Dear section editor, assigned editor, and reviewers,

We are very pleased that you offered us an opportunity to revise our work entitled “Meta-analysis: urinary calprotectin for discrimination of intrinsic kidney injury and prerenal acute kidney injury” for Journal of Clinical Medicine. The comments and insights were a tremendous help to us. In the revised manuscript, in accordance with the valuable suggestions of the reviewers, we have made some modifications. The major concerns of the reviewers have been fully addressed, and the entire manuscript has been carefully revised. All the revised words and sentences were highlighted by Track Changes. We hope that the revised manuscript will fulfill the requirements of reviewers and you will judge the revised manuscript to be suitable for publication in Journal of Clinical Medicine.

Yours sincerely,

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Review 2

**Point 1**: I agree that diagnostic performance of urinary calprotectin to distinguish prerenal and intrinsic AKI is quite good in patients without urinary tract infection (UTI)/pyuria/leukocyturia. However, patients with potential prerenal AKI having UTI have been carefully removed from most studies included in this review. Therefore, a limitation should be clearly described in the abstract that usefulness of urinary calprotection in patients with UTI has not been established.

**Response 1**: Thank you for your valuable review and comments. We have added this clinical limitation to our abstract (line 31)

**Point 2**: Page 5. Sample sizes among 6 selected studies were not 53-280.

**Response 2**: We thank the reviewer for reminding us of this mistake. We have changed it (53 to 152) (line 162)