

We gratefully review all reviewers' comments, Here we answer their questions (the changes suggested are highlighted in the manuscript reviewed).

### Reviewer 1

**Reviewer:** The reviewer suggest the following change to the title of the case report: '*Patellar Reconstruction in Primary Total Knee Arthroplasty for a Patellectomized Patient Using Bone Chips from Routine Cuts: A Novel Surgical Technique*'

**Author's answer:** Thank you for your comment. I agree with your suggestion, so the title will be changed to '*Patellar Reconstruction in Primary Total Knee Arthroplasty for a Patellectomized Patient Using Bone Chips from Routine Cuts: A Novel Surgical Technique*'

### Reviewer 2

**Reviewer:** ...*Would be good and have added value with some intra operative and post operative photographs table comparing and mentioning literature till date...*

**Author's answer:** Thank you for your comment. Unfortunately, intraoperative photographs are not available. Instead, we have endeavored to provide a general illustration of this technique. At the end of the manuscript, we have added a comparative table featuring other published literature. However, we would greatly appreciate any specific suggestions you may have regarding it.

**Reviewer:** ...*The discussion could be modified need to discuss a few reasons why distal femoral condyle cuts were not used for the technique - as described by George et al 2017...*

**Author's answer:** Thank you for your comments. From line 202 to 205, we elaborate on the benefits of this technique: 'We believe that our success might be due to placing the fragmented autograft bone in a press-fit way in the intra-tendon pocket which allowed fitting to patellar tracking, and closing with strong suture to avoid graft migration'. In accordance with your suggestion, we will replace the following sentences in line 180: 'Autograft bone can be obtained from the medial femoral condyle or tibial plateau from the distal cutting[21,23-25]. However, functional outcomes have been heterogeneous, and authors have emphasized the importance of reinforcing sutures to prevent neo-patella migration.' with: 'Autograft bone can be obtained from the medial femoral condyle or tibial plateau from the distal cutting[21,23-25]. *Both techniques are reliable; however, in our specific case, there might have been limitations due to the size of the medial femoral condyle, particularly in cases of severe valgus knee osteoarthritis. Additionally, the authors do emphasize the importance of reinforcing sutures to prevent neo-patella migration.*'

**Reviewer:** ...*Overall well written would be helpful to briefly describe limitations and possible improvement of the technique - to avoid migration of the graft pieces...*

**Author's answer:** Thank you for your comment. We have considered this and believe that it could be beneficial to add the following sentence to the line 215: *Nonetheless, some limitations may arise*

*from a thin and poor-quality tendon of the extensor mechanism, posing a risk of rupture if a pocket is attempted. Therefore, despite the favorable outcomes observed in one case, additional research is essential to determine the efficacy and safety of this technique in a larger prospective cohort.*

### **Reviewer 3**

**Reviewer:** *The manuscript was written good and the subject was interesting. as you know, there are several case reports and case series about this subject and in my opinion, your method is not very different from others (except the material of the patella). I think it's better to submit the manuscript as a technical note or short commentary or increase the number of cases to bring something valuable and new as a case series.*

**Author's answer:** Thanks for your comments. We consider that this could serve as an alternative technique with potential advantages, particularly in terms of lower comorbidity and fewer complications compared to an iliac crest graft or prosthetic materials. Additionally, it enables the utilization of the required bone graft to fill the entire created pocket within the tendon, preventing overstuffing or leaving the pocket unfilled. Nevertheless, we appreciate your suggestion regarding the number of cases. We plan to gather more cases in the future to further strengthen the support for this technique.