

**January 4, 2018**

**Name of Journal: WORLD JOURNAL OF GASTROENTEROLOGY**

Manuscript No: 37262

**Title: Quality indicators in pediatric colonoscopy in a low volume load training center: Implications for performance and training**

Dear Sir:

I refer to the above manuscript and the review from the expert reviewer. I appreciate the useful comments from the reviewer to improve the quality of the manuscript.

The responses of the authors to the comments are as follows:

1. Many thanks for the encouraging remarks. Many thanks also for the useful suggestion. An appendix on the learning curve of the 4 trainees in terms of cecal intubation has been included in the revised manuscript. However, this data should be interpreted with caution. The number of colonoscopies performed by trainees varies. Further analysis correlating performances on cecal inspection and terminal ileum intubation during different period of training will render any interpretation difficult. In addition, the performances were compounded by factors such as full colonoscopic examination was either not indicated nor unsafe.
2. A brief literature review on how to improve the cecal intubation rate and the minimum number of colonoscopy to be performed to achieve this training goal has been included in the revised manuscript.
3. Many thanks for this helpful suggestion. The causes of intubation failure is shown in Table 1 of the original manuscript. The most important causes were full colonoscopic examination not indicated (i.e. confirming graft-versus-host disease, worm infestation, and malignancies) or unsafe (severe colitis).

Thank you

Yours truly,

Way Seah LEE  
Corresponding author  
On behalf of all authors.