Reviewer’s report

Title: Great auricular nerve schwannoma in neck region: a case report with the risk of medical disputes

Version: 0 Date: 12 Jul 2019

Reviewer: Morgan Broggi

Reviewer's report:

The Great auricular nerve (GAN) is a cutaneous branch of the cervical plexus arising from C2 and C3 and innervating the skin of the face over the parotid gland, the mastoid and the skin of the auricola. The authors report what seems the first case of great auricular nerve trunk schwannoma and its management and possible complications.

Some revisions are necessary:

1. In the background
   a. The terminology "annual incidence" is not correct; in the article from where this information was taken, they were referring to the general incidence of this kind of tumors.
   b. The authors correctly report that schwannomas most commonly originate from the VIIIth cranial nerve in the head and neck region, but then they write that this is most common in the parapharyngeal space of the neck region. This information is anatomically incorrect. What do you mean?
   c. In the last sentence, the word schwannoma must be removed after "great auricular nerve" because it is a repetition.

2. In the case presentation:
   a. "No history of smoking or alcoholism" is an irrelevant piece of data in this case presentation.
   b. Why the authors report the presence of subcutaneous nodules (plural) when the lesion was single?
   c. What do they mean by "equal T1 and T2 signal"? Please describe the lesion features on MR or show T1 and T2 in the figures.
   d. There are many misspelling or unclear expressions: what does "external excision" mean? Do you know an "internal excision" technique? And moreover, "Popation tenderness", "Sounding skin", "raction" and many others. Please correct.
e. The authors write that GAN schwannoma was not considered among the possible etiologies of the lesions. Which were the possibilities taken into account by the authors?

f. Which kind of follow-up was performed? What does "regular follow-up was adapted mean"?

3. In the discussion:

a. "Schwannoma was rarely originated from the trunk of the greater auricular nerve rather than the subsequent branches in our reported case". This sentence is not very clear. Wasn't the schwannoma reported in this case originating from the common trunk of the nerve rather than from one of the branches (according to the post-operative deficit)?

b. The authors write that TWO diagnostic evidences were in favor of GAN schwannoma, but then they report three of them. Please rectify this.

c. The authors write that schwannomas are insensitive to radiotherapy. This is not true since radiotherapy and radiosurgery are frequently used to treat this kind of lesions, especially if small (Jane Halliday, Scott A Rutherford, Martin McCabe &amp; Gareth D Evans (2017): An update on the diagnosis and treatment of vestibular schwannoma, Expert Review of Neurotherapeutics).

d. "Aware of patients" is grammatically incorrect.

e. The last sentence of the manuscript is not necessary, since it is a repetition of the one above.

4. English grammar and syntax need to be revised by an English-speaking person

**Are the methods appropriate and well described?**
If not, please specify what is required in your comments to the authors.

Unable to assess

**Does the work include the necessary controls?**
If not, please specify which controls are required in your comments to the authors.

Unable to assess

**Are the conclusions drawn adequately supported by the data shown?**
If not, please explain in your comments to the authors.

Yes

**Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?**
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

Not relevant to this manuscript

**Quality of written English**
Please indicate the quality of language in the manuscript:

Not suitable for publication unless extensively edited

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