

Reviewer B:

Recommendation: Revisions Required

1. Relevance of the title to the content of the article

Good

Remarks

The article is totally relevant. We are in a moment of the pandemic where the data are partial, they come from diverse sources that have a methodology that is difficult to compare. It has additional merit to try to present a synthesis of the relevant information on the subject in new journal.

2. Summary: Presents the general idea of the topic, objectives, research methods, results and conclusions, written in an objective and concise manner; and are found according to the maximum number of words per section.

Good

Remarks

I find it adequate in content and length. I recommend using either "COVID-19 infection" or "related to COVID-19" instead of "COVID-19"

It is essential to incorporate the meaning of the abbreviations into the text early.

3. Introduction: Presentation of the subject, justification of the problem, objectives, hypotheses and methodological foundation, exposing the subject in an orderly and detailed manner

Poor

Remarks

The article presents the setting where the research question is produced, and the aspects in which there is a reluctant agreement on alterations presented in the patients who survived. I suggest to make explicit in this part the question or questions that the authors want to answer with this search.

4. Methodology: Describes the procedure, methods and techniques used in data collection and analysis.

Moderate

Remarks

The way in which the search was made and the final selection of the articles is detailed. The reason and method by which another 2 articles were included is not clear when the refined search returned a total of 18.

Regarding the tools used, PRISMA recommends being cited as an article and not as a web page in the text (eg The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. BMJ 2021; 372: n71. Doi: 10.1136 / bmj.n71)

Ethical aspects. Does the manuscript have a paragraph on ethical aspects, where it mentions approval by the ethics committee, informed consent, and strict compliance with research ethics?

No

5. Results: They are presented adequately and it is not redundant with tables or graphs shown.

Poor

Remarks

In the text, mention is made of the country of origin of the articles out of a total of 10 works (not 18 or 20).

The tables that summarize results show an arbitrary number of articles: 9, 11 and 9 for tables # 1, # 2, # 3, respectively.

The text description of the results is redundant with the information provided by the tables. Comments on the results of a particular article are welcome in the Discussion section.

Are there two or more groups of results?: The tables report results for lung function and, separately, another appears for the findings in tomography. If the information is exclusive, it should be mentioned and treated separately. If there is a group of articles that combines functional and radiological information, it should be incorporated.

It seems to me necessary that the authors comment on concepts such as "recovered", "survivor" or "conditions at discharge", which are very different from one center to another and from one patient to another. In this regard, some authors include in the description of their samples "days after diagnosis", which could enrich the description of the sample.

If they use tables that present all the information, even if they may be long, the reader will be able to have a complete vision of the digested information offered by the

authors. I recommend reviewing the presentation of data that Iqbal and his collaborators make in *EClinicalMedicine*. 2021; 36: 100899. doi: 10.1016 / j.eclinm.2021.100899 (open access)

6. Discussion: They present a level of critical analysis in correspondence with the problem presented. Purposes of the article, scope, support theory and proposed methodological design.

Poor

Remarks

This is the part that generates the most expectation of these types of articles: these are the data, well, what do the authors think?

For example, the paragraph on the decrease in LCDO is appropriate but you can complete it: why do you think studies report differences, in which other diseases this parameter behaves like this, what is the relationship with demographic characteristics, etc.

The description of the radiological findings should not be a limitation in the study. Radiological semiology enjoys considerable consensus in CT, it has been widely shared regarding its usefulness in the diagnosis and follow-up of COVID patients. I think that the authors' difficulty could be related to the translation of these alterations into Spanish. I recommend discussing these doubts with a radiologist. You can also review references of this type: olomon JJ, Heyman B, Ko JP, Condos R, Lynch DA. CT of Postacute Lung Complications of COVID-19. *Radiology*. Published online August 10, 2021: 211396. doi: 10.1148 / radiol.2021211396 (open access)

7. Conclusions: Presents the author's inferences and teachings in relation to the investigated topic, it must correspond to the objectives of the study.

Moderate

Remarks

The conclusion is a description. I suggest you give your mind about what they found and how we (the authors and we the readers) position ourselves within the course of the pandemic.

8. References. Quality of bibliographic references and if they are in accordance with the Vancouver format.

Moderate

Remarks

References must be reformatted according to the journal's requirements..

9. Contributions. What are the main weaknesses of the manuscript and how the author can do to improve it

The work is a great contribution. On this subject, it is a moment of scattered information, with some consensus and still many questions.

Its weaknesses are the presentation of results and the discussion.

The suggestions were mentioned previously.

There are some errors in translation that should be corrected as well.

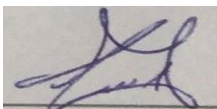
LETTER OF CORRECTION OF THE ARTICLE "Radiological and functional pulmonary complications in patients recovered by COVID-19"

Dear Editor:

Med. Kovy Arteaga-Livias

Attached here, the correction with yellow marker on the reviewer's suggestions on the article entitled "Radiological and functional pulmonary complications in patients recovered by COVID-19" and I request that it be evaluated for publication in the Journal that you direct.

Without further ado and thanking your attention, I say goodbye:



Henry Williams Mejia Zambrano (Autor principal)

Rectification:

- In the summary, the word "COVID-19" was replaced by "related to COVID-19"**
- The meaning of the abbreviations was incorporated in the abstract**
- In the introduction the more detailed justification was incorporated, responding to the search topic.**

- In methods, the suggestion was made to clarify the search flow chart of the 19 articles and the 2 secondary articles.
- The Prisma guide was cited as an article.
- The results in the 3 tables were improved to coincide with the 19 studies chosen. Excluding the results separately.
- The EClinicalMedicine was taken as a reference. 2021; 36: 100899. doi: 10.1016 / j.eclinm.2021.100899 (open access) for general patient outcomes.
- The discussion was improved
- The limitations were better explained
- The conclusion was improved
- Added figures on the descriptions of the CT
- Abbreviations have been added for a better understanding.