

Peer Review File

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Reviewer A

Comment 1: Introduction: the introduction should be started with the text instead of number or percentage, should provide some information to show that adenoviral pneumonia is important in VN and need to study on it, and the study objectives can be written shortly.

Reply 1: We have revised the introduction section as suggested, truncated some content, and presented the research objectives directly.

Changes in the text: see Page 2, line53-60

Comment 2: Inclusion criteria: 1. Age should be ≥ 28 days to < 14 years

Reply 2: we have modified our text as advised .

Changes in the text: see Page 4, line87: age ≥ 28 days to < 14 years

Comment 3: How the ROC important to select the risk factors for severe adenoviral pna?

Reply 3: The method is simple and intuitive. Combining the sensitivity and specificity with the graphical method, it can accurately reflect the risk factors of adenovirus infection in this paper and predict the corresponding threshold limit.

Comment 4: Please be aware for using the consistency of each specific term such as "Non-severe or Nonsevere"; "HArV or HADV"; d should be "days" instead and please kindly recheck throughout the paper.

Reply 4: The two questions of "Non-severe or Nonsevere" and d should be "days" instead have been revised in full text as suggested. "HArV or HADV" should be HAdV (human adenovirus) according to the literature. References: Yao G, Ma C, Liu J, Sun Z, Wei B. Interleukin-6 serum levels are independently associated with severe adenovirus pneumonia in children: a cross-sectional study. *Transl Pediatr* 2022;11(12):1962-1971.doi: 10.21037/tp-22-585

Comment 5: In the results, in text should bring only the essential findings to present or show and other information can be presented in the tables.

Reply 5: The relevant content has been deleted and revised as suggested.

Changes in the text: see Page 4, line 114-Page5, line 135

Comment 6: The first sentence of the "Discussion" part should start with the summarizing of the overall findings of the study and then follows by the discussing or criticizing of the study findings with other prior studies or knowledge.

Reply 6: The relevant content has been modified as suggested.

Changes in the text: see Page 8, line 179-Page 9, line 188

Reviewer B

Comment 1: Since this study was conducted over 3 years, there should be an incidence-time plot to show any seasonality of these AdVs.

Reply 1: Relevant contents have been added and drawings made as required.

Changes in the text: see Page 4, line 108- Page 5, line 120

Comment 2: There is no AdV typing data included or even discussed - there are over 70 serotypes of AdV some of which cause different clinical disease. The authors don't even describe the classification and virology of the virus, incubation period, transmission routes, possible treatments, etc.

Reply 2: As recommended, information on virus classification (see Page 12, line 282-284), incubation period (see Page 9, line 206), transmission routes (see Page 9, line 207), possible treatments (see Page 9, line 185-186) has been added.

Comment 3: The text is far too long and full of lists of figures and % that should just be shown in the Tables - the text should be limited to interpreting and discussing these data in the Tables.

Reply 3: The relevant content has been deleted and revised as suggested (see Page 4, line 114-Page5, line 135).

Comment 4: Choose a standard number of decimal places (usually 2) and use this throughout the text.

Reply 4: The full text has been revised as requested.

Comment 5: The Discussion is far too long and should be condensed - all the immune response aspects should be removed as this is not what the authors and data are investigating - and a lot of the text is speculative based on their literature review.

Reply 5: The relevant content has been cut as requested (see Page 9, line 203;Page 9, line 207;Page 10, line 225;Page 11, line 263).

Comment 6: Tables can be used for the data and the main text can easily be shortened by 50% - to just 2000 words or less.

Reply 6: The relevant content has been deleted and revised as suggested (see Page 4, line 114-Page5, line 135).

Comment 7: The authors can more usefully enhance their paper's relevance from an immunological angle by briefly mentioning the global pediatric adenovirus hepatitis outbreaks - which might have a immunological background that was distorted by the COVID-19 pandemic, which reduced children's social contact and therefore less exposure to many circulating viruses, like adenoviruses, that gave them some immunological protection with frequent/mild illness.

Reply 7: The relevant content has been added as required (see Page 10, line 228-233).