Reviewer #1:

**Scientific Quality:** Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

**Conclusion:** Minor revision

**Specific Comments to Authors:** The whole manuscript is well drafted; however, some concerns have been noted including: 1. Write the objective/aim of the research clearly in the last paragraph of the introduction section. 2. The proportions of hospital bed-days of patients receiving different nutritional support methods, such as total PN, PN + EN, and total EN, were calculated, However, no total PN data were mentioned in the results of this study. 3. The data in Table 4 are quite different from the other tables, please check. 4. Page 12, the total length of ICU stay of patients in the improvement group and control group The results are different from those in Table 7. 5. Spacing, punctuation marks, grammar, and spelling errors should be reviewed wholly.

Reply: Thank you for your guidance. We are very pleased that the draft of this study has received your approval and careful guidance, and we will carefully read all comments and carefully check and proofread them. We have clearly stated the purpose of the study in the last paragraph of the introduction. The proportion of hospital bed-days of patients receiving total PN has been supplemented accordingly. Table 4 mainly compares and analyzes the time proportion of each nutritional support mode between the two groups, which is different from the comparison indicators in other tables. The main analysis is the percentage of the duration of each nutritional support mode in the total effective hospitalization days. We have carefully checked and corrected the difference between the total length of ICU stay of patients in the improvement group and the control group in the results section and Table 7. All the errors in space, punctuation, grammar and spelling have been reviewed and corrected.

Reviewer #2:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

**Conclusion:** Minor revision

**Specific Comments to Authors:** Zhang YY et al. introduced an improved nutrition support management system for ICU patients based on closed-loop information management and psychological counseling. After the operation of the whole process management system, the scores of ICU medical staff's knowledge, attitudes/beliefs, and practices regarding nutritional support were comprehensively improved. It can improve the prognosis of ICU patients. I am confused about psychological nursing practices on page 3. Authors said, there were 3 questions on psychological nursing practices in total, and a 3-point Likert scale was used, with scores of 0, 1, 2, and 3 indicating none, seldom, sometimes, frequent, and persistent, respectively;

the total score ranged from 0 to 12 points, and higher scores suggested more active psychological nursing practices. However, for the 3-point scale, the maximum total score should be 9 points. In addition, none, seldom, sometimes, frequent, and persistent, there are five options in total, which does not correspond to 0-3 and four scores. Overall, the manuscript is well written, but further editing and proofreading are needed to maintain the best sense of reading.

Reply: Thank you for your guidance and we are honored to have your specific comments on this study. Nutritional support for critically ill patients has become an integral part of clinical treatment, especially for intensive care patients. However, in clinical practice, the goal of nutritional support for hospitalized patients in the intensive care unit (ICU) is difficult to achieve, mainly due to the poor standardization and compliance of nutritional support by medical staff. Therefore, we tried to introduce a comprehensive nutrition support management system for ICU patients based on closed-loop information management and psychological counseling to optimize the medical experience of such patients. For the part of the method, we have carefully reviewed and revised the description of the scale related to psychological nursing practice accordingly. It should be a 4-point Likert scale, with five scores (0, 1, 2, 3, and 4) corresponding to five options (none, seldom, sometimes, frequently, and persistently) and a total score of 12. At the same time, we are very grateful for your approval of this manuscript. We have carefully edited and proofread it according to the corresponding requirements to maintain the best reading experience.