

	Reviewer comments	Reply
Reviewer code 05280548		
1.	There are numerous phrases without references, please cite an adequate reference for each phrase, like (Maxillary lateral incisors are generally one rooted tooth with single canal but anomalies like radicular palatal grooves, fusion with supernumerary teeth, gemination, DI have been reported in different studies that can complicate their endodontic management.) How did you know??	Relevant references added, highlighted in introduction
2.	DI?? Dens invaginatus?? Don't use the abbreviation unless you defined the term	Term defined and added, highlighted in intro
3.	There is no aim of this case report. Please define the aim at the bottom of the introduction.	Aim added at the bottom of introduction, highlighted
Case report 1	You have used the universal numbering system, number #7 to refer the upper right lateral incisor, please define the system in the case presentation	Term defined
2	Have you obtained an authorization of the ethics committee in research ?? where is the number?	No novel procedure was done in present case, treatment of the patient was done after informed consent. Institutional Ethics research committee only grants authorization number for original research studies in our institute. For case reports no ethical approval is required.
3.	Have you obtained an informed consent form of the patient??	Yes, and the same has been uploaded along with manuscript. Written Informed consent was obtained from patient's guardian as she was minor at that time.
4	Radiographically, seems like there is an absorption of the apex of the tooth, I think it is related with the quality of the obturation. Even, after 6 years, which a long period to preserve this tooth, I think there is a necessity for apicoectomy to guarantee a proper apical sealing. The discussion is adequate.	We have acknowledged the finding in the case report (highlighted in follow up section). Since patient is clinically asymptomatic and radiographically lesion is healing no intervention is done at this time. If during

		follow ups symptoms arise, surgical intervention will be done.
Reviewer code 06276260		
a)	Please mention the take home messages from this case-report.	Take away message/aim highlighted at the end of introduction section
b)	Mention the limitations of this case report	Limitations added at the end of case report (before conclusion).
c)	Discuss the prognosis of similar type of cases	Prognosis discussed in 2 nd last para of discussion. Highlighted in text.
d)	<p>References are too old. Please consider adding the following references.</p> <p>1) Ghosh S, Dhungel S, Subedi B, Pradhan S. Cooccurrence of Talon's Cusp with Dens Invaginatus in the Maxillary Lateral Incisor: A Case Report with Review of Literature. Case Reports in Dentistry. 2022 Feb 22;2022.</p> <p>2) Mallineni SK, Panampally GK, Chen Y, Tian T. Mandibular talon cusps: A Systematic review and data analysis. Journal of Clinical and Experimental Dentistry. 2014 Oct;6(4):e408.</p> <p>3) Babaji P. Bilateral supplemental maxillary incisors with both dens invaginatus and dens evaginatus in a non syndromic patient: a rare case report. Journal of Clinical and Diagnostic Research: JCDR. 2015 Jan;9(1):ZJ01.</p> <p>4) Gul M, Adnan S, Umer F. A Variant of the Current Dens Invaginatus Classification. Frontiers in Dentistry. 2020;17:28</p>	New references and suggested references (except 2) have been added in the reference section and highlighted.