

Peer Review File

Article information: <https://dx.doi.org/10.21037/tau-23-107>

Reviewer A

The authors in this narrative review discussed the many recent technological advances that have been implemented in the ever-changing landscape of RPN. The manuscript requires revision before publication. The topic is certainly of interest.

Comment 1: “Renal malignancies are the tenth most common malignancy”. Please be more accurate. I suggest reporting the latest up to date epidemiological data.

Reply 1: The authors appreciate this suggestion. Some more detail regarding the more recent epidemiology has been provided.

Changes in the text: On page 3, lines 84-85 of the manuscript “Introduction” section, epidemiology has been included.

Comment 2: Trifecta definitions - no urologic complications. why urologic? Any major complication should be taken into account for trifecta definition. Please correct it.

Reply 2: The concept of the trifecta in partial nephrectomy included (1) negative cancer margins, (2) minimal renal function decrease, (3) and no *urological* complications. The authors believe there is validity to the reviewers statement and the “urologic” portion has been replaced with major.

Changes in the text: “no urologic complications” has been changed to read “no major complications” in page 3, line 122.

Comment 3: You provided Pentafecta definitions two times. Please eliminate the definition from Introduction

Reply 3: The authors appreciate the comment provided.

Changes in the text: Pentafecta has only been defined once on page 3, lines 120-123.

Comment 4: Even if it is true “the traditional surgical approach to RPN is transperitoneal; This provides familiarity with typical landmarks learned from open surgery which offers a sense of confidence”. many might not agree. Please reformulate those sentences by citing a recent MA and SR on the topic.

Reply 4: To eliminate confusion, regarding the initial approach for partial nephrectomy, this has been removed.

Changes in the text: removal of this sentence

* When presenting data comparison in the introduction between RN and PN, please cite this article from ROSULA collaborative group on the topic (DOI: 10.1007/s00345-023-

04279-1).

* In the introduction when presenting all available techniques for cT1 renal masses please include also percutaneous ablation which is increasingly being taken into account as an alternative treatment. I suggest citing this recent article (iDOI: 10.1089/end.2022.0478).

* I strongly suggest eliminating redundancies

* Check typos.

Reply: The above suggested articles have been included in the manuscript and the authors have reviewed the manuscript for typographical errors and redundancies and have removed them where appropriate.

Reviewer B

Comment: It's needed to indicate "a narrative review" in your Title.

Reply: Indicated.

Comment: *Ref 9 & Ref 13, Ref 39 & Ref 118* are repeated. Please check and revise.

9) Delto JC, Paulucci D, Helbig MW, et. al. Robot-assisted partial nephrectomy for large renal masses: a multi-institutional series. *BJU Int.*2018;121:90815.

13) Delto JC, Paulucci D, Helbig MW, et. al. Robot-assisted partial nephrectomy for large renal masses: a multi-institutional series. *BJU Int.* 2018;121:908-15.

39) Long JA, Fiard G, Giai J, et. al. Superselective Ischemia in Robotic Partial Nephrectomy Does Not Provide Better Long-term Renal Function than Renal Artery Clamping in a Randomized Controlled Trial (EMERALD): Should We Take the Risk? *Eur Urol Focus.* 2022;8:769-76.

118) Long JA, Fiard G, Giai J, et. al. Superselective Ischemia in Robotic Partial Nephrectomy Does Not Provide Better Long-term Renal Function than Renal Artery Clamping in a Randomized Controlled Trial (EMERALD): Should We Take the Risk? *Eur Urol Focus.* 2022;8:769-76.

Reply: Apologies, the duplicated references have been removed.

Comment: In addition to following the general format of a review article described above, narrative reviews should also adhere to the **narrative review checklist (attached)** and each submission should include the Checklist as supplementary material. The relevant page/line and section/paragraph number in the manuscript should be stated for each item in the checklist.

Reply: The checklist has been filled (see attached).