

Dear Editor and Reviewers,

We are pleased to submit our revised manuscript (NO: 88266), titled " Left Lower Lobe Sleeve Resection for the Clear Cell Variant of Pulmonary Mucoepidermoid Carcinoma with CRTC3-MAML2 Gene Fusion: A Case Report". We have thoroughly revised the paper based on the valuable feedback provided by the reviewers. We have carefully addressed each comment to enhance the quality and accuracy of the manuscript. We are grateful for the time and effort you have invested in reviewing our work and believe that the revised version meets the high standards for publication in the World Journal of Clinical Cases.

Thank you for your time and consideration.

Sincerely,

Xiao-Hui Yu, Wen-Xiang Wang, De-Song Yang, Liang-Hui Gong

Point-by-point response to the reviewers' comments:

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors:

Dear author, I appreciate your effort in submitting this case - report, this is really a unique case. However, please submit the post - radiological reports as well for comparison. Meanwhile, the manuscript requires language editing. Regards.

1. I appreciate your effort in submitting this case - report, this is really a unique case.

Reply: Thank you for your positive review of our article on the Clear Cell Variant of Pulmonary Mucoepidermoid Carcinoma with CRTC3-MAML2 Gene Fusion. We deeply appreciate your acknowledgment of our efforts and are thrilled to learn that you consider our case to be unique. Your encouraging words serve as motivation, and we hope that our contribution aids healthcare professionals in enhancing their clinical knowledge and patient care. Your valuable feedback inspires us to continue our commitment to advancing medical literature.

2. However, please submit the post - radiological reports as well for comparison

Reply: We appreciate your suggestion, and to address this, we have included Figure 5 in the report. We believe this addition provides a comprehensive view for comparison and strengthens the robustness of our case study. At the one-and-a-half-year follow-up assessment, there were no signs of recurrence (Figure 5). Figure 5 High-resolution chest contrast-enhanced computed tomography. (a) Coronal plane; (b) transverse plane. A re-examination via computed tomography one and a half years after the operation revealed that the lungs were in good condition, with no evidence of recurrence.

3. Meanwhile, the manuscript requires language editing.

Reply: We acknowledge the need for language editing in the manuscript. To ensure the highest standard of language clarity and coherence, we have entrusted the report to a professional editing company (AJE) for thorough language editing.