We would like to thank the reviewers for thoroughly reviewing our manuscript and making many thoughtful comments. We were very pleased to see that all four reviewers recognized the potential significance of our work. We have added significant new data, described in detail below, and revised the manuscript to address reviewers' comments. Here are our point-by-point responses: stressed with red text in our reuploaded main manuscript.

Reviewer 1(ID:02954140)

We highly appreciated our reviewer for providing such an important information on the differential diagnosis of total spinal anesthesia in our case. We all agreed that this could be one of the reasons causing accidental injection of lidocaine. We further discussed this circumstance in our Discussion part in line 181-183.

Reviewer 2(ID:03253519)

Many thanks again for recognizing the potential significance of our work.

Reviewer 3(ID:03028174)

1.We understand that this is only a case report, which might be with some personal bias, however, what we wanted to stress is that although this complication rarely happens, great vigilance should always be highlighted.

2.We have added several possible reasons which might influence the management in the Treatment part line 119-142. We also have added possible managements in under the circumstance of no responsive rehabilitation. Line 177-181.

3. We have added several possible reasons which might influence the management in the Treatment part line 119-142. We also have added possible managements in under the circumstance of no responsive rehabilitation. Line 177-181.

4.We have added differential diagnosis in Treatment part instead of Discussion part line119-142. Relevant literature has been added and discussed. Line161-169.

5.We recommended that surgeons should be highly vigilant during the whole

procedure. An ECG monitoring, oxygen inhalation, intravenous cannula set prior to

surgery, regular checking of motor activity and meticulous imaging monitoring with slower pushing of anesthetics, etc should be highly recommended. Line191-194.

Reviewer 4(ID:05402115)

1. We elucidated the detailed management of total spinal anesthesia in line 107-117.

2.After 15minutes resuscitation, patient's vital signs gradually recovered, we added in line 116-117.

3. Vital sign has been added in line 144-145.

4. Patient was sent back to the ward for monitoring in line 146-147.

5.We understand your concern, since total spinal anesthesia is a life-threatening complication, it is very unlikely the effect of local anesthetic will wean off so quickly. However, in our patient, her vital sigh recovered and was very stable, and our patient asked us to finish the surgery, for relieving her intractable back pain, besides we meticulously talked with her relatives, they also agreed to continue the surgery.

6.We elaborated the management of total spinal anesthesia in line 107-117. We also have added possible managements in under the circumstance of no responsive rehabilitation. Line 177-181.

We thank our reviewers again for correcting our grammatic problems, we have gotten our paper reviewed with our native speaker colleague. And we have re-compile our paper. Thanks again for your valuable comments.

Yours sincerely All authors