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Vineeta Bajaj, Ph.D

Review Editor – JoVE

Dear Dr. Vineeta Bajaj,

We would like to thank you and the reviewers for the comments to improve our manuscript. To address the comments, we have made the following changes as below. We hope we have addressed the reviewers concerns and we look forward to hearing from you regarding our submission. We would be glad to address any further comments or suggestions. Please do not hesitate to call or email me.

Sincerely,



Melissa Chua, M.A.

Line 41: Quotes removed.

Line 75: Patients with spinal pathology are assessed in clinic for eligibility for spinal surgery.

Line 78-81: Spinal pathologies are determined with CT or MRI imaging.

Line 88: Consent to surgery requires that the patient does not consume anything by mouth after the midnight before surgery.

Line 90: The surgeon is not involved in the anesthesia process. The patient is placed under general anesthesia as determined by a trained anesthesiologist, who continues to monitor the patient throughout the surgery.

Line 94: The surgical area is sterilized by scrubbing the area with povoiodine-iodine.

Line 106: Yes, the X-ray is done during the surgery.

Line 109: Electrosurgical dissection is achieved by using a monopolar cautery.

Line 116-119: These steps are highly standard procedures which any trained surgeon will be able to understand and we are unable to further explain these steps.

Line 123: No contrast is needed during surgery.

Line 130: An estimation of the amount of saline solution is included in the note below, roughly 100-500mL.

Line 160: As the focus of this paper is the intraoperative procedure, we have removed the post-operative section which is patient-dependent.

Line 199: One liner titles for figures have been added.