Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No scientific significance
Language quality	[ ] Grade A: Priority publishing [Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [Y] Accept (General priority) [ ] Minor revision [ ] Major revision [ ] Rejection
Re-review	[Y] Yes [ ] No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous
	Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Robot-assisted surgery represents the progress of science and technology and represents the future direction of human development, but it is not helpful for the prognosis of tumors at present. Moreover, the cost is expensive, large-scale development is suspected of wasting resources, and conditional areas can be carried out according to their actual conditions. The robotic camera holder solves this problem well, which can save cost and carry out minimally invasive surgery. Compared with the traditional laparoscopic surgery, this surgery is the main operator through the head movement to control the lens, directly reflect the will of the main operator, the surgical quality can be guaranteed, there is a large space for use, can be used in the majority of third world countries, and with the increase in the number of surgical procedures, the surgical quality will not be lower than the Da Vinci robot surgery.