

Peer Review File

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Reviewer A

This letter is interesting research regarding the benefits of combining the latest technology in thoracic surgery. They concluded that new technologies including electromagnetic bronchoscopy and robotic surgery were useful for thoracic segmentectomy. The letter is well written with a clear presentation. I have a comment.

Comment: Surgical procedure of segmentectomy requires a precise recognition of the segmental bronchovascular anatomy, including the spatial relationship of structures. Three-dimensional CT images have become an essential tool for performing an accurate segmentectomy. This method should be included in this letter.

Reply: Thank you – we have included three dimensional CT imaging when discussing undertaking segmentectomy and its importance in this respect.

Changes in the text: Tracked and added in first paragraph.

Reviewer B

Major comments:

The authors describe a combination of multiple technologies to perform respiratory procedures safely and reliably, which is highly beneficial for thoracic surgeons. While the text includes several case scenarios, it would be helpful to provide specific examples from your own experience to illustrate the implementation of these technologies.

Reply: Thank you very much for this helpful comment– these case scenarios are actually included from our own experience that we hope will provide of use to the reader – we have tried to limit the scenarios to the more unusual scenarios that may interest the reader more.

Reviewer C

Comment: Such work is interesting to thoracic surgeons broadly. Simple techniques like lung tumor localization with folate receptor–targeted near-infrared molecular imaging are expected to realize.

Reply: Thank you looking to the future is very important and we very much appreciate this comment. However, we have tried to keep it to scenarios that are current rather than looking to what will/ is likely to happen in the near future. We have referenced this though in future developments.

Changes in the text: Tracked and added in final paragraph.

Reviewer D

Comment: This Letter to the Editor is acceptable in its current fashion. That being stated, adding a sentence or two commenting on adding enhanced imaging technology to what they are presently describing would strengthen their position.

Reply: Thank you we have included reference to imaging in respect of undertaking segmentectomy and the benefits of 3d imaging in this regard.

Changes in the text: Added at bottom of first paragraph and tracked.

Reviewer E

Comment: With a perspective of the latest technique to help optimize care in thoracic surgery, the authors provide a concise review of nodule localization and resection with attention to new techniques developed over the last decade. The primary premise is that navigational bronchoscopy can help improve/ optimize the care of thoracic patients, particularly allowing segmental resection over lobectomy. However, in an editorial about the latest technology, I would expect there to be a mention of robotic bronchoscopy, which is now replacing electromagnetic techniques. Equally, a mention of single port approach (both robotic and VATS) would be worth consideration. Regarding localization techniques, I would also encourage a broader discussion on future technology/ techniques such as molecular marking.

Reply: Thank you for your very helpful feedback – we have included robotic assisted bronchoscopy and thank you for this. We do now mention vats and molecular marking in the final paragraph.

Changes in the text: Added in final paragraph and tracked.
