

## **Reviewer Replies**

### **Reviewer #1**

1. Explain why we did a hepaticojejunostomy instead of a stand-alone procedure?

We performed a hepaticojejunostomy for this patient due to two main reasons. Firstly, on her follow-up computed tomography scan, there were mildly dilated intra-hepatic bile ducts seen, suggestive of possible stricture formation. Secondly, as this patient stays in a rural area, intensive long-term follow-up for stricture formation after stand-alone pedicled omental patch repair would not be feasible for her. The use of this procedure as a stand-alone procedure would be possible only if the patient was agreeable to long-term intensive follow-up, and if there was no evidence of stricture formation.

2. Describe findings in the definitive surgery three months later

During definitive surgery three months later, there were dense adhesions at the hepatic hilum and evidence of early stricture formation at the area of bile duct injury and repair.

3. Grammatical and syntax errors

The errors have been corrected.

### **Reviewer #2**

1. Were there similar cases reported before?

No one has described the use of a pedicled omental patch together with endoscopic biliary stenting to control a large bile duct defect/leak. However, two other case reports have described the use of a pedicled omental patch with a T-tube to treat similar conditions.

2. Have we applied for institutional review board approval?

In our institution and country, institutional review board approval is not required for case reports.

3. Explain why we did a hepaticojejunostomy?

We performed a hepaticojejunostomy for this patient due to two main reasons. Firstly, on her follow-up computed tomography scan, there were mildly dilated intra-hepatic bile ducts seen, suggestive of possible stricture formation. Secondly, as this patient stays in a rural area, intensive long-term follow-up for stricture formation after stand-alone pedicled omental patch repair would not be feasible for her. The use of this procedure as a stand-alone procedure would be possible only if the patient was agreeable to long-term intensive follow-up, and if there was no evidence of stricture formation.

4. Any biliary stenosis after initial omental patch due to omental migration?

We did not find any evidence of biliary stenosis secondary to omental patch migration into the bile duct. Instead, stricture formation is due to fibrosis and scarring.

6. Provide imaging for cholangiography after initial omental patch.

We did not perform cholangiography after the initial pedicled omental patch repair.