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Peter Doshi, PhD
Associate Editor, *The BMJ*
University of Maryland School of Pharmacy
Baltimore, MD 21201

Dr. Doshi,

Thank you for the opportunity to revise and resubmit our manuscript, "Excising the "Surgeon Ego": Progress Made and Paths Forward for Enhancing the Culture of Surgery," provisionally accepted for publication in *The BMJ*. We appreciate the final suggestions from the editorial team, and have incorporated this feedback into a revised version of the manuscript.

Below, we respond to each specific point raised in your provisional acceptance letter, and indicate where we have made corresponding changes to the manuscript. We believe that our manuscript has benefited greatly from the editors' feedback, and we hope that you find the revised manuscript suitable for publication in *The BMJ*. Please let us know if we can offer any additional clarification or make any further edits to the manuscript to help strengthen it and better position its potential contribution to your readership.

Sincerely,

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Yemeng Lu-Myers, MD, MPH
University of Maryland School of Medicine, Baltimore, MD, USA

Amir Ghaferi, MD, MS
University of Michigan School of Medicine, Ann Arbor, MI, USA

Editorial Team Comments

1. The manuscript currently feels a bit more like a situational update than a strong argument. While this balance is on the whole OK, we do feel that you need to include more on the role of systems and on setting actions for improvement.

We appreciate this feedback, and agree that providing an overview of the progress that has been made (as suggested in our title) is valuable. However, we also agree that articulating clear arguments for what needs to be done (the “path forward” in our title) is essential, and so we have added additional clarification and argumentation to this section of the manuscript and adjusted the section title to reflect our emphasis on the “path forward.”

2. Related to the above point, one editor asked: Whose job is it to hold people accountable for their behaviour? The regulatory body (e.g. GMC in the UK)? the trust, the deanery if trainees are involved?

In expanding on our recommendations for actions to be taken, we address this important point by noting specific actions that can be taken by regulatory bodies, academic leadership (i.e., department chairs or deans), as well as peers. We hope that with these clarifications, we articulate a compelling case that holding individuals accountable for overly egotistical behavior is a shared responsibility of all in the surgical arena.

3. In our previous decision letter, we raised concerns that this may not apply to all surgical sub-specialties. Your response was that this may be the case, but there's insufficient data to say. We didn't see that point made in your piece and would like to see brief mention of the point to address any concern among readers wondering whether it's fair to paint all of surgery with the same brush.

We apologize for not articulating this point more clearly in our earlier revision. We now specifically note (on page 3) that although differences across specialties might reasonably be expected, existing data are insufficient to draw substantial conclusions. Thank you for encouraging us to be clearer on this point.

We are grateful for the constructive feedback from the Editorial Team and hope that these revisions and responses have addressed any remaining concerns about the manuscript.