

Dear Editor:

Thank you for carefully reviewing our manuscript titled “Silver dressing in the management of an infant's urachal anomaly infected with MRSA: A case report and literature review” for possible publication in the *World Journal of Clinical Cases*. We are grateful to you and the reviewers for the constructive critiques. We have revised the manuscript, **highlighting our revisions in red**, and have attached point-by-point responses to the reviewers' comments below.

Thank you for your consideration and further review of our manuscript. Please do not hesitate to contact us with any further questions or recommendations.

Yours sincerely,

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Responses to the Reviewers' Comments:

Reviewer #1: Specific Comments to Authors: Firstly, thank you for opportunity to review very interested article.

1. The title reflect the main subject about silver dressing in infant's urachal anomaly infected with MRSA, title was clear and easy to understand.
2. The abstract summarize and reflect the work described in the manuscript.
3. The key words reflect the focus of the manuscript.
4. The manuscript adequately describe the background, present status, and significance of the study. The authors explain pathophysiology of urachus and management in introduction section.
5. The manuscript describe detail of case information in adequate detail, study subjects were clear but not demonstrate IRB number or text to human ethics consideration.
6. The research objectives achieved by the experiments used in this study. I suggest the authors revise Figure 2, the position was incomplete.
7. The manuscript interpret the findings adequately and appropriately, highlighting the key points concisely, clearly, and logically.
8. The manuscript cite appropriately the latest, important and authoritative references in the introduction and discussion sections.

Response: Thank you for your comment. In response to question 5: first of all, we have searched a large number of documents proving that silver-dressing can be used in newborns, and parents of the patient were about the risk and solution of the silver-dressing. Besides, informed written consent was obtained from the patient's parents for publication of this report and any accompanying images. In addition, this study has passed the review of the hospital ethics committee and we have the IRB number of this study. Thank you for your constructive suggestion. In response to question 6: We have made appropriate adjustments to Figure 2 and hope to meet your requirements.

Reviewer #2: Specific Comments to Authors: Thank you for your submission. Your manuscript was an interesting read. But the manuscript is not well organized and does not follow a clear flow. Please see the following comments about how your data could be further clarified:

- The text of the manuscript needs to be edited in terms of writing and grammar.

Response: Thank you for your hard work and review of our paper. We have edited writing and grammar of the text again.

- None of the rules for writing an article have been followed.

Response: Thank you for your comments. We revised the article according to the article writing and publication requirements of the magazine.

- The description given in the case summary section of the abstract is too much and unnecessary. The most important finding of this case should be explained here.

Response: Thank you for the constructive question. We have streamlined the case description in the summary section. In addition, we also put forward the most important findings of this research in this section. **Our revisions are highlighted in red.**

- The text explains that the best way to diagnose this type of abnormality and infection in this area is the ultrasound method, but no ultrasound image has been provided to indicate this evidence.

Response: Thank you for this reminder. We apologize that we did not provide ultrasound image in our manuscript. However, since the patient was hospitalized in the NICU, bedside ultrasound was used. The ultrasound report only described the results of the report but did not provide us with images. We have uploaded an ultrasound report in the supplementary materials to prove the authenticity of the condition. Hope you can understand.

- The title of the manuscript refers to the silver dressing and MRSA infection. But in the introduction, no explanation is given about the silver dressing and the reason for using this type of dressing. It is also necessary to explain MRSA infection and how to treat this type of infection.

Response: We appreciate your suggestion. Accordingly, we have revised some details and appropriately explained MRSA infection and how silver dressing treat this type of

infection. However, more explanations about how to treat MRSA infection with silver dressing are showed in the Discussion section. **Our revisions are highlighted in red.**

- The authors have mentioned Figures 3 and 4 in the follow-up section of the case present, but there were no Figures in this regard.

Response: Thank you for the constructive question. We have added the Figures 3 and 4 into the manuscript. Besides, we provide a the ultrasound report in the supplementary material.

- Studies have shown that one of the side effects of silver dressing is anemia and electrolyte imbalance. Have you been checked and followed up after treatment?

Response: Thank you for the constructive question. The patient was followed up regularly after discharge, and no symptoms related to anemia and electrolyte imbalance were found, and all laboratory examinations showed normal.

- In the discussion section, there is no discussion of silver dressing and MRSA infection based on previous studies.

Response: We appreciate your suggestion. Accordingly, we have added some details based on previous studies about silver dressing and MRSA infection in the Discussion section. **Our revisions are highlighted in red.**

- The authors have suggested in the conclusion section that (Thus, we suggest that silver sulfate dressings can be safely and successful in managing wound infection within 7 days.). The question is, based on what source and study do the authors make such a proposal?

Response: We apologize for using this incorrect expression. What we want to express is that for wounds infected by MRSA, the use of silver within a certain period of time is safe and effective. We have revised our expression in the manuscript. **Our revisions are highlighted in red.**

ABBREVIATIONS

(1) Title: Abbreviations are not permitted. Please spell out any abbreviation in the title.

Response: Thank you for your suggestion. We have spell out abbreviation in the title.

(2) Running title: Abbreviations are permitted. Also, please shorten the running title to no more than 6 words.

Response: We appreciate your suggestion. We have shortened the running title to 6 words.

(3) Abstract: Abbreviations must be defined upon first appearance in the Abstract. Example 1: Hepatocellular carcinoma (HCC). Example 2: Helicobacter pylori (H. pylori).

Response: Thank you for this reminder. We have already defined the abbreviations that appear in the Abstract section when they first appear.

(4) Key Words: Abbreviations must be defined upon first appearance in the Key Words.

Response: Thank you for this reminder. There are no abbreviations in our Key Words section.

(5) Core Tip: Abbreviations must be defined upon first appearance in the Core Tip. Example 1: Hepatocellular carcinoma (HCC). Example 2: Helicobacter pylori (H. pylori)

Response: Thank you for this reminder. There are no abbreviations in our Core Tip section.

(6) Main Text: Abbreviations must be defined upon first appearance in the Main Text. Example 1: Hepatocellular carcinoma (HCC). Example 2: Helicobacter pylori (H. pylori)

Response: Thank you for this reminder. We have already defined the abbreviations that appear in the Main Text section when they first appear.

(7) Article Highlights: Abbreviations must be defined upon first appearance in the Article Highlights. Example 1: Hepatocellular carcinoma (HCC). Example 2: Helicobacter pylori (H. pylori)

Response: Thank you for this reminder. We have already defined the abbreviations

that appear in the Article Highlights section when they first appear.

(8) Figures: Abbreviations are not allowed in the Figure title. For the Figure Legend text, abbreviations are allowed but must be defined upon first appearance in the text.

Example 1: A: Hepatocellular carcinoma (HCC) biopsy sample; B: HCC-adjacent tissue sample. For any abbreviation that appears in the Figure itself but is not included in the Figure Legend textual description, it will be defined (separated by semicolons) at the end of the figure legend. Example 2: BMI: Body mass index; US: Ultrasound.

Response: Thank you for this reminder. There are no abbreviations in our Figures.

(9) Tables: Abbreviations are not allowed in the Table title. For the Table itself, please verify all abbreviations used in tables are defined (separated by semicolons) directly underneath the table. Example 1: BMI: Body mass index; US: Ultrasound.

Response: Thank you for this reminder. There are no abbreviations in our Tables.

EDITORIAL OFFICE'S COMMENTS

Authors must revise the manuscript according to the Editorial Office's comments and suggestions, which are listed below:

(1) Science editor:

The manuscript fully and appropriately articulates the findings of this study, highlights the focus, is concise, clear, and logical. But there are still some points need improvements. The text of the manuscript is subject to writing and grammatical modifications and follows the journal's writing guidelines. Some methods and results mentioned in this paper do not have corresponding release figure, such as the ultrasound image has not been provided. And the treatment methods used in the article are not clearly explained.

Response: We appreciate your suggestion. Firstly, We have edited writing and grammar of the text again, according to the journal's guidelines. Besides, we have edited our figures, and we added Figures 3&4. We apologize that we did not provide ultrasound image in our manuscript. However, since the patient was hospitalized in the NICU, bedside ultrasound was used. The ultrasound report only described the results of the report but did not provide us with images. We have uploaded an ultrasound report in the supplementary materials to prove the authenticity of the

condition. Lastly, we edited our treatment methods in the article.

(2) Company editor-in-chief:

I have reviewed the Peer-Review Report, the full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Clinical Cases, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. Before final acceptance, uniform presentation should be used for figures showing the same or similar contents; for example, "Figure 1 Pathological changes of atrophic gastritis after treatment. A: ...; B: ...; C: ...; D: ...; E: ...; F: ...; G: ...". 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.

Response: We appreciate your suggestion. We will upload the original figure documents using PowerPoint.

Finally, we have addressed all language issues in the manuscript and will submit the revised manuscript accordingly.