Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: The authors reported a treatment method to preserving finger length in a patient with symmetric digital gangrene under local anesthesia, the result is of clinical significance.

Issue 1: Scientific Quality - Grade C (Good) Response: We appreciate Reviewer #1 for evaluating the scientific quality of our manuscript as "Good." We have carefully reviewed the manuscript and made the necessary revisions to address any potential scientific issues.

Issue 2: Language Quality - Grade B (Minor language polishing) Response: We thank Reviewer #1 for recognizing the language quality as "Minor language polishing" level. We have conducted a thorough proofreading and revised the manuscript to improve language clarity and coherence.

Reviewer #2:

Scientific Quality: Grade A (Excellent)

Language Quality: Grade A (Priority publishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: This study entitled "Preserving finger length in a patient with symmetric digital gangrene under local anesthesia: A case report" seems to have been generally well executed and written. Furthermore, I believe that this paper will be of great interest to the readers. Finally, I have only one question. Did you perform any type of CT angiography to assess the vascularization of the limb? If yes, please state that in text.

Issue 1: Scientific Quality - Grade A (Excellent) Response: We sincerely thank Reviewer #2 for evaluating the scientific quality of our manuscript as "Excellent." We have put significant effort into conducting a robust study and providing accurate information, and we are pleased to have received a positive feedback.

Issue 2: Language Quality - Grade A (Priority publishing) Response: We are grateful to Reviewer #2 for acknowledging the language quality as "Priority publishing" level. Our aim was to present our findings in a clear and concise manner, and we are delighted that the revisions met the language standards required for publication.

Issue 3: The question regarding CT angiographic assessment that Reviewer #2 has asked, specifically, whether we performed CT angiography to assess the vascularization of the limb and requesting us to mention it in the text.

Response: We appreciate Reviewer #2 for the insightful question. We did not perform CT angiography considering the risk of renal injury in the patient. Instead, we used Doppler ultrasound to confirm the absence of any issues with the major blood vessels. This decision was made to prioritize the patient's safety. This information has been added to the "Case reports-imaging examination, Discussion" section in the revised manuscript (highlighted in red).

We would like to express our gratitude to the reviewers for their valuable feedback and positive assessments of our work. We have carefully addressed all the issues raised in the peer review report, and we believe the revised manuscript is now more comprehensive and ready for publication.

Please find the revised manuscript with the necessary changes highlighted in yellow for your convenience. If there are any further suggestions or modifications, please let us know, and we will promptly address them.