

Editor-in-Chief
August 10th, 2019.

Dear Dr. Jin-Lei Wang,

We appreciate review process and thank you for sharing the reviewer's feedback. Tuberculosis septic shock is a rare entity and hence our case series will have significant contribution to literature.

We have responded to the reviewers' comments and have accommodated most. We have enumerated them in the following page. There are no major addition. We have highlighted them in the comment section of manuscript. For the better flow in case presentation, we have merged the following section of, Imaging examinations, multidisciplinary consultation, treatment and outcome.

The manuscript has been read and approved by all the authors, the requirements for authorship have been met, and each author believes that the manuscript represents honest work.

Sincerely,

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Comment1:

Criteria for confirmation of Tuberculosis septic shock should be outlined before cases presentation.

Author's response:

Tuberculosis septic shock has been defined prior to case presentation and subsequently the criteria for TBSS have been included in each illustrated case.

Comment 2:

The authors do not used SI units in the manuscript (pound is used for weight, Fahrenheit is used for temperature).

Author's response:

We have edited the manuscript to include SI units

Comment 3:

Any abbreviation (e.g. BAL) when appear for first time should be written in full term.

Author's response:

The terminology is first described in the presentation for the case 2. The full term for BAL is included as Broncho alveolar lavage.

Comment 4:

The citation (Kethireddy et al) should be followed by the year (Kethireddy et al., 2013).

Author's response:

We included the changes in manuscript. In two instance citation have been addressed as *Kethireddy et al., 's* . Give the approstrophy, reading of '2013' were excluded for laanguage correction.

Comment 5:

Corrections: ant-TB regimen = anti-TB regimen, NAA = NAAT

Author's response:

Correction have been accommodated