

26 May 2021

Dear Editors,

Regarding our submission to your journal, thank you very much for the invitation to re-submit our manuscript "Thoracic Imaging Outcomes in COVID-19 Survivors" for consideration of publication in the World Journal of Radiology. As requested, I provide here a response to the original reviewer comments.

We thank the reviewers for the helpful and constructive critique of our work. We have carefully considered all the points raised. Substantial modification to the submission has been conducted and we confirm that we have addressed all the potential concerns. In the sections below we respond to each and every one of the points raised, describing where changes have been made in the revised manuscript.

#### Reviewers #1

In this paper, various imaging techniques, including CXR, CT, LUS and MRI, have been reviewed in the follow up of "long COVID" patients. Generally, the topic is good and the language is acceptable. However, there still some issues needed to be resolved. First, several tables or figures are needed to conclude in the review. Second, authors not only reviewed the follow up and prognosis effectiveness in the use of these thoracic imaging, but also mentioned the diagnosis value of these techniques in COVID patients, which deviated from the topic. Thus, some more substances focused on "long COVID" are encouraged to be added.

#### Response:

Thank you, we appreciate the reviewer for the positive comments on our work. We addressed this by adding a table that summarises the major findings of thoracic imaging tools in COVID-19 survivors. The data on long COVID are included in our review with the scope of our review "imaging findings in COVID-19 survivors". Long COVID is not the main focus of our review. Also, Long COVID is a relatively new topic and there is no more data is out there in regard to our review aim.

#### Reviewers #2

- The author reviewed the publication about "Thoracic Imaging Outcomes in COVID-19 Survivors". But the content was not focused on the effect of thoracic Imaging Outcomes on COVID-19. 1. The content on page 5 "Created in 1971, computed tomography (CT) scanners have revolutionised the many aspect of clinical practices and training (28). CT employs a rotating x-ray machine assisted by a computer programme to produce 3-D images of the internal organs, affording a relatively higher sensitivity, fast and detailed cross-sectional diagnostic images compared with the conventional superimposed, 2-D scans of the CXR. " should be deleted.

#### Response:

We addressed this comment by deleting this sentence.

- 2. The content on page 6 "LUS is also relatively more accessible because of the inherent portability and bedside availability, making it a technique of choice where timely assessment of lung complication is needed especially in patients with severe or unstable health conditions (37)" was not focused on COVID-19.

Response:

We thank the reviewer, this statement focused on COVID-19 but was not clear, we have adjusted this by adding COVID-19.

3. The author should review the publications widely, and collect the data about the sensitivity and specificity, and make a meta-analysis.

Response:

This is a mini narrative review, and not specifically designed to do meta-analysis.

**Editor comments:**

- This is an invited manuscript. No financial support was obtained for the study. 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;

Response:

Thank you, we have added this to the paper.

- (2) 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;

Response:

Thank you, we have added this to the paper.

- (3) Please add figure/table to this review; and

Response:

Thank you, we have added a table as requested.

- (4) Please provide the ORCID for the author “Reynie Purnama Raya”. 6 Recommendation: Conditional acceptance.

Response:

Thank you, this is the ORCID: <https://orcid.org/0000-0002-4548-6820>

We look forward to hearing the outcome of final acceptance, and thank you once again for the opportunity to revise our work.

Jaber Alqahtani