Response to Reviewers’ comments

Dear Editor,

We thank you for your careful consideration of our manuscript. We appreciate your response and overall positive initial feedback, and we have made modifications to improve the manuscript. After carefully reviewing the comments made by the Reviewers, we have modified the manuscript to improve the presentation of the case and related discussion, therefore providing a complete context for the research that may be of interest to your readers.

We hope that you will find the revised paper suitable for publication, and we look forward to contributing to your journal. Please do not hesitate to contact us with other questions or concerns regarding the manuscript.

Best regards,
SCIENTIFIC QUALITY

Please resolve all issues in the manuscript based on the peer review report and make a point-by-point response to each of the issues raised in the peer review report, and highlighted the revised/added contents with yellow color in the revised manuscript. Note, authors must resolve all issues in the manuscript that are raised in the peer-review report(s) and provide point-by-point responses to each of the issues raised in the peer-review report(s); these are listed below for your convenience:

Reviewer #1

Scientific Quality: Grade B (Very good)
Language Quality: Grade B (Minor language polishing)
Conclusion: Minor revision
Specific Comments to Authors:
- Discussion should be re-written in more details.

  Response: We thank the Reviewer for the comment. We added some information to the discussion. Still, we are reporting a single case, and the possible discussion and conclusion are therefore limited.

4 LANGUAGE POLISHING REQUIREMENTS FOR REVISED MANUSCRIPTS SUBMITTED BY AUTHORS WHO ARE NON-NATIVE SPEAKERS OF ENGLISH

As the revision process results in changes to the content of the manuscript, language problems may exist in the revised manuscript. Thus, it is necessary to perform further language polishing that will ensure all grammatical, syntactical, formatting and other related errors be resolved, so that the revised manuscript will meet the publication requirement (Grade A).

Authors are requested to send their revised manuscript to a professional English language editing company or a native English-speaking expert to polish the manuscript further. When the authors submit the subsequent polished manuscript to us, they must provide a new language certificate along with the manuscript.

Once this step is completed, the manuscript will be quickly accepted and published online. Please visit the following website for the professional English language editing companies we recommend: https://www.wjgnet.com/bpg/gerinfo/240.

  Response: The manuscript was proofread by a professional company.

5 ABBREVIATIONS

In general, do not use non-standard abbreviations, unless they appear at least two times in the text preceding the first usage/definition. Certain commonly used abbreviations, such as DNA, RNA, HIV, LD50, PCR, HBV, ECG, WBC, RBC, CT, ESR, CSF, IgG, ELISA, PBS, ATP, EDTA, and mAb, do not need to be defined and can be used directly. The basic rules on abbreviations are provided here:

(1) Title: Abbreviations are not permitted. Please spell out any abbreviation in the title.
(2) Running title: Abbreviations are permitted. Also, please shorten the running title to
no more than 6 words.
(3) Abstract: Abbreviations must be defined upon first appearance in the Abstract.
(4) Key Words: Abbreviations must be defined upon first appearance in the Key Words.
(5) Core Tip: Abbreviations must be defined upon first appearance in the Core Tip.
Example 1: Hepatocellular carcinoma (HCC). Example 2: Helicobacter pylori (H. pylori)
(6) Main Text: Abbreviations must be defined upon first appearance in the Main Text.
Example 1: Hepatocellular carcinoma (HCC). Example 2: Helicobacter pylori (H. pylori)
(7) Article Highlights: Abbreviations must be defined upon first appearance in the Article Highlights.
Example 1: Hepatocellular carcinoma (HCC). Example 2: Helicobacter pylori (H. pylori)
(8) Figures: Abbreviations are not allowed in the Figure title. For the Figure Legend text, abbreviations are allowed but must be defined upon first appearance in the text.
Example 1: A: Hepatocellular carcinoma (HCC) biopsy sample; B: HCC-adjacent tissue sample. For any abbreviation that appears in the Figure itself but is not included in the Figure Legend textual description, it will be defined (separated by semicolons) at the end of the figure legend. Example 2: BMI: Body mass index; US: Ultrasound.
(9) Tables: Abbreviations are not allowed in the Table title. For the Table itself, please verify all abbreviations used in tables are defined (separated by semicolons) directly underneath the table. Example 1: BMI: Body mass index; US: Ultrasound.

Response: We thank the Editorial office. The abbreviations were revised as indicated.

6 EDITORIAL OFFICE’S COMMENTS
Authors must revise the manuscript according to the Editorial Office’s comments and suggestions, which are listed below:

Science editor

1 Conflict of interest statement: Academic Editor has no conflict of interest.
2 Manuscript’s theme: The topic is within the scope of the journal.
3 Scientific quality: The authors submitted a case report of uterine epithelioid trophoblastic tumor with main manifestation of increased human chorionic gonadotropin. The manuscript is overall qualified.
(1) Advantages and disadvantages: The reviewers have given positive peer-review reports for the manuscript. The reviewer believes that the discussion section should be written in more detail.

Response: We thank the Editorial office for the comment. We added some information to the discussion. Still, we are reporting a single case, and the possible discussion and conclusion are therefore limited.
(2) **Main manuscript content:** The author clearly stated the purpose of the study and the research structure is complete. However, the manuscript still require a further revision according to the detailed comments listed below.

(3) **Table(s) and figure(s):** There are 2 Figures should be improved. Detailed suggestions for each are listed in the specific comments section.

(4) **References:** A total of 8 references are cited, including 0 published in the last 3 years. The author does not have self-cited references. The cited references are overall sufficient and reasonable. The reviewer didn’t request the authors to cite improper references published by him/herself.

4 Language evaluation: The English-language grammatical presentation needs to be improved to a certain extent. There are many errors in grammar and format, throughout the entire manuscript. Before final acceptance, the authors must provide the English Language Certificate issued by a professional English language editing company. Please visit the following website for the professional English language editing companies we recommend: [https://www.wjgnet.com/bpg/gerinfo/240](https://www.wjgnet.com/bpg/gerinfo/240).

**Response:** The manuscript was proofread by a professional company.

5 **Medical ethics:** Please provide the primary version (PDF) of the Consent for Treatment that has been signed by the patient(s) in the study/ the first page of the patient(s)’ medical record, prepared in the official language of the authors’ country to the system.

**Response:** We thank the Science Editor. We provided the required documents (Consent for Treatment).

6 **Specific comments:**

(1) Please provide the Figures cited in the original manuscript in the form of PPT. All text can be edited, including A, B, arrows, etc. With respect to the reference to the Figure, please verify if it is an original image created for the manuscript, if not, please provide the source of the picture and the proof that the Figure has been authorized by the previous publisher or copyright owner to allow it to be redistributed. All legends are incorrectly formatted and require a general title and explanation for each figure. Such as Figure 1 title. A: ; B: ; C: .

**Response:** We thank the Science Editor. We provided the figures as .ppt files. All figures were original and from us. We verified the Legends to the Figures.

(2) The “Case Presentation” section was not written according to the Guidelines for Manuscript Preparation. Please re-write the “Case Presentation” section [Chief complaints; History of present illness; History of past illness; Personal and family history; Physical examination upon admission; Laboratory examinations; and Imaging examinations] and add the “FINAL DIAGNOSIS”, “TREATMENT”, “OUTCOME AND FOLLOW-UP”, and “CONCLUSION” sections to the main text, according to the Guidelines and Requirements for Manuscript Revision.

**Response:** We thank the Science Editor. We revised the Case presentation accordingly.
(3) Please provide the PubMed numbers (https://pubmed.ncbi.nlm.nih.gov/) and DOI citation numbers (https://doi.crossref.org/simpleTextQuery) to the reference list and list all authors of the references. If a reference has no PMID and DOI, please provide the source website address of this reference.

Response: We thank the Science Editor. We provided the PMID and DOI.

Company editor-in-chief
I have reviewed the Peer-Review Report, full text of the manuscript, all of which have met the basic publishing requirements of the World Journal of Clinical Cases, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office’s comments and the Criteria for Manuscript Revision by Authors. When revising the manuscript, it is recommended that the author supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript. To this end, authors are advised to apply PubMed, or a new tool, the Reference Citation Analysis (RCA), of which data source is PubMed. RCA is a unique artificial intelligence system for citation index evaluation of medical science and life science literature. In it, upon obtaining search results from the keywords entered by the author, “Impact Index Per Article” under “Ranked by” should be selected to find the latest highlight articles, which can then be used to further improve an article under preparation/peer-review/revision. Please visit our RCA database for more information at: https://www.referencecitationanalysis.com/, or visit PubMed at: https://pubmed.ncbi.nlm.nih.gov/.

Response: We thank the Editor-in-Chief for considering our manuscript. We did not identify additional (or more recent) relevant studies.