

Dear editors,

Thank you for considering our article for publication in World Journal of Clinical Cases. We are grateful to you and the reviewers for the valuable suggestions provided.

Responses to Reviewers:

Comment#1: I would suggest changing the terminology and the title from “epidemic” to “pandemic”. This should be followed uniformly throughout the manuscript. “sars-cov-2” should be changed to SARS-CoV-2 Change “wk” to “week” please use standard terminology throughout the manuscript.

**Response:**Yes,we have changed these as suggested.

Comment#2: Not sure what the authors mean by “systemic poisoning symptoms”?

**Response:**“systemic poisoning symptoms”refer to a general discomfort caused by the absorption of toxins from a bacterial or viral infection, such as malaise or restlessness, difficulty in feeding, loss of appetite, reduced crying and reduced body movement.

Comment#3:Change “Develop” to “Development of a standardized triage screening questionnaire” Authors should provide information about validation of the above-mentioned questionnaire, if there is preliminary data published before it should be cited here. Page 7/18 change “child patient” to pediatric patient or just patient, since the authors are describing the pediatric population it is implied that the patient is from the pediatric age group.

**Response:**Yes,we have changed these as suggested.

Comment#4: Authors use the terminology epidemic and pandemic interchangeably throughout the manuscript. This should be changed to pandemic throughout consistently.

**Response:**Yes,we have changed these as suggested.

Comment#5: Under the materials and method section authors have not mentioned the testing hypothesis at all. This needs to be clarified very early in the manuscript and in the method section. With regards to patient recruitment, authors should provide a strobe diagram.

**Response:** Statistical analysis of data in this study did not involve statistical inference, so hypothesis testing was not carried out.

Comment#6: Under the results section, number can be rounded to the closest whole number to improve the readability of the manuscript.

**Response:** Yes, we have modified these as suggested.

Comment#7: What are the take home points that the authors want the readers to remember? Discussion should be focused more towards what were the main results from the current study and how does it improve our current understanding for the triage and management of the current pandemic.

**Response:** During the discussion, we tried to express the important role of effective screening and triage strategies in the prevention and control of hospital infections, and the need to adjust prevention and control strategies timely as the epidemic situation changes.

Comment#8: Under Research conclusions authors say that “they developed standardized triage screening procedures” but the method described here is very similar to national and international guidelines. Please emphasize on the novelty of the idea if there is any.

**Response:** This is a limitation of our study, the pre-screening triage process is not unique, and it is based on national or local policies to a large extent.

Comment#9: Table 1: Overall formatting of the table needs much improvement. What do the authors mean by “Epidemiology (have)” ? Not sure what is the information that is conveyed in Table ?

**Response:**“Epidemiology (have)” refer to patients with travel history, or any history of contact with people with confirmed cases of COVID-19.

According to the reviewer’s comments, we have revised the manu . The changes have been highlighted in red.If there are any other modifications we could make, we would like very much to modify them and we really appreciate your help. We hope that our manu could be considered for publication in your journal. Thank you again for your positive comments and valuable suggestions to improve the quality of our manu.

With best regards,

Sincerely yours,

Pei-qing Li