

## **For Reviewer A**

Dear Reviewer,

First of all, we would like to thank you for enriching our work with your valuable opinions and suggestions.

“Report the percentage of isolates confirmed as infection or colonization, evaluating the clinical presentation of the patients.”

**The study is a retrospective study, infections caused by Acinetobacter baumannii in intensive care patients were subjected to antibiotic sensitivity testing, and isolates considered to be colonization were not included in the data set because antibiograms were not performed.**

“Report average MIC values for carbapenem resistance.”

**MIC test has not been studied to determine carbapenem resistance.**

## **For Reviewer B**

“If the objective is to determine the change in resistance, this should be included in the title.”

Title “Antimicrobial Resistance Profile of Acinetobacter baumannii Strains Isolated from Intensive Care Unit Patients: Five-Year Follow-up in Cappadocia” has changed as “**Alterations in the Antimicrobial Resistance Profile of Acinetobacter baumannii Strains Isolated from Intensive Care Unit Patients: Five-Year Follow-up in Cappadocia**”

“Our findings have the potential to contribute significantly to the development of new and improved treatment options.” This claim is beyond the scope of the study.

**This sentence has been removed from the article.**

“The introduction should focus on the microorganism that merits the study. Emphasize its importance, resistance and limited treatment options.”

**Necessary edits were made and added to the article.**

“This section(Material and Methods) should be more descriptive. Follow the instructions of the STROBE guide. Population, hospital characteristics, sample size calculation or statistical power, type of sampling, inclusion and exclusion criteria, etc. are needed.The methods of carbapenemics resistance determination is different and should be mentioned.The statistical methods and software used should also be described.”

**The hospital where the study was conducted is located in the Central Anatolia region of Turkey. It is a state hospital with secondary and tertiary intensive care units providing healthcare services to rural and urban patients.**

**The study retrospectively examined the data of patients treated in the intensive care units of Nevşehir State Hospital between January 2018 and December 2022.**

**In the study, aspirate samples, endotracheal aspirate, bronchoalveolar lavage fluid, nasotracheal aspirate samples, and sputum samples of patients over the age of 18 who were treated in intensive care units were evaluated. Cultures that had A. baumannii growth, were not considered as contamination, and had antibiograms were studied were assessed.**

## **Exclusion Criteria for the Study**

- i. Patients with missing demographic data were excluded from the study**
- ii. Recurrent growths after the first growth of the same patient**
- iii. Polymicrobial growths**

**The "Percentage" value was used for descriptive statistics**

**“Focus more on changes in resistance patterns than on the origin. Test hypotheses if possible.”**

**Since the study was retrospective, we did not foresee a change between years, but mathematically, we expected proportionally higher resistance values in years with fewer samples. “When resistance patterns were evaluated by years, fluoroquinolone resistance was observed most in all samples in 2018 and decreased in 2021. Carbapenem resistance is at rates between 93.7% and 100% in all years and in all samples.” This statement has been added to the article.**

**“The discussion should address the results of the study itself. Although some other aspects could be discussed, most of the discussion should highlight the study itself and its comparison with other realities and circumstances.”**

**In the discussion, the rates of all antibiotics whose resistance rates for Acinetobacter were evaluated worldwide and in our country were comparatively evaluated.**

Thank you for your valuable contributions and suggestions.

Best Regards,

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