

Peer Review File

Article information: <http://dx.doi.org/10.21037/tp-20-129>.

Reviewer A

Comments to the authors:

General comments:

Paper needs thorough review to address and correct all grammatical errors. Also, the newly described MIS-C in children should be discussed.

Thank you for your advice. We added this information in the manuscript.

Specific recommendations:

Line 32: "*How to manage the critical ill children with COVID-19?*" is not a complete sentence.

Yes, we revised it.

Line 35-36: "*The more evidences available should be payed attention to.*" is not a complete sentence and should be rephrased.

Yes, we rephrased the sentence.

Line 39: "*The nationwide data....*" – list specific country

We list the country. The data was from the mainland of China. We also stated the epidemiological information from other countries.

Line 99: Define "*RBD*"

We define the abbreviation. Spike-RBD: receptor binding domain of spike protein

Line 160: "*..indicated that COVID-19 is associated with a cytokine storm...*" would be cautious to point out only a small subset of patients in pediatrics if at all...

Thank you for your advice. We rephrased the sentence.

Line 164-165: "*Although Chinese tradition medicine has highly acceptance of the parents in China, there is still lack of evidence.*" Unclear what this means.

Thank you for your advice. There is no more evidence regarding the Chinese tradition medicine treatment. Therefore, we would delete this sentence.

Line 200: Figure is blurry and difficult to read

Thank you for your advice. We tried to revise it.

Reviewer B

Comments to the authors:

- The authors addressed an Important topic in time of pandemic, but would suggest some improvements and changes before publication:
- To review English grammar and vocabulary – few examples: line 34 use “to face” instead to confront; line 81 “in this regard” and “line 93 in “line with this result”- not adequate. I would suggest an English complete review by an English native speaker.

Thank you for your advice. We rechecked English grammar and vocabulary.

- Epidemiological studies- the authors mentioned just one study talking about incidence of severe and critical cases (5.8%), but there are other more showing lower incidences as 0.7-2%.

Thank you for your advice. We added the epidemiological information from different countries.

The data from a Chinese cohort showed that children at all ages are susceptible to the SARS-CoV-2, and 2.2% of children were less than 19 years old. While, there were 2% of children with COVID-19 in the United States (2), 1.2% in Italy, and 0.8% in Spain.

- On line 49 authors wrote “in a cohort”- which one? Where? How many patients? Which reference?

We added the reference.

- When the authors cited the laboratory markers and radiological findings- since there are very few studies about children, would be interesting to compare with adult studies and findings.

Thank you for your advice. We added the information.

- On clinical features, the Multisystem inflammatory syndrome in children (MIS-C) was not mentioned- maybe the paper was submitted before the first description at the end of April- but now, almost 2 months after, it's very important to mention and to talk about this.

Thank you for your suggestion. We discussed these in the clinical features part.

- Early and rapid diagnosis- would suggest just “Diagnosis”

Thank you for your advice. We changed to Diagnosis.

- The authors mention on line 84 “the seventh edition of the new Coronavirus pneumonia prevention control protocol”- which protocol? From where? Very important to be clear and include adequate references.
Thank you for your advice. We added the references.
- The paragraph starting in line 97 is not well structured and is confuse. The first sentence is not connected and did not make sense for the reader. Would suggest to re-structure the text here
- Thank you for your advice.
“The study from Yaguang Zhang and colleagues reported the immunity features of six infected children, which suggested that a rapid protective humoral immunity could be detected after the SARS-CoV-2 infection. Meanwhile, both the CD4 and CD8 cell counts were no difference between the infected and uninfected children.”
- The authors mentioned basically protocols and Chinese studies, but we have already other countries’ studies in children- would be interesting, if they were intending to write about pandemic considerations, to include other studies and review the references.
Thank you for your advice. We added the information from United States, Canada, and European group.
- I really liked the authors included the sections “protecting children and health care workers” and emotional support- very important points that need to be addressed
Thank you.
- At the conclusion, the authors included mentions about transcriptomical and metabolomics in covid-19, but they did not mention these points at all during the entire paper. The conclusion must always include topics that were mentioned before. This part could be included in another section such as “future perspectives” for example, but I would suggest to be more specific about it.
Thank you for your comments. However, there are no more cases
We have deleted this part.
- Also, I missed some comments about immunopathogenesis at least to be mentioned at the beginning.

Thank you for your comments. We stated it in the beginning.

- I really liked the figure the authors produced, I would just suggest they should address all points they cited over there.