

Reviewer 1

[Comment 1]: Misdiagnosis of food-borne foreign bodies outside of the digestive tract on magnetic resonance imaging: two cases (Title) - "report of two cases" is better.

[Reply]: Thank you very much for reviewing the manuscript and for your comment.

We have changed two cases (Title) - "report of two cases".

[Comment 2]: This imaging examination showed a hypermetabolic mass in the left inner lobe of the liver (Case 1) - description of a liver segment seems to be better.

[Reply]: Thank you very much for pointing out this problem and we have changed "the left inner lobe of the liver" to "the IV segment of his liver".

[Comment 3]: Routine blood examination showed a white blood cell count of 4.75×10^9 g/L, neutrophil ratio of 0.620, and lymphocyte ratio of 0.261 (Case 2) - this sentence is unnecessary.

[Reply]: Thank you very much for your advice. We finally chose to delete the content.

[Comment 4]: it is rare for foreign bodies to completely penetrats ethe gastrointestinal tract (Page 5) - a grammar mistake.

[Reply]: Thank you very much for pointing out the issue, we have changed it to "it is rarely to see foreign bodies penetrats ethe gastrointestinal tract completely".

[Comment 5]: Obtaning the history of the patient' s living and eating habits (Page 6) - obtaining is right.

[Reply]: Thank you very much for your suggestion, we have changed the correct spelling.

[Comment 6]: There are a number of space and capitalization errors in the text. To be corrected.

[Reply]: Thank you very much for pointing out the issue, We have carefully corrected space and capitalization errors.

[Comment 7]: References: the References must be formatted in strict accordance with the Instructions for Authors!!! The design of Reference section in this article is absolutely contrary to these Instructions. This section needs to be completely revised.

[Reply]: Thank you very much for pointing out the issue. We have revised the reference according to the author's instructions.

Reviewer 2

[Comment 1]: What was the indication for MRI in both cases and why CT scan was not chosen?

[Reply]: Thank you very much for pointing out the issue. Case 1: Since the patient was not treated in our hospital at first, we asked the patient's family members why he did not have an CT examination at the beginning. The patient's son replied that the MRI examination was performed first considering the radiation of CT, and since the results of MRI report were considered malignant tumor, the PET-CT examination was carried out soon, and the two examination gave the same results for malignancy, and the surgery was performed directly without CT examination. Case 2: The diagnosis of anal fistula is considered when the patient is admitted at the beginning of the period. MRI is the best choice to diagnose anal fistula, so the patient did not undergo CT

examination before surgery. We believe that the main reason why CT examination was not performed in these two cases is that the patients did not provide a history of foreign bodies and did not have typical clinical manifestations of gastrointestinal perforation. We think that CT examination of the pain area is necessary for pain patients.

[Comment 2]: Legends for Fig 2 must describe what is A and B images and what arrows show in both.

[Reply]: Thank you very much for your suggestion, we have describe what is A and B images and what arrows show in both for Fig 2.

[Comment 3]: No need for Table 1 because the information present in the text

[Reply]: Thank you very much for pointing out this problem. Our intention was to show the basic situation of the two cases more clearly, but we think you're right, We finally chose to remove table1.