

## Peer Review File

Article Information: <https://dx.doi.org/10.21037/jss-23-42>

### Reviewer A

**Comment 1:** Authors should address other injuries that can impact C1 junction such as chiropractic manipulation PMID: 29951644 and other associated findings with pellets to the skull such as growing skull fracture PMID: 29888100.

**Reply 1:** Great points, added.

### Reviewer B

1) In the background section: "Air-gun pellet injuries almost always occur in children under the age of 18 years old ". This wording is unclear, the sentence implies that the injuries will occur in all children.

**Reply 1:** Changed.

2) I would recommend a complete revision of the wording as it sounds too formal.

Example: "the general population thinks that trauma caused by air guns is fiddling", what is this claim based on?

**Reply 2:** Changed.

3) The abstract is the same as the introduction with minimal changes to the content.

**Reply 3:** Changed.

4) "Also, some metals used in the manufacturing process of the pellet can be toxic; however, the specific mechanism of injury is unknown" This claim is irrelevant to the study at hand.

**Reply 4:** Deleted.

5) Please remove the nationality of the patient from the manuscript.

**Reply 5:** Deleted.

6) "which showed no changes compared to the initial CT ". Changes in what exactly?

**Reply 6:** Mainly in the location and it is not penetrating elsewhere. We added it.

7) "Given the family's financial and social condition, and the fact that they lived in a rural area very far from our institute, weekly close follow-up was very costly and difficult to adhere to" This statement is irrelevant to the case report.

**Reply 7:** That's the reason for us to mention it, that we couldn't be able to do new CT and x-ray and compare it to previous ones and to see if patient didn't develop any signs or symptoms.

8) What was surveyed in the phone consultations? Pain levels, fever, etc.?

**Reply 8:** Yes, pain, LOC, fever, any abnormal fluid coming from nose, ear, weakness...

9) No outcome is reported, nor was there any treatment. No analysis was done on the injury.

**Reply 9:** I'm not sure what do you mean here, however the outcome is reported.

### **Reviewer C**

The good points of this manuscript is that it describes a cautionary tale of the type of severe injury that can occur during play with an air pellet gun. The authors provide a good review of the relevant literature.

1. Several points that would improve the manuscript:

There are numerous typos and style/grammar errors. This manuscript needs a major overhaul, probably by an editorial service.

**Reply 1:** Fixed.

2. The authors would be wise to describe the indications for surgery (CSF leak, instability, worsening neurological condition, toxicity, vascular injury, etc) and how this patient did not meet them.

**Reply 2:** Added in the conclusion and for the part that our patient didn't meet the indications we mention it in the case presentation that he is asymptomatic.

3. I agree with the nonoperative management, but the authors need to describe the antibiotic course for the patient including the type of antibiotic, route, and dosing.

**Reply 3:** No antibiotics given for the patient only analgesia and close follow up.

4. Finally what do the authors think stopped the pellet from coursing posteriorly? Looking at the imaging, it seems like the transverse ligament but I only have the small, single images so it's difficult to say.

**Reply 4:** Mostly it's stopped by Lt anterior part of transverse ligament.