Author response letter

1. Response to reviewer #1:

(1) Line 16, affiliation for Xiao-jie Fei includes "D epartment" with additional space, please correct.

Response: I have delete the additional space as you suggested.

(2) Please consider mentioning of full name of "ERBB" abbreviation, the first appearance in main text is in line 32, I think.

Response: Dear reviewer, thank you for your suggestion. I have added the full name of "ERBB" (epidermal growth factor receptor) in line 32 as you suggested.

(3) Although it can be concluded from the sentence itself, please consider explaining "q3w" (I believe it is "once every 3 weeks"), since non-clinicians could find it not self-explanatory and may need to use additional sources to find explanation. The first appearance is probably in line 37.

Response: I have revised all "q3w" in the paper to "once every 3 weeks".

(4) Line 41, the last sentence of Conclusion. There is "further" written twice, please consider minor rephrasing of it.

Response: I have deleted the second "further" in the last sentence of Conclusion in line 41.

(5) Abbreviations such as "mUC", "ICIs" or "TMB" are mentioned twice, both in Abstract and Introduction. As far as I am concerned, it can/should be mentioned only on the first use.

Response: Dear reviewer, thank you for your suggestion. I referred to the basic rules on abbreviations and found that "(6) Main Text: Abbreviations must be defined upon first appearance in the Main Text.", so I haven't deleted abbreviations of "mUC", "ICIs" or "TMB" in Introduction.

(6) The last sentence of paragraph from lines 51-55. You mentioned at the beginning of sentence the "relatively modest" response rate, and then at the end that it is "relatively low". I believe the latter one can be removed i.e. the whole part after the last comma ("which are relatively low").

Response: I have revised "relatively modest" to "relatively low" in line 54 and deleted "which are relatively low" in line 55.

(7) In line 59, you mentioned about high levels of microsatellite instability but the text near the "MSI-H" concerns only instability in general. Please add "high levels of" or equivalent before brackets with "MSI-H" since we could have MSI-L which is also microsatellite instability in general. Moreover, add space between "a" and "mismatch" just after "(MSI-H)".

Response: I have added "high levels of "before brackets with "MSI-H" and added space

between "a" and "mismatch" after "(MSI-H)" as you suggested.

(8) Line 92, I presume that 2313-2323dup concerns in-frame ERBB2 insertion? If yes, then please specify that this change concerns ERRB2. I saw that it is written at the end of Discussion and Conclusion, but such addition will definitely clarify what was diagnosed in this patient before the last sentences of main-text.

Response: Dear reviewer, thank you for your suggestion. 2313-2323dup concerns in-frame ERBB2 insertion, and I have added "in-frame insertion of ERBB2" in line 91. I also added "in-frame insertion of ERBB2 and ERBB3 amplification" in Abstract, line 34 to 35.

(9) Line 95, I think that "1" in "M" (metastasis) should have bottom index, similar to zeros for "T" and "N" in the same line, or mentioning in the line 77.

Response: I have revised as you suggested.

(10) Line 109, there should be "Discussion" and not "DiSScussion" (only the second "s" is double "s")

Response: I have deleted an "S" as you suggested.

- (11) Line 145 and 204, there should probably be "follow-up" instead of "fellow-up". Response: I have revised as you suggested.
- (12) Line 147, the last sentence of Conclusion. I believe "are required to confirmed" should be "are required to confirm".

Response: I have revised as you suggested.

(12) Just want to make sure; in Figure 1, are the subfigures run vertically? I mean does subfigure "A" is both top and bottom left corner?

Response: Dear reviewer, the subfigures in Figure1 are run vertically and I have renamed them as "A", "B", "C", "D", "E", "F", "G" and "H".

(13) In Table 1, please consider merging cells in the rows where PD-L1 or PD-1 are mentioned as they can be mistakenly considered as drug types without FDA approvals or ongoing trials, instead of categories of actual drugs. Alternatively, you can split tables to Table 1a and 1b, or Table 1 and Table 2.

Response: I have split Table 1 into Table 1a and Table1b as your suggestion.

2. Response to science editor:

(1) In Figure 1, the sub-picture identification needs to be clearer.

Response: Dear editor, the subfigures in Figure1 are run vertically and I have renamed them as "A", "B", "C", "D", "E", "F", "G" and "H".

(2) In Table 1, consider combining cells in rows that mention PD-L1 or PD-1 because they may

be mistaken for drug types that have not been approved by the FDA or are undergoing trials, rather than the actual drug category. Or split the table into Table 1 and Table 2.

Response: I have split Table 1 into Table 1 and Table 2 as your suggestion.

3. Response to company editor-in-chief:

(1) Before its final acceptance, the author(s) must provide the Signed Informed Consent Form(s) or Document(s) of treatment in Chinese.

Response: I have uploaded a Signed Informed Consent Form of treatment in Chinese.

(2) Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor.

Response: I have uploaded the original figure documents using PowerPoint.

(3) Authors are required to provide standard three-line tables, that is, only the top line, bottom line, and column line are displayed, while other table lines are hidden. The contents of each cell in the table should conform to the editing specifications, and the lines of each row or column of the table should be aligned. Do not use carriage returns or spaces to replace lines or vertical lines and do not segment cell content.

Response: I have edited all tables to standard three-line tables.

(4) Please upload the approved grant application form(s) or funding agency copy of any approval document(s).

Response: I have uploaded funding agency copy.