

Answering the Reviewers:

To Reviewer #1:

Thank you for your time reviewing our manuscript. We appreciate your positive comments and your advice is important to us and we have been making revisions correspondingly. We hope the revised version is to your satisfaction. We will give response to each question you raised as below:

"Some words (e.g. membraniferous – maybe better membranaceous, well indicated for surgery – maybe better absolutely indicated, also the verb forewent - - probably refused or rejected) seem to be at least uncommon if not incorrect. "

They have been revised.

"Also some grammar errors can be found (e.g. membraniferous appearances has – correctly appearance has or maybe appearances have). "

The subject of the sentence is "ASDH". However, we put an "an" in front of it in the revised version to make it correct in grammar. As we consider, A HEMATOMA can have XXX APPEARANCES. So maybe "'An acute subdural hematoma (ASDH) with incredible organization-like, membranaceous appearances has never been reported.'" should be appropriate.

"However I would suggest to describe the pre and postsurgery status in more details (GCS, pupils, motor deficits) even in the case summary."

We add the details in the main text where appropriate but NOT in the case summary, because according to the writing guideline of the journal, there is a word limit of case summary(150 words), we could add nothing more to enrich it.

"Regarding the clinical course – it would be interesting to know the intervals negative initial CT – lumbar tap, the approximate volume of CSF sample taken for evaluation and the interval lumbar tap – neurological deterioration."

We reorganized the language in TREATMENT section and also added some details with a clear time line, so these questions are answered.

"The fact that the patient had head injury before the deterioration is noted in the case summary, but it should be also described and emphasised in the main text, including more detailed description of the postinjury clinical course. "

We made the revision correspondingly.

"The relationship of the gelastic seizure to the fall should be also clarified."

Yes, we provided a time line and explained it clearly in the revised version.

“In general I strongly suggest rearrangements of the parts Imaging examinations and Treatment, because the current arrangement does not reflect the time course (the description of surgery in the Imaging examinations). Similarly in the reviewer’s opinion the details of the surgery (well presented) should not be included in the Discussion section. ”

Yes, very good advice as we revised correspondingly.

To Reviewer #2:

Thank you for your time reviewing our manuscript. We appreciate your positive comments and will try our best to further improve.