**Recommendation and review**

I have reviewed this work and i can tell that the main content of article is interesting and include very useful information about what to do in case of staghorn kidney stones in severe category patients with ureterosigmoidostomy after radical cystectomy. Despite on this i have the following comments:

1. Authors indicated article type as surgical technique but main content, design etc is not match for that. I think authors must reconsider this work like a *Case Report*. Please watch authors guidelines for case reports how to write correctly etc. In current version for example instead of surgical technique to change it on case-report, after introduction section, instead of surgical technique need to write a Case presentation, instead of Comments write a Discussion and so on.
2. In abstract authors made the reference 1 within introduction part, please delete it in abstract and move it in Introduction section and write about it one or couple sentences.
3. In abstract and whole text manuscript english grammar, spelling need to check for mistakes. Authors must also check abbreviations in the whole text for example TC please change on CT, and during first mention, authors must write a full name after that to use abbreviation like computer tomography (CT). Also abbreviations in the whole text are heterogeneous for example in one place authors use PCNL, and another PNL. Please check all abbreviations in whole text of manuscript and they must be similar everywhere.
4. In Case Presentation section, what antibiotics were used for treatment multi-drug resistant Klebsiella pneumoniae? And did you perform repeat urine culture test after antibiotic treatment?
5. All figures did not contain name and legends. Please add names for all figures and according legends.
6. Authors should write an additional CT scan information: What was the size of staghorn stone for each kidney? And what is density in Hounsfield units (HU) of staghorn kidney stone for each side?
7. What is model of Holmium laser did you use for fragmentation of kidney stone? And what wavelength of laser was used for lithotripsy?
8. What included a conservative management of the post-operative hematoma?
9. Authors performed a stone analysis after operation and how many percents of struvite and apatite component of stone? Please indicate it.
10. In Discussion section authors should add this reference: Palka J, Farooq Z, Anderson BG. Safety of retrograde pyelography for infected ureteral stones. Can J Urol. 2020 Feb;27(1):10130-10134. Since authors mentioned about risk of bacteriemia after retrograde pyelography.

I recommend to revise the article as a case-report considering all my comments and I will review a revised version of manuscript with pleasure.