harvest, proximal margins, distal margins) and outcome data (overall survival, cancer related mortality, disease free survival). However, we have also included a statement to say that, due to the study design, there may be insufficient follow up time to make meaningful assessments of survival outcomes.
- Science editor Commented: 3 you described this as a pilot study, but I didn't find which are the primary and secondary endpoints of this study. What do you want to demonstrate? Is there a control group vs. another? Please, elaborate.
  - Thank you for your comment. We understand that this manuscript does not fit the traditional definition of a pilot study. In fact, our aim was to document the feasibility and short-term outcomes using the Freehand Robot for Colorectal Surgery in a Caribbean nation. Therefore, we have changed the title to "Freehand-Robot-Assisted Laparoscopic Colorectal Surgery: Initial Experience in the Trinidad & Tobago" which we think better describes the content of the paper.
- Science editor Commented: 4. please provide documents following the requirements in the journal's Guidelines for manuscript type and related ethics:(1) Clinical Trial Registration Statement; (2) Signed Ethics Form(s) or Document(s); (3) Conflict-of-Interest Disclosure Form; (4) Copyright License Agreement; (5) CONSORT 2010 Statement.
  - The CONSORT 2010 statement is specifically designed for reporting parallel group randomized trials. This was not a randomized trial and so CONSORT 2010 statements were not included.

The remaining documents have been uploaded.

Company editor-in-chief commented: I have reviewed the Peer-Review Report, full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Surgical Procedures, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. 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. In order to respect and protect the author's intellectual property rights and prevent others from misappropriating figures without the author's authorization or abusing figures without indicating the source, we will indicate the author's copyright for figures originally generated by the author, and if the author has used a figure published elsewhere or that is copyrighted, the author needs to be authorized by the previous publisher or the copyright holder and/or indicate the reference source and copyrights. Please check and confirm whether the figures are original (i.e. generated de novo by the author(s) for this paper). If the picture is 'original', the author needs to add the following copyright information to the bottom right-hand side of the picture in PowerPoint (PPT): Copyright ©The Author(s) 2022.

We confirm that all images are original figures that have been generated for this manuscript. The images are attached in power point and are editable. Also, we have included the statement "Copyright Cawich et al., 2022" in the bottom right corner as indicated.

• Science editor Commented: Authors are required to provide standard three-line tables, that is, only the top line, bottom line, and column line are displayed, while other table lines are hidden. The contents of each cell in the table should conform to the editing specifications, and the lines of each row or column of the table should be aligned. Do not use carriage returns or spaces to replace lines or vertical lines and do not segment cell content

We confirm that there are no tables in this manuscript. Therefore, no changes were made in response to this comment.

 Science editor Commented: Requirements for Article Highlights: If your manuscript is an Original Study (Basic Study or Clinical Study), Meta-Analysis, or Systemic Review, the "Article Highlights" section is required. Detailed writing requirements for the "Article Highlights" can be found in the Guidelines and Requirements for Manuscript Revision.

Thank you. Our manuscript is an observational study. According to the journal website, Article Highlights are not required. However, a Core Tip Section is required. We have prepared a core tip summary of less than 100 words to present

the important findings of the manuscript and this is uploaded separately along with our submission.

• Science editor Commented: It is unacceptable to have more than 3 references from the same journal. To resolve this issue and move forward in the peer-review/publication process, please revise your reference list accordingly.

We confirm that this has been corrected. A single reference from a journal that appears more than three times has been removed.

• Science editor Commented: Requirements for Figures: Please provide decomposable Figures (in which all components are movable and editable), organize them into a single PowerPoint file, and submit as "75485-Figures.pptx" on the system. The figures should be uploaded to the file destination of "Image File". Please check and confirm whether the figures are original (i.e. generated de novo by the author(s) for this paper). If the picture is 'original', the author needs to add the following copyright information to the bottom right-hand side of the picture in PowerPoint (PPT): Copyright ©The Author(s) 2022.

We confirm that all images are original figures that have been generated for this manuscript. The images are attached in power point and are editable. Also, we have included the statement "Copyright Cawich et al., 2022" in the bottom right corner as indicated. The file has been named 75485-Figures.pptx and submitted as instructed.

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We confirm that there are no tables in this manuscript. Therefore, no changes were made in response to this comment.

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We have uploaded each of the following documents separately using the F6 publishing system: (1) 75485-Answering Reviewers, (2) 75485-Audio Core Tip, (3) 75485-Conflict-of-Interest Disclosure Form, (4) 75485-Non-Native Speakers of English Editing Certificate, (5) 75485-Biostatistics Review Certificate, (6) 75485-Clinical Trial Registration Statement, (7) 75485-Institutional Review Board Approval Form or Document, (8) 75485-CONSORT 2010 Statement.

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We have downloaded and completed the ICMJE form for disclosure and conflicts.

We would like to again than the authors for their constructive criticisms and the journal for the opportunity to submit a revised version of our work.

Regards

Shamir Cawich