

Figure S1 Lung function testing of patient 1 showed a flow volume loop indicative of central airway obstruction.

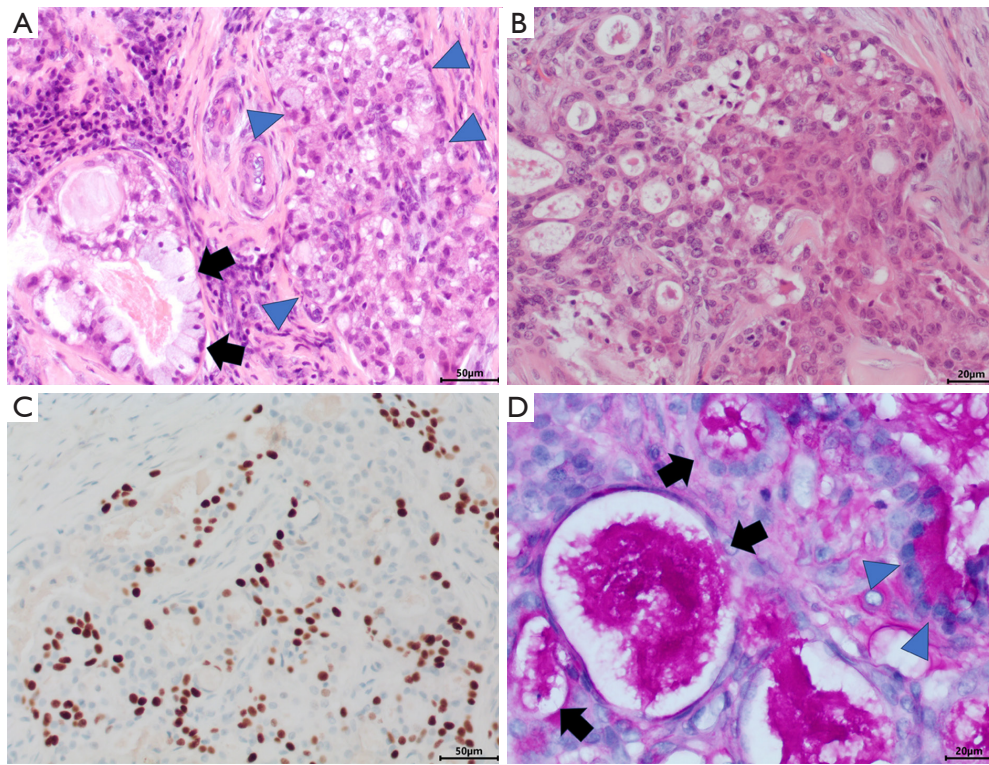


Figure S2 Histopathological features of mucoepidermoid carcinoma in patient 1. (A) Mucoepidermoid carcinoma with slightly vacuolated intermediate cells (arrowheads) and glandular structures filled with mucus and partially lined by mucous cells (arrows) (Hematoxylin and Eosin staining). (B) High magnification demonstrating squamous cells (right half) and glandular structures (left half) (Hematoxylin and Eosin staining). (C) Immunohistochemistry staining for p40 highlighting intermediate cells and squamous cells. (D) Periodic acid-Schiff staining (PAS-staining) demonstrating extracellular mucus in glandular lumens (arrowheads) and intracellularly in columnar mucous cells (arrows).

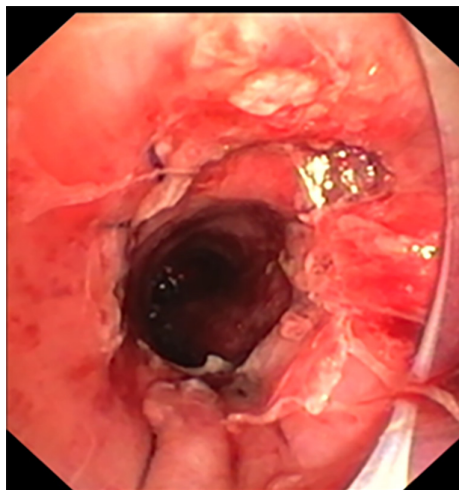


Figure S3 Intraoperative control bronchoscopy showed no macroscopically visible lesions.

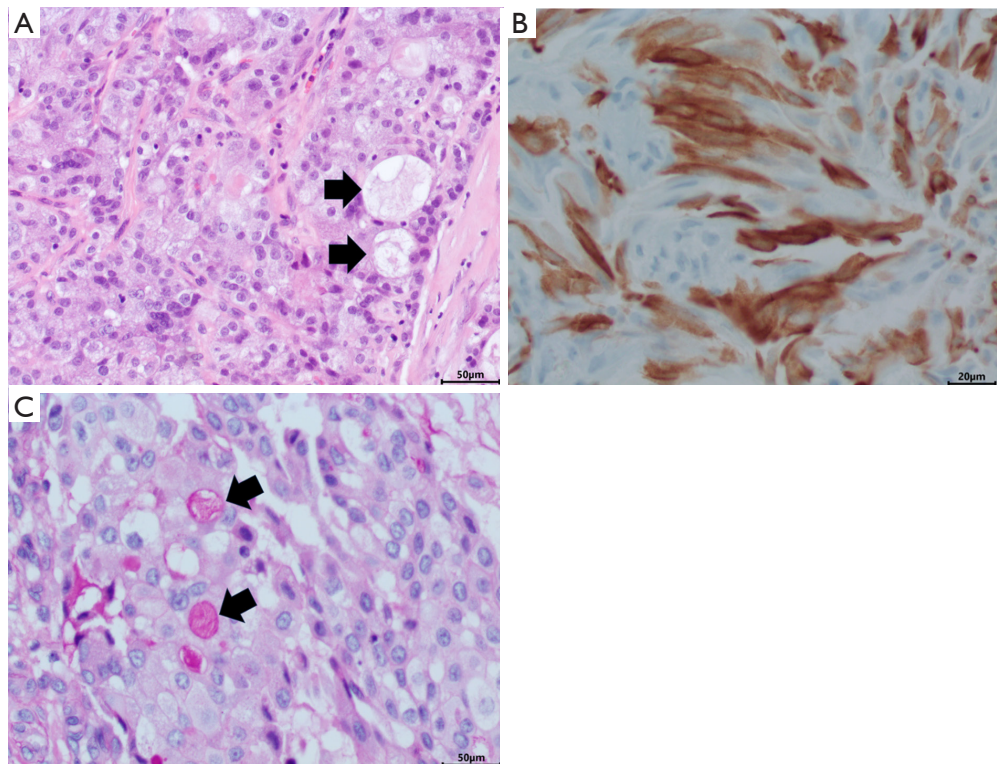


Figure S4 Histopathological features of mucoepidermoid carcinoma in patient 2. (A) Vacuolated intermediate cells. Glandular structures filled with mucus are indicated by arrows. Hematoxylin and Eosin staining. (B) Immunohistochemistry staining showing Cytokeratin CK5 in cells with squamous differentiation. (C) Periodic acid-Schiff staining (PAS-staining) demonstrating individual mucus cells (arrows).

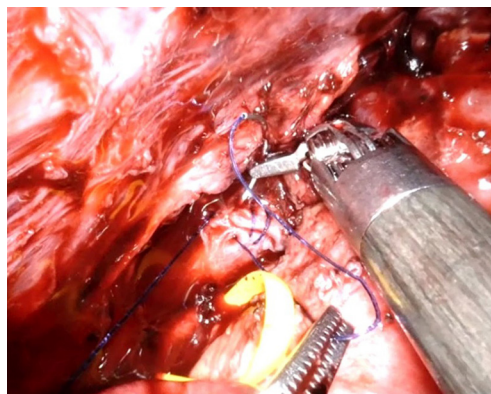


Figure S5 End-to-end anastomosis with running PDS 3-0 suture (patient 1) and V-lock 180, 3-0 (patient 2).