

Reviewer #1:

The manuscript sheds some light on main recommendations concerning the screening of healthcare personnel, dialysis patients and visitors; the safety of the dialysis facilities' environment; the conducts regarding an outbreak of SARS-CoV-2 infection within a dialysis facility; the management of complications in dialysis patients with COVID-19; Not sure if there is enough information provided to state it has information directed towards children with kidney disease. Abstract needs to be rewritten. The objective of this manuscript is not clear from this abstract. Please follow - First sentence should imply question underlying the research study - Next explain what previous research has demonstrated (a rationale for new search or this manuscript) - The data, research and analytical methods used in this manuscript The major findings from an implications and significance of this manuscript A short paragraph is needed in introduction section for pathophysiology of SARS-CoV-2 on Kidneys (role of ACE2 receptor) Introduction section mentions "variety of clinical manifestations" - what are they? Please refer to paragraph here: Dialysis units should be encouraged to decrease the flow of people during the pandemic; therefore, it is not indicated that other individuals accompany patients on dialysis to reduce person to person transmission? (22,25). It can be allowed in situations of extreme need, but it should only be considered on a case-by-case analysis. In this matter, it is recommended that the companions wear surgical masks, N95 or similar and obey the same basic rules as dialysis patients, e.g., social distancing (22,24,25,29). Provide information what is considered "extreme need"? are there CDC or WHO guidelines specific to visitors?

Our response: We appreciate your valuable feedback. The abstract has been rewritten in accordance with the given suggestions. We have added a new part in the introduction regarding the pathophysiology of kidney injury in COVID-19. We have edited the "variety of clinical manifestations" to make it clearer that examples were given before. Reference [42] (CDC) discourages visitors and does

not define exceptions. However, other recommendations suggest that it should be judged on a case-by-case analysis.

Reviewer #2:

In this paper, the authors carried out a comprehensive review on the COVID-19 epidemiology in dialysis units, provided recommendations on the screening of healthcare personnel, patients and visitors; the safety operation of the dialysis environment; the management of an outbreak of SARS-CoV-2 infection within a dialysis facility; and other related topics related to dialysis. The manuscript is well structured and should be published in world Journal of Virology if the following careless typos can be corrected: 1. Page 4, line 1, “HD patients are cannot perform” should be “HD patients cannot perform”; 2. Page 12, line 1, “Although CKD in considerably” should be “Although CKD is considerably”; line 3, “determinate” should be “determine”. The manuscript would be more compendious if some in-depth discussion on the physiopathology of AKI can be included. Although the pathophysiology of AKI is still elusive, clinical evidence shows that the direct viral infection does not account for the observed renal damage. The hyperinflammation induced by the immune system might rather be responsible for kidney injury in severe cases of COVID-19 [1]. The following reference may be included in the manuscript: 1. Le Stang, MB; Desenclos, J; Flamant, M; Chousterman, BG; Tabibzadeh, N. The Good Treatment, the Bad Virus, and the Ugly Inflammation: Pathophysiology of Kidney Involvement During COVID-19. Front. Physiol. 2021; 12: 613019. (DOI: 10.3389/fphys.2021.613019).

Our response: We are grateful for your valuable considerations. All typos were appropriately corrected. We included a new part which briefly discusses the main aspects of the pathophysiology of kidney injury in COVID-19. We also included the reference you kindly suggested – by Le Stang et al.

Reviewer #3:

This MS mainly reviewed the epidemiology of COVID-19, the screening of healthcare personnel, dialysis patients and visitors, the safety of the dialysis facilities' environment, the conducts regarding an outbreak of SARS-CoV-2 infection, the management of complications in dialysis patients with COVID-19 and the conducts directed towards children with kidney disease in dialysis units, which provided valuable information for prevention and control of SARS-CoV-2 infection in dialysis units. However, some revisions are still needed before being published in World Journal of Virology.

1. In page 1, running title and corresponding author should be provided. Additionally, in "Supported by the authors" section, the approved grant application form(s) or funding agency copy of any approval document(s) must be provided. Full name (such as COVID-19 and SARS-CoV-2) should be given for the first time.

Our response: We appreciate your valuable insights. No financial or logistical aid was provided, therefore no documents regarding these topics can be provided. All other suggestions have been followed.

2. Please refer to recent papers published in World Journal of Virology and correct the format. In page 2, "Key words" should be changed to "Key Words". "renal dialysis" should be changed to "Renal dialysis". Note that key words should be uppercase or lowercase according to the journal's requirements. Full name (such as HCP) should be given for the first time. In page 2, line 22, "(1,2)" should be changed to "[1,2]". Other citations should be modified accordingly. Throughout the text, all "SARS-Cov-2" should be changed to "SARS-CoV-2".

Our response: HCP has been defined before the first use in the Abstract, Core tip and Introduction of the main text sections. All other suggestions have been followed. Thank you.

3. In “DEALING WITH AN OUTBREAK” section, it is suggested that figure 1 and figure 2 could be combined into a single figure and management of visitors could be added in the combined figure. Additionally, figure 1 and figure 2 should be indicated in the corresponding text. In figure legends, all abbreviations should be given in full text according to the journal’s requirements.

Our response: We have designed a new figure regarding conducts related to visitors. However, we decided not to combine all figures into a single one, as it would increase the difficulty for reading it, and explanation related to the figures was provided for each one individually in the main text. Additionally, the overall design of the figures has been changed, but its content remains the same. All other suggestions have been followed. Thank you.

4. In all references, all journal title should be italics. In reference 1, “J Med Virol. 2020 Jun;92(6):577-583. [DOI: 10.1002/jmv.25757 PMID: 32162702 PMCID: PMC7228329]” should be changed to “J Med Virol 2020; 92:577-583 [PMID: 32162702 DOI: 10.1002/jmv.25757]”. In reference 6, “ | WHO Coronavirus Disease (COVID-19) Dashboard [Internet]. [cited 2021 Mar 1]” should be changed to “[cited Mar 1, 2021]”. Please check other references including content and format carefully according to the journal’s requirements. Other suggestiones have been listed in the uploaded revised version.

Our response: We have altered the references’ as according to the suggestions. Thank you.

Science editor: 1 Scientific quality: The manuscript reviewed the epidemiology of COVID-19, the screening of healthcare personnel, dialysis patients and visitors, the safety of the dialysis facilities’ environment, the conducts regarding an outbreak of SARS-CoV-2 infection, the management of complications in dialysis patients with COVID-19 and the conducts directed towards children with kidney

disease in dialysis units, which provided valuable information for prevention and control of SARS-CoV-2 infection in dialysis units. The topic is within the scope of the World Journal of Virology. (1) Classification: Grade 2C1B and Grade 2B1A; (2) Summary of the Peer-Review Report: Reviewer 1: Abstract needs to be rewritten. The objective of this manuscript is not clear from this abstract. Please follow - First sentence should imply question underlying the research study - Next explain what previous research has demonstrated (a rationale for new search or this manuscript) - The data, research and analytical methods used in this manuscript The major findings from an implications and significance of this manuscript A short paragraph is needed in introduction section for pathophysiology of SARS-CoV-2 on Kidneys (role of ACE2 receptor) Introduction section mentions "variety of clinical manifestations" - what are they? Please refer to paragraph here: Dialysis units should be encouraged to decrease the flow of people during the pandemic; therefore, it is not indicated that other individuals accompany patients on dialysis to reduce person to person transmission? (22,25). It can be allowed in situations of extreme need, but it should only be considered on a case-by-case analysis. In this matter, it is recommended that the companions wear surgical masks, N95 or similar and obey the same basic rules as dialysis patients, e.g., social distancing (22,24,25,29). Provide information what is considered "extreme need"? are there CDC or WHO guidelines specific to visitors? Reviewer 2: 1. In page 1, running title and corresponding author should be provided. Additionally, in "Supported by the authors" section, the approved grant application form(s) or funding agency copy of any approval document(s) must be provided. Full name (such as COVID-19 and SARS-CoV-2) should be given for the first time. 2. Please refer to recent papers published in World Journal of Virology and correct the format. In page 2, "Key words" should be changed to "Key Words". "renal dialysis" should be changed to "Renal dialysis". Note that key words should be uppercase or lowercase according to the journal's requirements. Full name (such as HCP) should be given for the first time. In page 2, line 22, "(1,2)" should be changed to "[1,2]". Other citations should be modified accordingly. Throughout the text, all

“SARS-Cov-2” should be changed to “SARS-CoV-2”. 3. In “DEALING WITH AN OUTBREAK” section, it is suggested that figure 1 and figure 2 could be combined into a single figure and management of visitors could be added in the combined figure. Additionally, figure 1 and figure 2 should be indicated in the corresponding text. In figure legends, all abbreviations should be given in full text according to the journal’s requirements. 4. In all references, all journal title should be italics. In reference 1, “J Med Virol. 2020 Jun;92(6):577-583. [DOI: 10.1002/jmv.25757 PMID: 32162702 PMCID: PMC7228329]” should be changed to “J Med Virol 2020; 92:577-583 [PMID: 32162702 DOI: 10.1002/jmv.25757]”. In reference 6, “ | WHO Coronavirus Disease (COVID-19) Dashboard [Internet]. [cited 2021 Mar 1]” should be changed to “[cited Mar 1, 2021]”. Please check other references including content and format carefully according to the journal’s requirements. Other suggestiones have been listed in the uploaded revised version. Reviewer 3:1. Page 4, line 1, “HD patients are cannot perform” should be “HD patients cannot perform”; 2. Page 12, line 1, “Although CKD in considerably” should be “Although CKD is considerably”; line 3, “determinate” should be “determine”. The manuscript would be more compendious if some in-depth discussion on the physiopathology of AKI can be included. Although the pathophysiology of AKI is still elusive, clinical evidence shows that the direct viral infection does not account for the observed renal damage. The hyperinflammation induced by the immune system might rather be responsible for kidney injury in severe cases of COVID-19 [1]. The following reference may be included in the manuscript: 1. Le Stang, MB; Desenclos, J; Flamant, M; Chousterman, BG; Tabibzadeh, N. The Good Treatment, the Bad Virus, and the Ugly Inflammation: Pathophysiology of Kidney Involvement During COVID-19. *Front. Physiol.* 2021; 12: 613019. (DOI: 10.3389/fphys.2021.613019). (3) Format: There are 0 tables and 2 figures; (4) References: A total of 44 references are cited, including 43 references published in the last 3 years; (5) Self-cited references: There are 0 self-cited references. (6) References recommendations: The authors have the right to refuse to cite improper references recommended by the peer reviewer(s), especially those published by the peer reviewer(s) him/herself

(themselves). If the authors find the peer reviewer(s) request for the authors to cite improper references published by him/herself (themselves), please send the peer reviewer's ID number to editorialoffice@wjgnet.com. The Editorial Office will close and remove the peer reviewer from the F6Publishing system immediately. 2 Language evaluation: Classification: Grade 2B1A. A language editing certificate was provided. 3 Academic norms and rules: The signed Conflict-of-Interest Disclosure Form and Copyright License Agreement was not provided. No academic misconduct was found in the Google/Bing search. 4 Supplementary comments: This is an invited manuscript. The topic has not previously been published in the WJV. 5 Issues raised: The authors did not report whether this manuscript was supported by any grants. 6. The "Article Highlights" section is missing. Please add the "Article Highlights" section at the end of the main text. 7 Re-Review: Required. 8 Recommendation: Conditional acceptance.

Our response: The Conflict-of-Interest Disclosure Form and Copyright License Agreement will be provided. We have included the information that no grants were conceded for the authors in order to write this manuscript. Article highlights have been added as well. We are grateful for your valuable considerations.