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Revision of manuscript 25005

Reviewer 1 (id: 00289471)

First of all we would like to sincerely thank you for all the time you spent reviewing our manuscript. We really appreciate your effort, professionalism and dedication that you showed in helping us.

We carefully read your comments and made changes to the manuscript accordingly. We are confident to meet your agreement on the changes, and we are otherwise available for further discussion and adjustment.

1. You asked for earlier explanation of the acronyms BIMC and AUC
 - a. In this regard we clarified the acronyms at their first occurrence in the text as well as in the abstract
2. You asked for a brief explanation of Bayesian analysis in the introduction
 - a. In this regard we introduced the following paragraph in the introduction section: *"Bayesian analysis is a form of statistical inference in which the probability favoring a hypothesis increases or lowers as more information becomes available. It fits particularly well in actual clinical scenarios, where data is often partly available."*
3. You asked for a clarification on how analysis could be conducted in clinical practice
 - a. In this regard we have clarified that the BIMC model was either accessed on the web or by means of a desktop computer application, and provided URLs for both choices. In particular we added *"In this study the BIMC model was accessed either in the version of a computer application (<http://www.simoneperandini.com/npsbimc/download.htm>) or in its web counterpart (<http://www.simoneperandini.com/bimc/>)."* to the Materials and Method section.
4. You argued that raters were not aware of patient's clinical and anamnestic data
 - a. This was not clear in the text. Actually clinical and anamnestic data was available to the raters all the time. This has been better clarified by rewriting

the following paragraph as follows *“Clinical and anamnestic data was collected from the hospital electronic records and made preliminarily available to raters.”*

5. You also declared that mean correct diagnosis shift would be of interest
 - a. In this regard we added in the results section the following paragraph *“Mean correct diagnosis shift (benign nodules with a lesser score or malignant nodules with a higher score after CAD disclosure) was 26.42.”*
6. Finally you declared interest in knowing if the only rater which was not influenced by BIMC had better, worse or similar score
 - a. Rater 6 had a AUC of 0.836 before CAD disclosure while the BIMC model had 0.845. Data is available for comparison in Table 2.

If you feel that the manuscript needs additional corrections we will take full advantage of your precious collaboration. We believe the manuscript has improved with your help.
Thank you!

Reviewer 2 (id: 03474649)

First of all we would like to sincerely thank you for all the time you spent reviewing our manuscript. We really appreciate your effort, professionalism and dedication that you showed in helping us.

We carefully read your comments and made changes to the manuscript accordingly. We are confident to meet your agreement on the changes, and we are otherwise available for further discussion and adjustment.

1. You asked for a clear definition of CAD
 - a. In this regard we clarified the acronyms at their first occurrence in the text as well as in the abstract.
2. You asked for a clearer description of computer aided analysis in the method section
 - a. In this regard we added the following paragraph in the Material and Methods section *"The BIMC model is a recent SPN risk prediction model developed in 2015. It works by providing the user with a risk probability after the collection of all available data. Currently it supports the following features: Age, Smoking (Pack-years), History of Previous Malignancy, Size (mm), Location within the lungs, Edges, Volume Doubling Time (VDT), Minimum Focal Density, Contrast Enhancement and FDG-PET SUVmax value. Since it was developed as a Bayesian classifier it tolerates partial data collection. The model was designed to be an useful tool in integrating all available data in an objective, reproducible manner. In this study the BIMC model was accessed either in the version of a computer application (<http://www.simoneperandini.com/npsbimc/download.htm>) or in its web counterpart (<http://www.simoneperandini.com/bimc/>)."*
3. You asked for a prompt explanation of BIMC
 - a. In this regard we clarified the acronyms at their first occurrence in the text as well as in the abstract

If you feel that the manuscript needs additional corrections we will take full advantage of your precious collaboration. We believe the manuscript has improved with your help. Thank you!