

## Peer review file

Article information: <http://dx.doi.org/10.21037/jtd-20-3003>

### Reviewer A

Comment 1: The reviewer suggested illustrating the preservation of the sternoclavicular joint.

Reply 1: We are aware that this understanding is very important. Because the format of the article dictates that there is only one figure, the method of preservation of the sternoclavicular joint is the same as that of the original TMA, and the famous reference (1) of the original TMA describes the technique in detail and provides an excellent figure. We have indicated this in the text and suggested the reference (1). We have added this information in the revised manuscript accordingly.

Revision 1: Page 3, lines 8–9.

Comment 2: The reviewer inquired about the skin incision.

Reply 2: The skin incision is shown on video. As per the suggestion, we have added a picture of the skin incision to the view of the bony thorax for better clarity. We have revised Figure 1 and the legend accordingly.

Revision 2: Figure 1; page 7, lines 5–6.

### Reviewer B

Thank you very much for your valuable comments. Fortunately, all the reviewers gave a favorable evaluation of this report. We sincerely appreciate it. We have tried to revise the manuscript and have made the necessary corrections as much as possible in line with all reviewers' suggestions and comments.

Comment 1: The reviewer pointed out the incorrect explanation of the prognostic information in the video.

Reply 1: Thank you for pointing that out. This was a careless mistake on our part. Other reviewers have noted this as well. A false prognostic statement in the video has been corrected.

Revision 1: Correction of the narration in the video to be consistent: first version, "...32 months..."; revision, "...36 months..."

### **Reviewer C**

Thank you very much for your valuable comments. Fortunately, all the reviewers gave a favorable evaluation of this report. We sincerely appreciate it.

Comment 1: The reviewer considers this report to be acceptable.

Reply 1: We have tried to revise the manuscript and have made the necessary corrections as much as possible in line with all reviewers' suggestions and comments. The revisions in the text are highlighted. Also, a mistake in the video narration has been corrected. Please confirm.

### **Reviewer D**

Comment 1: The reviewer considers this report to be acceptable.

Reply 1: We have tried to revise the manuscript and have made the necessary corrections as much as possible in line with all reviewers' suggestions and comments. The revisions in the text are highlighted. Also, a mistake in the video narration has been corrected. Please confirm.

### **Reviewer E**

Comment 1: The reviewer suggested that the "modified TMA" of this method could be revised to "extended TMA".

Reply 1: Thank you for the suggestion. Certainly, we consider it is reasonable to describe this method as "extended TMA". On the other hand, it is also certain that present procedure is considered to be a modification of the original TMA. Accordingly, we have revised the manuscript title and other relevant parts using "extended", "modified" or "modification".

Revision 1: Page 1, line 3; page 2, lines 1–3; page 4, lines 2–3, lines 7–8.

Comment 2: The reviewer pointed out the incorrect narration of the prognostic

information in the video.

Reply 2: Thank you for pointing that out. This was a careless mistake on our part. Other reviewers have noted this as well. A false prognostic statement in the video has been corrected.

Revision 2: Correction of the narration in the video to be consistent: first version, "...32 months..."; revision, "...36 months..."

Comment 3: The reviewer suggested noting the reasons why the salvage operation was performed.

Reply 3: Thank you for the instruction. As per the suggestion, we have added some information including preoperative conditions, absence of mediastinal lymph node metastasis and distant metastasis, and genetic and PDL1 information, accordingly.

Revision 3: Page 2, line 23–page 3, line 2.

#### **Reviewer F**

Comment 1: The reviewer suggested that this report would be a case report.

Reply 1: Thank you for your suggestions. Indeed, this report is both a case report and a report on surgical techniques. Unfortunately, the current article format of JTD does not include a case report or surgical procedure type, so it is written as Letter to the Editor.

Revision 1: We would like to retain current format. Otherwise, at the editor's discretion, we would like to write this report as a Surgical Technique.

Comment 2: The reviewer noted that this report will be checked under CARE guidelines.

Reply 2: Thank you for the instruction. We have checked this report based on the checklist. We also mentioned it in the footnote.

Revision 2: Page 2, lines 2–3; Page 5, Footnote.

Comment 3: The reviewers commented on the text and references.

Reply 3: A professional English editor checked the report and we thoroughly rechecked the text. We also checked the references.

#### **Reviewer G**

Comment 1: Conflict of Interest (COI) Form must be provided, as suggested by ICMJE.

Reply 1: We've already sent you the COI forms, but we send it to you again for confirmation.

Comment 2: Please indicate if any of the authors serves as a current Editorial Team member (such as Editors-in-Chief, Editorial Board Member, Section Editor) for this journal.

Reply 2: There is no such person as Editor-in-Chief, Editorial Board Member or Section Editor.

Comment 3: Please confirm that all figures/tables in your manuscripts are original; if not, permission is needed from the copyright holder for the reproduction.

Reply 3: The figure and the video are completely original works. The video has been revised and we will send it again via WeTransfer. Please replace it with the revised version.

Comment 4: We are using the checklist to double-check your manuscript, place "Y" on blank space if you confirm your manuscript has followed the requirement. Place "N/A" if not applicable. If further explanation is needed on a certain item, you can copy the Item and write explanations down below. A filled "Submission Checklist for Authors" should be submitted to the editorial office, along with other required documents.

Reply 4: We have created the checklist.