

**Reviewer #1:** Authors In the study: "Inflammatory Response in Confirmed Non-Diabetic Foot and Ankle Infections: A Case Series with Normal Inflammatory Markers", the authors aimed to assess the diagnostic accuracy of inflammatory markers such as white cell count and C-reactive protein as a diagnostic tool in suspected foot and ankle infections in the non-diabetic population. The hypothesis of the study is interesting, but, unfortunately, in this form it cannot be published, but I really recommend to the authors to take into consideration some remarks, and then resubmitted it, because has a good potential to become an interesting article.

1. The introduction is too short. You should reconsider it and add at more paragraphs about the state of the art of non-Diabetic Foot and Ankle Infections.

**Response:**

Thank you for your comment. The introduction section has been re-written embedding new lines (from page 3 line 20 to page 4 line 18) with emphasis on difference in post-surgical foot and ankle infections in the diabetic and non-diabetic populations as well as a more detailed approach for differentiation between surgical wound complications and infections in terms of clinical examination and novel imaging modalities.

2. Page 3, lines 19-20: "Most of the literature addressing osteomyelitis (OM) of the foot and ankle focuses on patients with diabetes mellitus (DM)." - add more paragraphs after this sentence, related with some representative studies.

**Response:**

Thank you for your comment. Page 3 line 20 to page 4 line 4 has been added.

3. Page 4, lines 8-10: "Another consideration is that CRP levels might not be elevated in a subset of patients with low virulent pathogens specifically coagulase negative Staphylococcus as well as fungal infections." – more data is also needed here.

**Response:**

Thank you for your comment. Page 5 line 3-6 has been added to supplement that statement.

4. The discussion section is confusing, and the data is simply listed but not correlated with each other. It should be completely re-organized.

**Response:**

Thank you for your comment. The discussion section has been completely re-organised as requested. We hope it will have a better flow and structure now.

5. Page 7, lines 22-23: "Most of the literature addressing OM of the foot and ankle focuses on patients with DM" – this sentence is the same as in introduction.

**Response:**

Thank you for your comment. This sentence has been omitted and has been replaced by page 8 line 20-21.

6. Even if Conclusions section is not mandatory, I recommend the authors to include it, in order to summarize their main results and also to mention their perspectives.

**Response:**

Thank you for your comment. A conclusion section has been added at the end of the manuscript highlighting the take-home message of our study

7. The references were superficially chosen and are too few for a study. Try to have at least 40 references, most of them from the last 5 years

**Response:**

Thank you for your comment. There are now 40 references with all newly added reference within the past 5 years

**Reviewer #2:** I think the manuscript is very interesting for the scientific community. the topic is described in detail. very clear title, clear materials and methods demonstrate the efficacy of the study. conclusions and discussion analyses the study and reports the results in a good manner

**Response:** We are grateful for your review. Our best regards