

Reviewer 1:

1. These words in keywords (synchronous, sequential) are quite wide-ranging and outside the scope of the manuscript. Instead of these words, more appreciate words should be chosen.

Response: Thank you for this comment. We have revised the keywords according to the reviewer's comment.

2. "The most widely used operation scheme is LC combined with preoperative ERCP and EST. This scheme often requires two hospitalizations, two operations, longer hospital stays, and correspondingly higher medical costs."

"This scheme requires two hospitalizations, two implementations of anesthesia and surgery, and increased hospitalization times and medical expenses."

In the introduction and discussion sections, "two operations" have been mentioned. During ERCP, general anesthesia may be preferable, but this process is not a complete operation. Authors have already described preoperative ERCP repeatedly in the manuscript. These sections should be replaced.

Response: We have revised these parts in the introduction and discussion.

3. For "Figure-2", the place of use is uncertain in the manuscript. The authors should clearly indicate that this figure expresses their treatment approach. The word "angiography" within Figure-2 should be changed to "cholangiography".

Response: We changed the order of Figures 1 and 2, and revised them according to reviewers' comments.

4. "These lengths included 7 d, 9 d, 10 d and 12 d, since 5 patients with acute pancreatitis had lengthened hospital stays." This sentence is talking about 5 patients but the last patient's day of hospitalization is not reported. Hospitalization time of all patients should be indicated clearly.

Response: Thank you for this comment. We have revised the text to read, "These lengths included 7 d, 9 d, 9 d, 10 d and 12 d, since 5 patients with acute pancreatitis had lengthened hospital stays." The hospital stays of 2 patients in 5 patients were both 9 d.

Reviewer 2:

General Comments

1.1 The English language should be reviewed;

Response: Our language has been reviewed by Medjaden Bioscience Limited.

1.2 The limitations of this study are shortly addressed by the Authors.

Response: We have addressed our limitations in greater detail.

2) Specific comments

2.1 The key-words are rather general, they should be chosen among the MeSH terms that best describe the topics addressed in the manuscript;

Response: Thank you for this comment. We have revised the keywords according to the reviewer's comment.

2.2("Introduction") Laparoscopic cholecystectomy has been the standard approach for the surgical treatment of gallstones disease for over ten years. If the Authors refer to China they should specify so;

Response: Thank you for this comment. We have revised "the standard approach for" to "the main treatment for".

2.3 ("Material and Methods) This is a retrospective study, it is unclear how a signed informed consent could be obtained from each patient. Has the informed consent been given by the patients for the study or for the operative procedures? This issue should be clarified;

Response: The signed informed consent was obtained from each patient for the operative procedures. We have clarified this issue in the manuscript.

2.4 ("Material and Methods) The Student's t test is inadequate for nonparametric data. For some variables (e.g., length of stay-LOS) median data should be expressed. The statistical analysis should be reviewed by a statistician;

Response: Thank you for this comment. Our statistical analysis has been reviewed by a professional statistician, and we have revised the statistical analysis section according to the reviewer's comments.

2.5 ("Material and Methods) Five patients developed postoperative pancreatitis in the sequential group. The LOS of such patients should be more clearly presented.

Apparently two of such patients had the same LOS as only four prolonged LOS are detailed ("7 d, 9 d, 10 d and 12 d");

Response: Thank you for this comment. We have revised this text to, "These lengths included 7 d, 9 d, 9 d, 10 d and 12 d, since 5 patients with acute pancreatitis had lengthened hospital stays." The hospital stays of 2 patients in 5 patients were both 9 d.

2.6 ("Discussion") If EST fails to treat CBDS after LC a second (not third) surgical procedure is needed. In other words, there are three operative procedures, but only two of them are surgical procedures.

Response: Thank you for catching this mistake. We have revised "third surgical procedure" to "additional surgical procedure".

2.7 ("Discussion") In the synchronous group, only 15/70 procedures were RVs. It is unclear how many of these 15 procedures were performed at the beginning of the series and how many were needed for difficult intubation of the papilla.

Response: All 15 procedures were needed due to difficult intubation of the papilla. We have mentioned this in the Discussion: "In our study, there were difficulties during the selective intubation for 15 patients in the synchronous operation group, so we turned to the RV operation".