Reviewer's report

Title: Early experience with Single-Incision Laparoscopic Surgery (SILS) for the placement of a gastrostomy in a 10-year-old girl: a case report

Version: 2 Date: 17 April 2012

Reviewer: erwin van der veken

Which of the following following best describes what type of case report this is?: Other

If other, please specify:

new technique for an existing surgical procedure

Has the case been reported coherently?: Yes

Is the case report authentic?: Yes

Is the case report ethical?: Yes

Is there any missing information that you think must be added before publication?: No

Is this case worth reporting?: Yes

Is the case report persuasive?: Yes

Does the case report have explanatory value?: Yes

Does the case report have diagnostic value?: No

Will the case report make a difference to clinical practice?: No

Is the anonymity of the patient protected?: Yes

Comments to authors:

general comments
1. upper half umbilical incision still leaves a (small) scar which will grow with the patient. Maybe you should do it transumbilically in order to have no scar at all
2. reduction of possible injury to intra-abdominal organs is not a good argument in my opinion: conventional open laparoscopy (no Verres needle) with introduction of several other ports under direct vision is as safe as the SILS approach
3. articulated instruments are already on the market for several years (but
expensive), a flexible tip 5 mm laparoscope has just arrived (Endoeye Flex from Olympus)

**Quality of written English:** Acceptable

**Declaration of competing interests:**

I declare that I have no competing interests