

Scientific Quality: Grade B (Very good)

Novelty of This Manuscript: Grade B (Good)

Creativity or Innovation of This Manuscript: Grade C (Fair)

Scientific Significance of the Conclusion in This Manuscript: Grade C (Fair)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: This paper analyzes the multifaceted impact of preoperative comprehensive education on elderly patients undergoing general anesthesia. Through the group study of 163 patients, it is found that patients receiving preoperative comprehensive education perform better in surgical indicators such as operation time, consciousness recovery time, and body temperature recovery. In terms of negative emotions, preoperative comprehensive education can more effectively reduce the anxiety and depression levels of patients. In terms of pain level, the VAS score of this group of patients decreases more significantly. At the same time, the sleep quality of the research group is significantly improved, the PSQI score is reduced, and the incidence of sleep disorders is reduced. In addition, the incidence of adverse events in the research group is relatively lower. In general, this study shows that preoperative comprehensive education is beneficial for elderly patients undergoing general anesthesia, as it can enhance the postoperative effect, alleviate anxiety and depression, reduce pain, and improve sleep quality. Preoperative comprehensive education is a relatively novel nursing concept, and this study verifies its effectiveness through empirical research, providing valuable references for clinical practice and exhibiting certain innovation. The sample selection in the study is somewhat representative. By defining clear inclusion and exclusion criteria, eligible patients were screened, reducing the influence of confounding factors. The design of the nursing model is reasonable. The analysis indicators are comprehensive, covering multiple aspects such as surgical indicators, psychological state, pain level, and sleep quality, which can comprehensively evaluate the impact of preoperative comprehensive education. The article is well-structured, logically coherent, and the language expression is relatively accurate, which can clearly convey the content and conclusion of the research. However, there is still room for improvement in some details. For example, in some sentences, appropriate connecting words or transitional words can be added to enhance the logical fluency of the article; the use of some terms or professional vocabulary should be more unified and accurate to enhance the professionalism of the article. In general, the writing and grammar quality of the article is relatively high, but it can still be further improved.

Reply: Thank you for your valuable suggestion. Anesthesia plays a crucial role in the surgical process. However, general anesthesia surgery exerts a relatively significant impact on the elderly patients. Thus, it is essential to adopt appropriate preventive measures to mitigate the associated surgical traumas. This study primarily explores more refined and individualized

nursing approaches to reduce the negative impacts of surgery on patients. Preoperative comprehensive education refers to providing comprehensive education to patients prior to surgery, which is essentially a cognitive guidance that elaborates on the anesthesia methods to be used during surgery and informs patients in advance of various physical reactions that may occur during the postoperative recovery of consciousness. The objective of this education is to psychologically prepare patients and adjust their perceptions of surgery, thereby alleviating tension and eliminating the influence of negative emotions. This study has confirmed through analysis that applying preoperative comprehensive education to general anesthesia surgery for elderly patients can improve postoperative indicators, significantly reduce the occurrence of anxiety and depression, lessen the degree of postoperative pain, and consequently improve the sleep quality of patients. We are delighted that the clinical value, innovation, model design and novelty, comprehensiveness of analysis indicators, rigor of article structure, logical coherence, and accuracy of language expression of this study have received your recognition. We have carefully revised some details, appropriately added conjunctions or transition words to some sentences to enhance the logical flow of the article; employed more unified and accurate descriptions for some professional terms or professional vocabulary to enhance the professionalism of the article, and; invited a senior English editor to further improve the writing and grammatical quality of the article.

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Scientific Significance of the Conclusion in This Manuscript: Grade C (Fair)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: "Influence of preoperative comprehensive education on anxiety, depression, pain, and sleep in elderly patients operated under general anesthesia" aims to explore the impact of preoperative comprehensive education on elderly patients undergoing surgery under general anesthesia in terms of anxiety, depression, pain, and sleep. 163 elderly patients undergoing general anesthesia surgery were selected and divided into a control group (receiving routine nursing) and a research group (receiving preoperative comprehensive education). The results show that compared with the control group, the research group has shorter operation time and consciousness recovery time, better postoperative body temperature recovery. In terms of psychological state, the anxiety and depression scores of the research group decrease more significantly. In terms of pain level, the VAS score of the research group decreases more obviously. In terms of sleep quality, the PSQI score of the research group decreases more, and the incidence of sleep disorders is lower. In addition, the incidence of adverse

events in the research group is also lower than that in the control group. In conclusion, preoperative comprehensive education has a positive impact on elderly patients undergoing general anesthesia surgery, which can improve postoperative indicators, reduce anxiety and depression, alleviate pain, and improve sleep quality. Overall this is a strong paper and the results presented are novel and important. This research design is reasonable and can effectively compare the effects of the two nursing methods. Although the specific statistical methods are mentioned in the "Statistical analyses" section of the article, in the presentation of the chart results, such as Tables 2, 3, and 4, and Figures 1, 2, and 3, the specific statistical methods used are not clearly marked. It is suggested to clearly indicate the relevant statistical methods in the charts so that readers can more intuitively understand the data analysis process. Others, please report how the normality was tested in continuous variables.

Reply: As the number of patients undergoing general anesthesia surgery keeps on rising, optimizing and elevating the overall quality and efficacy of surgical care has gradually become a core issue in the field of surgical nursing. Surgery, as a strong external stimulus, frequently imposes dual physical and mental pressures on patients, which may then trigger adverse stress responses and exert a detrimental impact on the patient's recovery. Hence, it is of utmost importance to explore more refined and individualized nursing approaches to mitigate the negative impacts of surgery on patients. Currently, although the conventional nursing model can promptly respond when complications occur in patients after general anesthesia surgery and take timely measures to ensure patient safety, its effectiveness in promoting rapid awakening of patients and reducing the occurrence of complications is not remarkable, revealing its limitations in application. Previous studies have demonstrated that providing one-on-one preoperative physical therapy education courses for patients undergoing total joint arthroplasty can effectively reduce the postoperative hospital stay and the number of postoperative visits. Therefore, this study proposes to include 163 patients undergoing general anesthesia surgery and conduct a comparative analysis of the impact of preoperative comprehensive education on anxiety, depression, pain, and sleep in elderly patients undergoing general anesthesia surgery to verify its potential clinical advantages. We are truly grateful for your recognition of the novelty and significance of the research results as well as the rationality of the research design. We have supplemented the specific statistical methods employed in Tables 2, 3, 4 and Figures 1, 2, and 3 to enable readers to understand the data analysis process more intuitively. At the same time, we have added in the statistical methods section the approach for performing normality tests on continuous variables.