

Reviewer #1

This manuscript intend to provide a comprehensive literature review including and critically analysing the papers published about the radiologic findings during SARS-CoV2 infection. The Authors performed a systematic review of the literutue using appropriate methods of selection. All of the imaging procedures have been analysed, including less used but still interesting techniques, such as sonography and PET. The Results have been clearly reported. The main strenght of this paper are its quality and style. As a weakness, it should be underline that similar manuscripts on this topic exist about this topic. However, this reviewer thinks that this manuscript deserve publication.

Specific comments: 1) There is very recent paper on this topic that the Authors could consider to discuss (PMID: 32346790)

2) The Authors speculated about the possible role of sonography. In additon to what the Authors already report, sonography might play a wider role. There s another recent paper (PMID: 32294795) which the Authors could consider to provide a broader speculation on this topic.

Thank you very much for suggesting these papers. We have reviewed in detail and incorporated each of them into our paper under “Other Modalities”.

Reviewer #2

The review might be of great value for the science and practice of radiologists in the developing field of COVID-19.

Nevertheless, I have some minor comments: 1) Is this review systematic? If yes, please indicate that in the title and in the aim. **Although the time period analyzed was systematically reviewed, because of the fast moving COVID crisis, randomly acquired recent articles were also added for more updated and fuller context.**

Therefore, the overall review presented isn't purely systematic and we have decided to keep the title as is.

2) Include aim of the paper in the body manuscript. We have addressed this at the end of the first paragraph in the introduction, starting with "The intention of this study..."

3) I suggest to include more subheadings to logically separate clusters of paragraphs. We have now added additional subheadings throughout the body of the manuscript to help separate long clusters of paragraphs. Thank you for this suggestion.

4) Please a sentence that state all the figures are original and you have the right of using them. Indicate the source of the X-rays and radiographies. All images in the paper are original figures from our institution; we've added this note in manuscript when referencing them as well as in the figure legend and captions.

Reviewer #3

The aim of this review was to report the published literature for the range of radiographic findings present in patients suffering from COVID-19 infection. The published literature is increasing rapidly by days; therefore, the content of the review will be outdated in a very short period.

Thank you very much for pointing out these articles. We've reviewed all of these papers per your suggestion and included them in our manuscript in detail, under the following sections.

Very recently, the Canadian Society of Thoracic Radiology/Canadian Association of Radiologists released a consensus statement regarding chest imaging in suspected and confirmed COVID-19. It should be cited: Dennie C, et al. Canadian Society of Thoracic

Radiology/Canadian Association of Radiologists Consensus Statement Regarding Chest Imaging in Suspected and Confirmed COVID-19 [published online ahead of print, 2020 May 8] [published correction appears in Can Assoc Radiol J. 2020 May 18;846537120931222]. Can Assoc Radiol J. 2020;846537120924606. doi:10.1177/0846537120924606. **Included under “Role of the Radiologist” subheading**

Moreover, a systematic review of chest imaging findings in COVID-19 has already been published [Sun Z, Zhang N, Li Y, Xu X. A systematic review of chest imaging findings in COVID-19. Quant Imaging Med Surg. 2020;10(5):1058-1079. doi:10.21037/qims-20-564] **Included under “Role of the Radiologist” subheading**

Another article describes the radiographic findings in a large series of patients with COVID-19 pneumonia: it must be included in this review [Vancheri SG, et al. Radiographic findings in 240 patients with COVID-19 pneumonia: time-dependence after the onset of symptoms [published online ahead of print, 2020 May 30]. Eur Radiol. 2020;1-9. doi:10.1007/s00330-020-06967-7]. **Included under “CXR Highlights” subheading**

The role of lung ultrasound should not be overlooked: -Soldati G, et al. On Lung Ultrasound Patterns Specificity in the Management of COVID-19 Patients [published online ahead of print, 2020 May 8]. J Ultrasound Med. 2020;10.1002/jum.15326. doi:10.1002/jum.15326 **Included under “Other modalities” subheading**

Musolino AM, et al. Lung Ultrasound in Children with COVID-19: Preliminary Findings [published online ahead of print, 2020 May 3]. Ultrasound Med Biol.

2020;S0301-5629(20)30198-8. doi:10.1016/j.ultrasmedbio.2020.04.026 **Included under “Other modalities” subheading**

As for pediatric patients, another report on 9 children is available online: Lu Y, et al. Clinical characteristics and radiological features of children infected with the 2019 novel coronavirus [published online ahead of print, 2020 May 1]. Clin Radiol. 2020;S0009-9260(20)30166-5. doi:10.1016/j.crad.2020.04.010 **Included in “Specific Populations” subheading**

Science Editor

1 Scientific quality: The manuscript describes a review of radiographic findings in coronavirus disease 2019 (COVID-19). The topic is within the scope of the WJR. (1) Classification: Grade B, Grade A and Grade C; (2) Summary of the Peer-Review Report: The authors reported the published literature for the range of radiographic findings present in patients suffering from COVID-19 infection, but some references should be added. The questions raised by the reviewers should be answered; and (3) Format: There are 3 figures. A total of 63 references are cited, including 62 references published in the last 3 years. There are no self-citations. 2 Language evaluation: Classification: Grade A, Grade A, and Grade B. The authors are the native English speakers. 3 Academic norms and rules: The authors provided the signed Conflict-of-Interest Disclosure Form and Copyright License Agreement. No academic misconduct was found in the CrossCheck detection and Bing search. 4 Supplementary comments: This is an invited manuscript. The topic has not previously been published in the WJR. 5 Issues raised: (1) The “Author Contributions” section is missing. Please provide the author contributions; **We have added the author contributions section on the title page of our manuscript.**

(2) The authors did not provide original pictures. Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor **We have resubmitted our revision with original ppt files so that portions of our figures can be editable.**

(3) PMID and DOI numbers are missing in the reference list. Please provide the PubMed numbers and DOI citation numbers to the reference list and list all authors of the references. Please revise throughout. **We have included both PMID and DOIs for all references when available in Reference section, at the end of each citation.**

6 Re-Review: Required. 7 Recommendation: Conditional acceptance.