

## Response to reviewers document.

### Reviewer #1:

**Specific Comments to Authors:** The presentation of stroke after TBLB, physicians should be particularly aware of TBLB-associated Cerebral air embolism. The diagnostic key for TBLB-associated Cerebral air embolism lies in the Brain CT scan showing air emboli. Familiarity with the characteristic imaging findings of this rare phenomenon is necessary in order to avoid misdiagnosis and improve outcome. This is an interesting case report.

**Authors' response:** We thank the reviewer for positive feedback and evaluation.

### Science editor:

#### **Specific Comments to Authors:**

**1 Scientific quality:** The manuscript describes a case report of the cerebral air embolism complicating transbronchial lung biopsy. The topic is within the scope of the WJCC. (1) Classification: Grade B; (2) Summary of the Peer-Review Report: The presentation of stroke after TBLB, physicians should be particularly aware of TBLB-associated Cerebral air embolism. The diagnostic key for TBLB-associated Cerebral air embolism lies in the Brain CT scan showing air emboli. Familiarity with the characteristic imaging findings of this rare phenomenon is necessary in order to avoid misdiagnosis and improve outcome. This is an interesting case report; (3) Format: There are 2 figures; (4) References: A total of 20 references are cited, including 1 references published in the last 3 years; (5) Self-cited references: There are 1 self-cited references. The self-referencing rates should be less than 10%. Please keep the reasonable self-citations (i.e. those that are most closely related to the topic of the manuscript) and remove all other improper self-citations. If the authors fail to address the critical issue of self-citation, the editing process of this manuscript will be terminated; and (6) References recommendations: The authors have the right to refuse to cite improper references recommended by the peer reviewer(s), especially references published by the peer reviewer(s) him/herself (themselves). If the authors find the peer reviewer(s) request for the authors to cite improper references published by him/herself (themselves), please send the peer reviewer's ID number to [editorialoffice@wjgnet.com](mailto:editorialoffice@wjgnet.com). The Editorial Office will close and remove the peer reviewer from the F6Publishing system immediately

**2 Language evaluation:** Classification: Grade B.

**Authors' response:** We thank the editor for the positive comments. Regarding citations, we cited 20 articles, of these only 1 (= 5% of all citations) comes from our author team. That citation has however special relevance to the presented topic, therefore we kept it in the text and in the reference list.

**3 Academic norms and rules:** The authors provided the CARE Checklist – 2016. The authors should provide the signed Conflict-of-Interest Disclosure Form and Copyright License Agreement, and signed informed consent (surgery or other). No academic misconduct was found in the Bing search.

**Authors' response:** We thank the editor for this comment. We provided all the required documents according to the editor's suggestion. In the informed consent, the patient's name and ID are blinded in order to keep patient's anonymity in secret.

**4 Supplementary comments:** This is an unsolicited manuscript. The study was supported by the Czech Pneumological and Phthisiological Society. The topic has not previously been published in the WJCC.

**Authors' response:** We thank the editor for this comment. We uploaded an approval document that confirms the financial support of the Czech Pneumological and Phthisiological

Society.

**5 Issues raised:** (1) The authors did not provide the approved grant application form(s). Please upload the approved grant application form(s) or funding agency copy of any approval document(s); and (2) The authors did not provide original pictures. 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.

**Authors' response:** We thank the editor for this comment. We uploaded an approval document that confirms the financial support of the Czech Pneumological and Phthisiological Society.

**6 Recommendation:** Conditionally accepted.

**Authors' response:** We thank the editor for this decision and we look forward to complete the publication process.

**Company editor-in-chief:**

**Specific Comments to Authors:**

I have reviewed the Peer-Review Report, the full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Clinical Cases, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. Before its final acceptance, the author(s) must provide the Signed Informed Consent Form(s) or Document(s) of treatment. For example, authors from China should upload the Chinese version of the document, authors from Italy should upload the Italian version of the document, authors from Germany should upload the Deutsch version of the document, and authors from the United States and the United Kingdom should upload the English version of the document, etc.

**Authors' response:** We thank the editor-in-chief for this comment. We provided the required document according to the editor's suggestion. In the informed consent, the patient's name and ID are blinded in order to keep patient's anonymity in secret.

Thank you once again for your precise work and for acceptance of our work for publication in *World Journal of Clinical Cases* journal! We look forward to complete the publication process.

With my best regards,



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