

Comments to reviewers

Thanks for the reviewing our manuscript and giving us chance to improve manuscript. We hope you will find the comments and revised manuscript in order.

Thanks

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: Thanks for the invitation of reviewing this manuscript. I hope my comments can improve this manuscript further.

Comment 1): Would authors explain the nature of this study? Is this a retrospective or prospective study? The following information appear not consistent. Manuscript Type: Retrospective Study “We conducted an audit of the radiation dose from CTCA in children with KD. “ “This observational study was carried out during the period December 2013 - February 2018. The study was approved by Departmental Publication Review Board (RDG/EC/Pub/27 dated July 03, 2020). Written informed consent was obtained from the parents.”

Response: We thank the reviewer for the suggestion. We have corrected in revised manuscript. This study was a review of records during the period December 2013- February 2018 and manuscript was approved by Departmental Review Board.

Comment 2): The reference number appears mixing up. The ICRP 103 is reference 20. Please verify the referencing accordingly. “conversion factors recommended by ICRP 103 (21) and analysis of radiation exposure across groups”

Response: We apologize for this oversight error. Corrected in revised manuscript.

Comment 3): The methodology does not contain information on IV contrast agent.

Response: Suggestion incorporated in revised manuscript.

Comment 4): Although no complicated statistical calculation involved, it should still contain “Statistical analysis” section in the methodology.

Response: Suggestion incorporated in revised manuscript.

Comment 5): There’s typo for the Brand name. (Somatom Definition Flash, Siemens, Erlangen, Germany) CARE Dose4D (Seimens, Erlangen, Germany)

Response: Suggestion incorporated in revised manuscript.

Reviewer #2:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: Authors present radiation dose as reported by the scanner console for a cohort of 85 children with Kawasaki disease undergoing computed tomography coronary angiography. Roughly 1 mSv was indicated and deemed acceptable.

Comment 1): I urge the authors to review relevant literature in the Introduction instead of in Discussion (Table 3). Please also add this recent one: Borhanuddin BK, Latiff HA, Yusof AK. CT coronary angiogram in children with Kawasaki patients: experience in 52 patients. Cardiology in the Young. 2022 Dec;32(12):1994-8.

Response: Brief literature review added in the introduction with detailed explanation in discussion section.

Suggested reference added at number 31.

Specific comments and minor edits:

Comment 2) ABSTRACT, Methods: “across the groups” -> “across the age groups”?

Response: Suggestion incorporated in revised manuscript.

Comment 3): ABSTRACT&Results: “among children in the other groups” -> “between the other groups of children”?

Response: Suggestion incorporated in revised manuscript.

Comment 4): Introduction: “non-visualization” -> “lack of visualization”?

Response: Suggestion incorporated in revised manuscript.

Comment 5): Materials and methods, CTCA technique & Discussion: “achieve low radiation exposures” -> “minimize radiation exposures”?

Response: Suggestion incorporated in revised manuscript.

Comment 6): Materials and methods, CTCA technique: “Care kV” -> “CARE kV”?

Response: Suggestion incorporated in revised manuscript.

Comment 7): Materials and methods, CTCA technique: “mAs values ranged between...” -> “current-time product ranged between... mA.s”?

Response: Suggestion incorporated in revised manuscript.

Comment 8): Results: “the increasing age” -> “increasing age”? “the age groups” -> “age groups”?

Response: Suggestion incorporated in revised manuscript.

Comment 9): Discussion: “Total 85 children...” -> “In total...”?

Response: Suggestion incorporated in revised manuscript.

Comment 10): Discussion: “CTCA demonstrated...” -> “CTCA can visualize...”?

Response: Suggestion incorporated in revised manuscript.

Comment 11): Discussion: “This is clearly unacceptable in children.” Can you please elaborate the criterion here for “acceptable”?

Response: . The above mentioned statement was in reference to radiation exposure on 64-slice CT scanner and in comparison to invasive catheter angiography and current generation dual source/ higher slices CT scanners. Though there are no criteria to define limits of radiation dose in children to call “acceptable”, authors are of the opinion every possible method should be used to reduce radiation exposure in children as per ALARA (as low as reasonably achievable) principle. And this has elaborated in the text with addition of relevant reference at number 24..

Comment 12): Discussion: “lowering kVp and CARE Dose4D for tube current” Is the purpose here “for tube current”? Consider rephrase.

Response: lowering kVp and CARE Dose4D for tube current: this has been now explained in the revised text in discussion section as “We have used adaptive prospective electrocardiography (ECG)-triggered sequence with tube current modulation, lower tube voltage (80 kVp) and optimized system calculated tube current using CARE Dose-4D for radiation reduction.”

Comment 13): Discussion: “large area coverage” -> “large field of view”?

Response: Suggestion incorporated in revised manuscript.

(1) Science editor:

Comment: The manuscript has been peer-reviewed, and it's ready for the first decision.

(2) Company editor-in-chief:

I have reviewed the Peer-Review Report, 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 Pediatrics, 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. Authors are required to provide standard three-line tables, that is, only the top line, bottom line, and column line are displayed, while other table lines are hidden. The contents of each cell in the table should conform to the editing specifications, and the lines of each row or column of the table should be aligned. Do not use carriage returns or spaces to replace lines or vertical lines and do not segment cell content. Before final acceptance, when revising the manuscript, the author must supplement and improve

the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript. To this end, authors are advised to apply a new tool, the RCA. RCA is an artificial intelligence technology-based open multidisciplinary citation analysis database. In it, upon obtaining search results from the keywords entered by the author, "Impact Index Per Article" under "Ranked by" should be selected to find the latest highlight articles, which can then be used to further improve an article under preparation/peer-review/revision. Please visit our RCA database for more information at: <https://www.referencecitationanalysis.com/>.