

**Reply to Reviewer 1 (00051373)'s comments:**

**Reviewer #1: This is a real world practices review and roadmap experience on portal vein thrombosis in the setting of liver transplantation.**

Reply: We appreciate for your kind comments. We further improved the manuscript with the help of highly qualified native English speaking editors at Springer Nature Author Service.

**Replies to Reviewer 2 (00503623)'s comments:**

**We appreciate for your kind recommendation and criticism. Specific to your opinion, we have made modifications which were highlighted in the revised manuscript and a point-by-point response, as follows:**

**Reviewer #2: This manuscript provides well justified opinion of the authors regarding tailored classification of portal vein thrombosis for liver transplantation. Based on the well-researched literature data, the authors propose a tailored classification of PVT. Namely, anatomical, physiological and non-physiological (Type I PVT, Type II and Type III). The tailored PVT classification allows better preoperative planning, forces transplant surgeons to pay greater attention to all strategies for portal reconstruction, and allows a better procurement of donor organs. This is quite useful and timely review.**

**1. The manuscript, however, requires thorough review of the sentence composition and there are number of fused words throughout the text.**

Reply 1: We asked highly qualified native English speaking editors at Springer Nature Author Service for thorough review of the sentence composition, and check for fused words again ourselves. The English editing certificate was submitted with the revised manuscript.

**2. Moreover, the abstract should be modified to include well defined conclusion.**

Reply 2: In the revised manuscript, we modified the abstract and added a better defined conclusion: "This tailored classification system stratifies PVT patients by surgical complexity, risks of postoperative complications and long-term survival. We advocate using the tailored classification for PVT grading before LT, which will urge transplant surgeons to make a better preoperative planning and pay more attention to all potential strategies for portal reconstruction."

Thanks again for your professional review and criticism. Hope for your further recommendation.

**Reply to Reviewer 3 (00290396)'s comments:**

**Reviewer #3: Teng, Sun, Fu Tailored classification of portal vein thrombosis for liver transplantation: focus on strategy for portal vein inflow reconstruction** Teng et al. review the (abovementioned) topic, proposing a tailored classification of portal vein thrombosis specific to liver transplantation with primary consideration strategies for portal vein inflow reconstruction. Of the >200 papers that I have reviewed, including for the AHA and AJP series, PNAS, CVR and similar, I have only ever seen 1 or 2 that were written where I could suggest no further changes or improvement. While this paper is in a tier 2 journal it is exceptionally well written with clear aims, reasoning and conclusions. I have no further comment on the manuscript.

Reply: It is our great honor to have your kind comments. We further improved the manuscript with the help of highly qualified native English speaking editors at Springer Nature Author Service.