

Peer Review File

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Reviewer A

Overall, the manuscript seems all right, but the reviewer strongly recommends that the authors should cite at least several references. Also, the reviewer does not think right S8 segmentectomy is more difficult than the left S8 segmentectomy.

Thank you for reviewing. We cited references and we corrected the manuscript in order to not differentiate the side of the resection.

Reviewer B

Major comments:

#1 Author describe that S8 segmentectomy is one of the most difficult lung segmentectomies, but S8 segmentectomy is relatively simple operative procedure in the segmentectomy in basal segment. It is possible several surgical approaches for S8 segment including interlobar, mediastinal and anterior side.

#2 Suggest author should show the preoperative 3DCT image of patient in video clip, because preoperative 3DCT was critical for simulation of segmentectomy.

#3 Why ICG injection was conducted to confirm intersegmental plane after A8b dissection in video? Did author perform substantial simulation using preoperative 3DCT image?

#4 Suggest should not use the excessive ICG injection for determine intersegmental planes.

#5 Mediastinal side of S8 segment was resided after S8 segmentectomy in video. Intersegmental vein should be confirm from mediastinal side.

Thank you for reviewing.

#1 We agree with the reviewer and we corrected the manuscript in order to not differentiate the side of the resection.

#2 We agree with the reviewer but we didn't use preoperative 3D in routine at the time of this case, so we can't show this CT reconstruction.

#3 In our video we used ICG to identify first A8a and then A8b before stapling. So, we added ICG in a second time to delimitate the full S8 segment before stapling.

#4 Thanks for your suggestion

#5 We're not sure some part of S8 segment resided after the segmentectomy. However, you're right because intersegmental vein can be visualized but we don't do it in routine for a S8 segmentectomy.
