

Peer Review File

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Review Comments

Comment 1

This is a multi-faceted review of TORS that addresses many aspects including: history of minimally-invasive head and neck surgery, patient selection, operative setup, anaesthesia considerations, and post-operative management.

Authors' response to comment 1

We agree that this is a multi-faceted review.

Comment 2

The substance of this article does not align with the title. This reads more like a review chapter than a literature review. In its current form, I don't think that this manuscript is well-suited for this Journal's audience.

Authors' response to comment 2

The style, structure and content of this review are consistent with a conventional/traditional review article. It is not a narrative or systematic review. This conventional type of review has been approved by the journal - by the commissioning editors, as well as directly by the journal's editorial office.

The revised manuscript has been updated to follow the template for this style of review in accordance with the JOMA authors' guidance (i.e. inclusion of a structured introduction - with subheadings of background, rationale and knowledge gap, objective; and, inclusion of strengths and weaknesses section in the manuscript main body).

The authors are confident that the revised manuscript meets the requirements of a review, that it is very much suited to this journal's readership, and that it complements the other review articles in this series.

Comment 3

I would suggest that the authors do a major trim/removal the non-anaesthetic aspects of the manuscript and expand the anaesthesia-related aspects. I suggest they expand their review and commentary of prior literature that specifically pertains to anaesthetic technique. I suggest they also focus the readers' attention to what they feel are key considerations to help guide practitioners in their care for patients undergoing TORS.

Authors' response to comment 3

The revised manuscript contains a comprehensive evidence-based discussion of the anaesthetic considerations for TORS, with *significant* detail provided on all aspects of anaesthesia/preoperative and postoperative care. The anaesthetic aspects in the revised manuscript represent very much the major proportion and the focus of the review.

The authors have added significant detail to the anaesthetic considerations, and highlighted the key aspects, as requested.

The "non-anaesthetic aspects" to which the reviewer refers are limited to *essential* background information regarding the surgical procedure itself. In order for

anaesthetists to deliver safe and effective care to patients undergoing TORS, they *must* have an understanding of the salient steps involved in the surgery, so that they can anticipate potential issues/avert problems/tailor their anaesthetic to optimize conditions dependent on the phase of surgery.