

ROUND 1

Dear Editor,

Thank you for your and reviewers' critical comments on our previous manuscript (NO: 77389). These comments are all valuable for revising and improving our paper. Based on these comments and suggestions, we have made careful revision on our original manuscript. **All changes for the revised manuscript are highlighted in red.** We sincerely hope this manuscript will be finally acceptable to be published on World Journal of Clinical Cases. Our point-by-point responses to the editors and reviewers' comments/questions are as follows.

Response to Reviewer: 1

Comments to the Author

Thank you for your hard work and contributions in this area of research.

Q1-The abstract section can improve – add a focus point in the abstract section.

A: Thank you for your kind suggestions. We have added a **Core Tip** in the abstract section in the revised manuscript (line 60-65).

Q2-The report confirms that a normal chest... Rewrite the conclusion (in the abstract) in a more straightforward form.

A: Thank you for your kind suggestions. According to your advice , the CONCLUSION (in the abstract) has been rewritten in the revised manuscript.

Q3-Since the end of 2019, Coronavirus disease-2019 (COVID-19)... No new information. Need to add more recent insights.

A: Thank you for your kind suggestions. We have added more recent insights in the INTRODUCTION section by reviewing relevant literature.

Q4-Since the end of 2019, Coronavirus disease-2019 (COVID-19) ...This paragraph can be extended.

A: Thanks for your kind comments. According to your advice, this paragraph has been extended.

Q5-Authors are suggested to use the full form when used for the first time throughout the manuscript.

A: Thank you for your suggestions. The error throughout the manuscript have been checked and corrected accordingly in revised manuscript.

Q6-The introduction section is poor and concise.

A: Thank you for your kind comments. The introduction section has been rewritten in the revised manuscript.

Q7-Case presentation: Can include some more biochemical parameters.

A: Thank you for your kind comments. We have added a summary table with the laboratory findings in the **Laboratory examinations section**(line 287).

Q8-Figures presentation is up to mark.

A: We really appreciate your careful review. Figures presentation have been checked and corrected carefully in revised manuscript to ensure marking.

Q9-The discussion is good. The discussion section can improve by including the data from other sources about related works.

A: Thank you very much for your kind suggestions. We have added the data from other sources about related works by reviewing relevant literature to improve discussion section in revised manuscript.

Q10-The conclusion needs to address future perspectives.

A: Thanks for your kind comments. We have added future perspectives in this area of research in revised manuscript.

Q11-Spacing, punctuation marks, grammar, and spelling errors should be reviewed thoroughly. I found so many typos throughout the manuscript.

A: We really appreciate your careful review. Spacing, punctuation marks, grammar, and spelling errors have been checked and corrected carefully in

revised manuscript.

Response to Reviewer: 2

Comments to the Author

Thank you for your hard work and contributions in this area of research.

Q1-The authors present the case of an infant diagnosed with COVID-19 with respiratory and digestive symptoms and epidemiological history (parents with confirmed dx.) but with chest CT without significant findings. - The pediatric population can present up to 20% of hospitalized cases, normal findings. - In my opinion, the chest tomography shows a fine and diffuse reticular interstitial thickening. In such a case it would not be a normal chest tomography. I suggest consulting the images with a radiology specialist. - The resolution of the images should be improved.

A: We really appreciate your careful review. Thank you for your kind comment.

According to your advice , We consulted with two chief radiologists who agreed that although the patient was underinspiration, it was a roughly normal chest CT image with some subpleural artifacts. Given the prudent attitude of the paper, the radiologist helped us sharpen the edges of chest CT images to reduce the distraction of artifacts.

ROUND 2

Dear Editor,

Thank you for your and reviewers' critical comments on our previous manuscript (NO: 77389). These comments are all valuable for revising and improving our paper. Based on these comments and suggestions, we have made careful revision on our original manuscript. **All changes for the revised manuscript are highlighted in red.** We sincerely hope this manuscript will be finally acceptable to be published on World Journal of Clinical Cases. Our point-by-point responses to the editors and reviewers' comments/questions are as follows.

Response to Reviewer

Comments to the Author

Thank you for your hard work and contributions in this area of research.

Q1-The abstract section can improve – add a focus point in the abstract section.

A: Thank you for your kind suggestions. We have added a **Core Tip** in the abstract section in the revised manuscript .

Q2-The report confirms that a normal chest... Rewrite the conclusion (in the abstract) in a more straightforward form.

A: Thank you for your kind suggestions. According to your advice , the **CONCLUSION** (in the abstract) has been rewritten in the revised manuscript.

Q3-Case presentation: Can include some more biochemical parameters.

A: Thank you for your kind comments. We have added a summary table with the laboratory findings in the **Table 1 Some blood test of the patient**.

Q4-The discussion is good. The discussion section can improve by including the data from other sources about related works.

A: Thank you very much for your kind suggestions. We have added the data from other sources about related works by reviewing relevant literature to improve discussion section in revised manuscript.