

May. 20, 2022

Editors and reviewers,

World Journal of Clinical Cases

Re: Manuscript Ref. No.: 77172

Dear reviewers, dear reviewers,

Attached please find the revised version of our manuscript (77172) entitled “Using Ketamine in a Patient with a Near-occlusion Tracheal Tumor Undergoing Tracheal Resection and Reconstruction, a Case Report”. Thank you for offering us the opportunity to revise our manuscript for further consideration by the *World Journal of Clinical Cases*.

We have revised the manuscript in response to the editors’ and reviewers’ comments. Our detailed responses to each of the comments are attached. We would like to thank the editors and reviewers for their insightful comments, which have helped us improve the manuscript. We hope that this revised version addresses all comments adequately and that our manuscript is now considered acceptable for publication in the *World Journal of Clinical Cases*.

Sincerely,

Hui Gao, M.D.

Point-by-point response to comments:

Reviewer #1:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: The authors present a case report on the use of ketamine for analgesia during tracheostomy in a patient with tracheal tumor. The report is written in a clear and concise manner, with detailed information on the case reported and on the medications used for anesthesia. Since occurrence of tracheal tumors is rare, developments in the treatment of this condition are of scientific interest. More information could be provided by the authors regarding local anesthesia (such as the medications used). It would be interest to know if any consideration was given to the possibility of using the instillation of lidocaine directly on the airway as an adjuvant strategy.

Response: Thank you for your valuable comments. In this case, the surgeons used subcutaneous injection of 1% lidocaine 10 ml around the incision. We agree that the instillation of lidocaine directly on the airway can be an effective option. We have elucidated this in “Discussion”: “In this case, the surgeons used the subcutaneous injection of lidocaine before skin incision. The instillation of lidocaine directly on the trachea can also be considered after incision.”

Reviewer #2:

Scientific Quality: Grade A (Excellent)

Language Quality: Grade A (Priority publishing)

Conclusion: Accept (High priority)

Specific Comments to Authors: Congratulations on the interesting case presentation. I have no further comments.

Response: Thank you very much.

Science editor:

The authors report a case of "tracheal resection and reconstruction in a patient with a near-occlusive tracheal tumor treated with ketamine." Because upper tracheal tumors are rare, there are no established treatment options. The author of this paper uses the method of ketamine combined with local anesthesia, which has stronger advantages compared with the previous method and is of great clinical significance. It is hoped that the author will collect further cases of treatment using this type of anesthesia in practice, count their clinical and prognostic characteristics, and conduct more in-depth comparative studies.

Language Quality: Grade B (Minor language polishing)

Scientific Quality: Grade B (Very good)

Response: Your recommendations are highly appreciated. Actually we are collecting further cases, and we have elucidated future research direction in "conclusion": The efficacy and safety of ketamine can be evaluated by in-depth comparative studies in the future.

Company editor-in-chief:

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 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. 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.

Response: Thank you. Our figure is original, thus we have added the copyright information and uploaded the original PPT file.