

Comments and answers

Reviewer #1:

Specific Comments to Authors: The following are the questions.

- (1) how about the activity at the right supraclavicular lymph nodes initially by PET/CT, which proved to be false-positive by pathological diagnosis;

Answer: Thanks for your comments. The SUVmax of the right supraclavicular lymph nodes was 8.3. We had revised our manuscript.

- (2) We can see an elevated level of angiotension-converting enzyme (ACE) in this patient, during the follow-up period, is there any dynamic change after reexamination?

Answer: Thanks for your comments. The serum ACE activity was reexamined on Jun 6, 2019 and the level was normal. We had revised our manuscript.

- (3) There is a lack of staging of sarcoidosis on a chest radiograph, the indication for steroid regimens and the slow tapering to a maintenance dose.

Answer: Thanks for your comments. He was diagnosed as sarcoidosis (stage II). As the disease got progress within one month, the patient was administered oral methylprednisolone 8 mg twice daily. After one month, methylprednisolone was gradually tapered to a maintenance dose of 4mg daily. We had revised our manuscript.

- (4) In addition, it's better to add some references and updated.

Answer: Thanks for your comments. We had added and updated the references.

Editorial office's comments

Science editor:

- 1 Scientific quality: The manuscript describes a case report of the sarcoidosis mimicking metastases in an EML4-ALK positive NSCLC patient. The topic is within the scope of the WJCC. (1) Classification: Grade B and Grade B; (2) Summary of the Peer-Review Report: The authors describe a case of sarcoidosis mimicking metastases in an EML4-ALK positive NSCLC patient, and the co-occurrence of these two diseases is really rare and easily misdiagnosed. The results of this manuscript can help to improve our understanding of the disease, avoid misdiagnoses. However, some reference should be updated and added. The

questions raised by the reviewer should be answered; (3) Format: There is 1 figure. A total of 13 references are cited, including 1 reference published in the last 3 years. There are no self-citations.

Answer: Thanks for your comments. We had added and updated the references. Meanwhile, we had made point-by-point responses to the issues raised in the peer-review report.

2 Language evaluation: Classification: Grade B. A language editing certificate issued by AJE was provided. 3 Academic norms and rules: The authors provided the CARE Checklist–2016, and Written informed consent. The authors need to provide the signed Conflict-of-Interest Disclosure Form and Copyright License Agreement. No academic misconduct was found in the Bing search.

Answer: Thanks for your comments. We had added the signed Conflict-of-Interest Disclosure Form and Copyright License Agreement.

4 Supplementary comments: This is an unsolicited manuscript. The study was supported by 1 grant. The topic has not previously been published in the WJCC. 5 Issues raised: (1) The authors did not provide the approved grant application form(s). Please upload the approved grant application form(s) or funding agency copy of any approval document(s); and (2) The authors did not provide original pictures. 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. 6 Re-Review: Not required. 7 Recommendation: Conditional acceptance.

Answer: Thanks for your comments. We had uploaded the approved grant application form and provided the original pictures.