Reply to the Reviewer/Editor.

Dear Respected Editor/Reviewer

Good day

Thank you very much for the comprehensive review and for your precious time that you spent in reviewing this study. We did the advised changes and answered the queries. All the changes were marked by red colour for easily tracking by the reviewer. The manuscript looks much better with these changes, and we tried to improve the language as we can. Thank you again for your precious assistance.

Here we are replying point by point:

Reviewer #1:

Specific Comments to Authors: This study aimed to assess the plasma level of D-dimer in neonates with neonatal sepsis. They found that D-dimer was significantly higher in septic groups. Septic groups showed a significantly higher number of cases with positive D-dimer. The rate of gram-negative bacteremia was significantly higher in LOS than EOS, while the rate of gram-positive bacteremia was significantly higher in EOS than LOS (P <0.01*). Gram-negative bacteria have the highest D-Dimer levels (Acinetobacter, Klebsiella, and Pseudomonas), and CRP (Serratia, Klebsiella, and Pseudomonas). The best-suggested cut-off point for D-dimer in neonatal sepsis was 0.75 mg/L, giving a sensitivity of 72.7% and specificity of 86.7%. The D-dimer assay showed lower specificity and comparable sensitivity relative to CRP in the current study. There were some merits in this study.

I could not find the Tables in the manuscript, please add it to the manuscript.

Our reply: Tables were added in the manuscript

The language needs to be polished, there were some grammar and word errors in the manuscript such as the following:

1. D-Dimer assay was compared between the groups and related to the causative microbiological agents.

Our reply: Correction was done and highlighted in red.

2. Discussion there is a need for sensitive markers able to detect and expect the prognosis of neonatal sepsis.
3. Despite there being no significant differences in gender among the studied group,

4. Meini et al. found that D-Dimer level can be used to expect the severity and the course of severe invasive infections caused by the gram-negative bacteria Neisseria meningitidis; while failing to expect the course of the disease in What was the meaning of “expect”?

Our reply: Correction was done and highlighted in red: corrected into predicted.

5. We found thrombocytopenia in 73% and 405 of EOS and 405 means 40%?

Our reply: Correction was done (40%) and highlighted in red.

Reviewer #2:

Specific Comments to Authors: Overall, the paper is well written.

In the abstract, results section is too long with repetitions, please cut short the writing. Introduction is reasonable.

Our reply: The abstract was reduced from 352 to 297 and the result section reduced from 193 to 140. Correction was done and highlighted in red.

Methods are mostly well written. IEC approval, inclusion/exclusion criteria well mentioned. Results are acceptable.

Our reply: Thank you very much.

In the discussion, the first paragraph repeats most of the writings in the introduction. Avoid repetition.

Our reply: paragraph was removed as it was repeated before.

Limitations are written.

Our reply: Thank you very much.

Bibliography is alright.
Our reply: Thank you very much

Please explain the reason for such high rate of mortality in your study.

Our reply: Because our unit is a tertiary NICU, we are receiving a lot of critically sick and septic patients from peripheral units. They were referred late mostly with Gram -ve organisms, mostly Acinetobacter and klebsiella, most of them were MDR with limited antibiotic options, and referred lately in a critical condition. Also, many cases had severe thrombocytopenia and markedly elevated CRP.

Explanation was added to the discussion and highlighted in red.

LANGUAGE POLISHING:
language polishing was done by native English-speaker

ABBREVIATIONS
The basic rules on abbreviations were strictly followed

EDITORIAL OFFICE’S COMMENTS:
All the editorial instructions were followed in finalizing this manuscript.

On behalf of all authors, we do thank you editors and reviewers for your support during publication of this manuscript.

Many thanks
Professor Mohammed Al-Biltagi