Response to reviewers, manuscript 76292

In the name of all authors, I would like to express my sincere gratitude for the time and attention dedicated to critically review our manuscript, for your comments that helped us to improve it.

Dear reviewers, we have made all corrections suggested.

Reviewer #1

A rare organism indeed. Few revisions needs to be made 1) The authors have not mentioned the laterality of the procedure in the second Paragraph of the case report 2) they have mentioned ureteral stenosis initially was there a stricture ? Or was it due to an impacted stone 3) few grammatical errors need to be corrected in the case report

Response 1: We have added the information on laterality of the affection and procedures:

Lines 115-116: JJ catheters were temporarily placed in the right kidney and removed after treatment.

Response 2: We added information on the cause of ureteral stenosis:

Lines 114-115: In 2016 and 2017 second look percutaneous nephrolithotomy (PNL) was performed, finding right ureteral stenosis due to lithiasis;

Response 3: I declare that the authors of the manuscript No. 76292 are non-native English speaker but our manuscript has been reviewed by a professional with over thirty years experience as language teacher, translator and copy editor, whose native language is English.

Reviewer #2

The authors present a case report of EP in a Non-Diabetic Patient caused by S. fonticola, as well as a brief literature review to draw attention to this rare pathogen as a cause of pyelonephritis in this case-based review. The authors describe a 38-year-old female presenting with fever, severe pain in the right flank and changes in urinary habits. The authors confirmed EP with an abdominal computerized tomography and urine cultures and S. fonticola was grown as a single pathogen. Piperacillin/tazobactam was used and percutaneous drainage was performed, she became afebrile, and the gas presence reduced. At the end of the article, they concluded that Serratia fonticola may still be rare as a human pathogen, but its incidence may lead to severe cases when
patients undergo invasive, instrumented procedures or have comorbid conditions. It is an interesting case report. It may be useful for readers. English editing should be done once again.

Response: I declare that the authors of the manuscript No. 76292 are non-native English speaker but our manuscript has been reviewed by a professional with over thirty years experience as language teacher, translator and copy editor, whose native language is English.

Additionally, we have added a short paragraph and complemented information in the introduction and discussion, for this we have added new references. We originally had 18 references and in the latest version of our manuscript, we have 25.

We hope we have addressed your comments appropriately.