Dear Editors and Reviewers:

Thank you for your letter and for the reviewer’s comments concerning our manuscript entitled “External Penetrating Laryngeal Trauma Caused by A Metal Fragment: A Case Report” (ID: 71231). Those comments are all valuable and very helpful for revising and improving our paper, as well as the important guiding significance to our researches. We have studied comments carefully and have made correction which we hope meet with approval. The main corrections in the paper and the responds to the reviewer's comments are as flowing:

Response to the reviewer’s comments:

Reviewer #1: This case report is well-written with an adequate literature supporting review. I suggest to include computed tomography protocol, highlighting the role of contrast-enhanced CT in emergency setting for the evaluation of vascular structures.

Response: 1. Page 7, lines 3-6, computed tomography protocol, “Upon admission, computed tomography (CT) was performed using a 64-row CT scanner (LightSpeed VCT, GE Medical Systems), with the following scanning parameters: 3.250 mm section thickness, 120 kVp, 498 mA, and 0.6-s rotation time.”, was added.

2. Page 10, lines 7-17, the discussion, “When plain CT cannot show radiological signs of potential vascular injuries, which may delay patients’ diagnoses, contrast-enhanced CT is more sensitive.....contrast-enhanced CT is an essential examination for the diagnosis of injuries because of its high sensitivity in evaluating soft tissues, specifically vascular structures, in addition to fractures.” was added, and the role of contrast-enhanced CT in emergency was highlighted.

We tried our best to improve the manuscript and made some changes in the manuscript. These changes will not influence the content and framework of the paper. We appreciate for editors and reviewers' warm work earnestly, and hope that the correction will meet with approval.

Once again, thank you very much for your comments and suggestions.
Yours sincerely,

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