Reviewer #1:

Scientific Quality: Grade A (Excellent)

Language Quality: Grade A (Priority publishing)

**Conclusion:** Accept (High priority)

**Specific Comments to Authors:** The case presentation is well written and highlights the key points concisely, clearly and logically. The case presentation adds value to the data regarding primary pulmonary lymphoepithelioma-like carcinoma. Due to the rarity of the cases all data/cases from clinical practice must be reported to add knowledge. Row 134 - replace nirubumab with nivolumab.

Thank you for your suggestion. The mistake has been corrected in the revised manuscript.

Reviewer #2:

Scientific Quality: Grade D (Fair)

**Language Quality:** Grade C (A great deal of language polishing)

**Conclusion:** Major revision

Specific Comments to Authors: Based on these premises, the study assesses a current, timely topic. We recommend some changes: - We believe this article is suitable for publication in the journal although major revisions are needed. The authors should include a timeline summarizing the main events of this interesting case report. a linguistic revision is required. Despite immune checkpoint inhibitors (ICIs) seem to have finally found their role in a wide range of solid tumors, several questions remain unanswered. Among these, the lack of validated biomarkers of response represents an important issue since only a proportion of patients benefit from immunotherapy. Based on these premises, a greater understanding of the role of potential biomarkers including programmed death ligand 1 (PD-L1) expression, tumor mutational burden (TMB), microsatellite instability (MSI) status, gut microbiota and several others is fundamental. In addition, clinical trials on immunotherapy widely differed in terms of drugs, patients, designs, terms of study phases, and inconsistent clinical outcomes. The background of the changing scenario of medical treatment in cancer immunotherapy should be better discussed, and some recent papers regarding this topic and chemo-immunotherapy should be included (PMID: 33916206; PMID: 33714725; PMID: 32911806). Major changes are necessary.

Thank you for your helpful suggestions. (1) the time has been presented in the revised manuscript. (2) the language was further polished and improved in the revised manuscript. (3) the discussion was improved and the literature (PMID: 33916206; PMID: 33714725; PMID: 32911806) were properly cited in the revised manuscript.

## 4 LANGUAGE POLISHING REQUIREMENTS FOR REVISED MANUSCRIPTS SUBMITTED BY AUTHORS WHO ARE NON-NATIVE SPEAKERS OF ENGLISH

As the revision process results in changes to the content of the manuscript, language problems may exist in the revised manuscript. Thus, it is necessary to perform further language polishing that will ensure all grammatical, syntactical, formatting and other related errors be resolved, so that the revised manuscript will meet the publication requirement (Grade A).

Thank you for your suggestion. The language was further polished and improved in the revised manuscript and a language certificate was provided.

## (1) Science editor:

The manuscript has been peer-reviewed, and it's ready for the first decision. Language Quality: Grade B (Minor language polishing) Scientific Quality: Grade C (Good)

## (2) Company editor-in-chief:

I have reviewed the Peer-Review Report, the full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Clinical Cases, 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. Before its final acceptance, the author(s) must provide the Signed Consent for Treatment Form(s) or Document(s). For example, authors from China should upload the Chinese version of the document, authors from Italy should upload the Italian version of the document, authors from Germany should upload the Deutsch version of the document, and authors from the United States and the United Kingdom should upload the English version of the document, etc. Before final acceptance, uniform presentation should be used for figures showing the same or similar contents; for example, "Figure 1 Pathological changes of atrophic gastritis after treatment. A: ...; B: ...; C: ...; D: ...; E: ...; F: ...; G: ...". The title of the manuscript is too long and must be shortened to meet the requirement of the journal (Title: The title should be no more than 18 words). 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. 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. Before final acceptance, when revising the manuscript, the author must supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript. To this end, authors are advised to apply a new tool, the RCA. RCA is an artificial intelligence technology-based open multidisciplinary citation analysis database. In it, upon obtaining search results from the keywords entered by the author, "Impact Index Per Article" under "Ranked by" should be selected to find the latest highlight articles, which can then be used to further improve an article under preparation/peer-review/revision. Please visit our RCA database for more information at: https://www.referencecitationanalysis.com/.

Thank you for your suggestion. (1) The Signed Consent for Treatment was provided along with the revised manuscript. (2) the format of the figure legends was revised to be uniform in the revised manuscript. (3) the title has been shortened to a proper length. (4) the original figures and editable PowerPoint were provided along with the manuscript. (5) the table has been revised according to the required format.