

Author's replies to the question and suggestions of reviewer and editor:

1. Please provide the decomposable figure of Figures, whose parts are movable and editable. So you can put the original pictures in PPT and submit it in the system.

Reply: Done. Figures 1-3 are put into the PPT file.

2. Your manuscript should be prepared with Word-processing Software, using 12 pt Book Antiqua font and 1.5 line spacing with ample margins.

Reply: Done.

3. Please provide specific point-to-point replies to each reviewer's comments.

Reply: Done.

4. Please revise your manuscript according to the "guideline" and "format".

Reply: Done.

5. Name of Journal: *World Journal of Clinical Cases*

Manuscript NO: 46956

Manuscript Type: CASE REPORT

Title: A case report of gastrointestinal infection-related disseminated intravascular coagulation mimicking Shiga toxin-mediated hemolytic uremic syndrome: implications of classical clinical indexes in making the diagnosis

Running title: Classical index in diagnosing HUS

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7. Conflict-of-interest statements

The authors of this manuscript have no conflict-of-interests to disclose.

Authors' contributions

Li XY, doctor-in-charge, conception and writing up; Mai YF, attending doctor and data collection; Huang J, counseling and critical review; Pai P, critical review and revision.

Data sharing statement:

Written informed consent was obtained from the reported patient.

8. Core tip:

Thrombotic microangiopathy is a severe and challenging disorder. There is overlap between the clinical presentation and pathophysiology of thrombotic thrombocytopenic purpura, hemolytic uremic syndrome, and disseminated intravascular coagulation. Upon reviewing of literature, we use a case to illustrate the characteristics and utility of classical clinical indexes of schistocytes, LDH, platelet count and coagulation profile in parallel with more specific investigations of ADAMTS13, complement profile, and isolation of Shiga toxin-producing *Escherichia Coli*, in an attempt to facilitate early recognition and diagnosis of TMA.

9. Citation:

Li XY, Mai YF, Huang J, Pai, P.

A case report of gastrointestinal infection-related disseminated intravascular coagulation mimicking Shiga toxin-mediated hemolytic uremic syndrome: implications of classical clinical indexes in making the diagnosis
World J Clin Cases. 2019.

10. Case presentation

Reply: **Format revised according to suggestions and in reference of published articles.**

Chief complaints

History of present illness

History of past illness

Physical examinations upon admission

Laboratory examinations

Imaging examinations

Final diagnosis

Acute gastroenteritis complicated by DIC

Treatment

Outcome and follow-up

The patient was feeling better and was discharged at day 11 after condition further stabilized. Three months later, her serum creatinine level at follow-up visit was 78 μ mol/L.

11. Styles of reference

Reply: the reference style of the *World Journal Gastroenterology*, a sister Journal of *World J Clin Cases* was adopted. However, the DOI number is unobtainable for reference 2, which was published in German language in 1955.