

Dear reviewers,

Thank you for giving us the opportunity to submit a revised draft of the manuscript. We appreciate the time and effort that you dedicated to providing feedback on our manuscript and are grateful for the insightful comments on and valuable improvements to our paper. We have incorporated the suggestions made by the reviewers. Those changes are highlighted within the manuscript. Below we provide the point-by-point responses. All modifications in the manuscript have been highlighted in red.

Sincerely,

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Response to Reviewer 1

In the manuscript entitled Traumatic Giant cell Tumor of Rib: A case report, Chen et al, reported a very rare pathology with atypical location.

Furthermore, the possible causality of this tumor with a traumatic history es even more interesting.

Response: Thank you very much.

I would, however, recommend a more convincing introduction, focused on the aim of this case report publication.

Response: Agree. We have, accordingly, revised manuscript this change can be found – page number 4, line 5-6.

We aim to raise awareness among clinicians about this pathology and possible risk factor of GCT.

In my opinion, the authors should provide further, following minor changes in the manuscript editing, in order to improve the scientific-medical value of the information provided:

,The patient is now doing well without recurrence for 12 months after the operation,,- I will rather reconsider: 12 Months after surgery, no signs of recurrence were observed.

Response: Thank you. We have made revisions accordingly.

GCT is benign with aggressive behavior.,, Confusing. Rather: Although benign, this tumor could progress locally/ recidive risk etc/, which confer a long-term incomplete resolution.

Response: Thank you very much for the reminder. We have made revisions as follows:

GCT is generally a benign tumor; however, it can progress locally, underscoring the need for a long-term resolution.

Introduction: the aim of the study is not clear enough specified: „we report the first case of trauma-induced rib GCT with rapid progression in a young female patient.,,, in order to??? Raise the awareness of the clinician about this pathology?? In my opinion, the aim of this case report is not very motivating

Response: Thank you very much for the reminder. We revised the sentence as follows:

We aim to raise awareness among clinicians about this pathology and possible risk factor of GCT.

Analgesic drugs were prescribed but in vain.,, Please rephrase! Maybe: Despite appropriate analgesia, no sufficient pain relieve was observed.

Response: Revised accordingly.

The symptoms of pain progressed.,, I think is not necessary. The reader understands the intensity of the pain from the above-mentioned sentence

Response: Revised accordingly.

Nonmovable.,, Please consider another word like adherent to profound planes or similar... ,,

Response: Thank you very much for the reminder. We have made revisions accordingly.

Chest radiography was performed again.,, Please reconsider. „CT-guided biopsy was performed.

Response: Revised accordingly.

Histopathology revealed GCT.,, Please reconsider: i.e. CT-guided biopsy revealed GCT. **Response:** Revised accordingly.

A whole-body bone scan revealed increased uptake in the fifth to seventh ribs.,, Could you provide any picture?

Response: Thank you very much for the reminder. We have added image of whole body bone scan, Fig 3.

Arrows providing the precise localization of the lesions in Fig 1B and 2A could be appropriate.

Response: Thank you very much for the reminder. We have made revisions accordingly.

Preoperative tissue proof from needle biopsy may be helpful but unnecessary.,, Please provide supplementary data from the literature.

Response: Thank you very much for pointing this out. We revised the sentence as follows:

Preoperative tissue evidence from needle biopsy may be helpful but is optional, as surgical resection is indicated regardless of whether the tumor is malignant. Intra-operative pathological consultation may be sufficient to guide the surgical management of each case.

Differential diagnosis: please provide one sentence about differential diagnosis in the case presentation section.

Response: Thanks for your kind reminders. This change can be found – page number 6, line 23-24.

Differential diagnoses include metastasis to bone, chondroblastoma, clear cell chondrosarcoma, aneurysmal bone cysts, and lymphoma.

Response to Reviewer 2

It is well written case which following the trauma had been diagnosed. Very useful and alerting to all trauma surgeon. Good to know

Response: Thank you very much.

Response to Science editor

This case reported a very rare pathology with atypical location. Giant cell tumors of rib origin is rare. It is a very interesting case and is good for trauma surgeon and trainees to know about it and keep suchlike problems in their minds.

Response: Thank you very much.

The writing language needs to be further refined for easy reading and understanding.

Response: Thank you very much for pointing this out. We had sent our

[manuscript to Filipodia Publishing for language editing.](#)

Uniform presentation should be used for figures showing the same or similar contents. The pathological pictures in the manuscript need to be marked with a scale bar.

Response: [Thank you very much. We have made revisions accordingly.](#)

Response to Company editor-in-chief

I have reviewed the Peer-Review Report, the 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.

Response: [Thank you very much.](#)

Before final acceptance, uniform presentation should be used for figures showing the same or similar contents; for example, "Figure 1 Pathological changes of atrophic gastritis after treatment. A: ...; B: ...; C: ...; D: ...; E: ...; F: ...; G: ...". 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 very much for the reminder. We have made revisions accordingly.](#)