

August 3, 2020

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 57943-Revised Manuscript.doc).

Title: The Predictive Value of Serum Cystatin C on Risk of Mortality in Severe and Critically Ill Patients with COVID-19

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Name of Journal: World Journal of Clinical Cases

Manuscript NO: 57943

The manuscript has been improved according to the suggestions of reviewers:

Major concerns:

1. Research Ethic Committee approval was not mentioned in the Methods.

On page 5 of the manuscript, at the end of "**Materials and Methods**", we have mentioned the "**Institutional review board statement**".

2. The authors may consider reporting their manuscript according to international guidelines of good quality reporting with a TRIPOD checklist for prediction model.

We have already revised the paper accordingly.

3. The information of the number of severe patients and the number of critical patients with COVID-19 should be mentioned in Table 1 or in the Results. Other comments for this review.

On page 6 of the manuscript, at the beginning of "**Results**", we have added the number of severe patients and the number of critical patients with COVID-19. In addition, at the end of the manuscript, we have added the number of critically ill patients again in "Table 1. Baseline Clinical Characteristics"

4. In the Results, the authors may consider reporting the timing of the cystatin c examination in their results, ex. within 12 hours, 24 hours, or longer after the diagnosis of severe and critically ill patients with COVID-19.

On page 6 of the manuscript, at the beginning of "**Results**", we have reported the timing of the cystatin C examination.

5. Figure legends are required for Figure 1 and 2.

We have added the Figure legends.

6. Figure 2, the authors should consider revising the figures. The probability of survival normally ranges between 0 and 1, and the survival curve starts at 1.0 and step down as time increases.

We have revised the Figure 2.

7. The specificity of the prediction is relative low. Please discuss that the prediction should be interpreted with caution in clinical practice.

We have added the limitations and discussed the reasons of low specificity of the prediction.

8. In the Discussion, the first paragraph looks like a secondary Introduction. The authors may consider re-state the question, hypothesis, and use their results to answer the question.

According to the revised comments, we have adjusted the order and content of paragraphs (from paragraphs 1 to 3 of "**Discussion**").

9. In the second paragraph of Discussion, the authors may consider discussing their main finding or primary outcomes.

We have revised the second paragraph of Discussion, and discussed main finding or primary outcomes.

10. The authors may check and discuss the information of the following research. J. Xiang, J. Wen, X. Yuan, S. Xiong, X. Zhou, C. Liu, et al., Potential biochemical markers to identify severe cases among COVID-19 patients, medRxiv (2020) Mar 23;2020.03.19.20034447.

Thanks to the reviewer's recommendation, authors carefully read this article and cited it in the discussion section on page 9 of the manuscript.

