

Dear Dr. Zhou,

We are pleased to inform you that, after preview by the Editorial Office and peer review, as well as CrossCheck and Google plagiarism detection, we believe that the academic quality, language quality, and ethics of your manuscript (Manuscript NO.: 69178, Case Report) basically meet the publishing requirements of the World Journal of Clinical Cases. As such, we have made the preliminary decision that it is acceptable for publication after your appropriate revision. Upon our receipt of your revised manuscript, we will send it for re-review. We will then make a final decision on whether to accept the manuscript or not, based on the reviewers' comments, the quality of the revised manuscript, and the relevant documents. Please follow the steps outlined below to revise your manuscript to meet the requirements for final acceptance and publication.

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3 SCIENTIFIC QUALITY

Please resolve all issues in the manuscript based on the peer review report and make a point-by-point response to each of the issues raised in the peer review report. Note, authors must resolve all issues in the manuscript that are raised in the peer-review report(s) and make point-by-point responses to each of the issues raised in the peer-review report(s), which are listed below:

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade A (Priority publishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: Focal nodular hyperplasia (FNH) it is usually asymptomatic and sometimes difficult to differentiate from hepatocellular carcinoma. At present, the diagnosis of FNH includes medical history, whether hepatitis B carrier, serum AFP, CT, MRI, PET-CT, contrast-enhanced ultrasound, etc. For those with unclear diagnosis, we still recommend ultrasound-guided needle biopsy. If the preoperative diagnosis is unclear, aggressive and invasive treatment is not recommended. On the whole, this case is not a rare case, but it is a good guide to the daily medical practice.

Thanks a lot for the review. We think FNH is not rare, but large FNH is rare. This case is a painful lesson that preemptive diagnosis of large space-occupying lesion was HCC, so accurate diagnosis is prerequisite.

4 LANGUAGE QUALITY

Please resolve all language issues in the manuscript based on the peer review report. Please be sure to have a native-English speaker edit the manuscript for grammar, sentence structure, word usage, spelling, capitalization, punctuation, format, and general readability, so that the manuscript's language will meet our direct publishing needs.

We polished the manuscript extensively

5 ABBREVIATIONS

In general, do not use non-standard abbreviations, unless they appear at least two times in the text preceding the first usage/definition. Certain commonly used abbreviations, such as DNA, RNA, HIV, LD50, PCR, HBV, ECG, WBC, RBC, CT, ESR, CSF, IgG, ELISA, PBS, ATP, EDTA, and mAb, do not need to be defined and can be used directly. Now we list the abbreviations rules as follows.

(1) **Title:** Please spell out any abbreviation in the title. Abbreviations are not permitted.

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(2) **Running title:** Please shorten the running title to no more than 6 words. Abbreviations are permitted.

It met the requirement

(3) **Abstract:** Abbreviations must be defined upon first appearance in the Abstract. Examples: Example 1: Hepatocellular carcinoma (HCC). Example 2: *Helicobacter pylori* (*H. pylori*).

Thank you so much for this. I changed and corrected them

(4) **Key words:** Abbreviations must be defined upon first appearance in the Key words.

I corrected

Core tip: Abbreviations must be defined upon first appearance in the Core tip. Examples: Example 1: Hepatocellular carcinoma (HCC). Example 2: *Helicobacter pylori* (*H. pylori*).

I corrected

(5) Example 2: *Helicobacter pylori* (*H. pylori*)

I corrected

(6) **Main Text:** Abbreviations must be defined upon first appearance in the Main Text. Examples: Example 1: Hepatocellular carcinoma (HCC). Example 2: *Helicobacter pylori* (*H. pylori*)

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(7) **Article Highlights:** Abbreviations must be defined upon first appearance in the Article Highlights. Examples: Example 1: Hepatocellular carcinoma (HCC). Example 2: *Helicobacter pylori* (*H. pylori*)

Example 2: *Helicobacter pylori* (*H. pylori*)

I corrected

(8) **Figures:** Please verify the abbreviations used in figures and define them (separated by semicolons) at the end of the figure legend or table; for example, BMI: Body mass index; CT: Computed tomography.

I corrected

(9) **Tables:** Please verify the abbreviations used in tables and define them (separated by semicolons) at the end of the figure legend or table; for example, BMI: Body mass index; CT: Computed tomography.

N/A

6 EDITORIAL OFFICE'S COMMENTS

Authors must revise the manuscript according to the Editorial Office's comments and suggestions, which are listed below:

(1) **Science editor:** The manuscript is suitable of publication in the present form

(2) **Company editor-in-chief:** 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.

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- (11) 69178-CARE Checklist–2016 **I did as required**
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