

Reviewer #1: The paper is well written and the case is clearly presented, thus possibly helping practitioners in managing and planning training exercises. I am only adding some minor comments that I hope could be helpful to strengthen the quality of the manuscript.

Specific comments Physical examination upon admission section.

Could you please add reference values?

Response: We have changed “Ranges of motion of both hip joints were: flexion 135/135 (, adduction 35/35, abduction 45/45, internal rotation 15/15, and external rotation 35/35.” to

“Ranges of motion of both hip joints were: flexion 135/135(0-135), adduction 35/35(0-35), abduction 45/45(0-45), internal rotation 15/15(0-15), and external rotation 35/35(0-35).” in the Manuscript.

How many jumps did she take? It will be interesting to have an estimate of the workload induced by the exercise (1 to 3 hours per day for 6 weeks) and compare it with other cases where NFSF are reported (i.e. running, etc..).

Response: We have described “The trampoline exercise protocol performed by the patient consisted of about 30 to 50 jumps per minute, and the range of hip flexion was 20 degrees to 110 degrees. This suggests that at least 1800 to 3000 hip flexion were performed per day for six weeks.” in the Manuscript.

Was this higher intensity?

Response: We have described “In this study, since the patient did a jumping exercise in place, it was difficult to accurately compare the FNSF caused by the running exercise with the exercise intensity. Assuming that the average step length when walking is 80.68cm [18] and when running, the average stride length is 240cm [19], the patient in this case is assumed to have a similar level of exercise to running about 1-4.5 miles per day. Comparing this result with other studies on FNSF after exercise in amateur athletes (6-7 miles per day) [20,21], it is difficult to say that there is a lot of exercise in this case. However, these results are difficult to compare objectively in this case, considering the characteristics of patients who do not have much exercise before doing trampoline exercise. In addition, in this study, the patient performed exercise for 6 weeks, but other studies [20,21] did not specify the duration of exercise, so there is a limit in objective comparison of exercise intensity.” in the Discussion.

What was the rom of the treatment?

Response: Since it became full ROM before surgery, no additional ROM treatment was performed.

EDITORIAL OFFICE'S COMMENTS

5 Issues raised: (1) The authors' information should add in the first page;

(2) The “Author Contributions” section is missing. Please provide the author contributions;

(3) The authors did not provide original pictures. Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor;

(4) PMID and DOI numbers are missing in the reference list. Please provide the PubMed numbers and DOI citation numbers to the reference list and list all authors of the references. Please revise throughout; and

(5) The reference cited in the text should be superscript.

6 STEPS FOR SUBMITTING REVISED MANUSCRIPT

Step 1: Author Information

Please click and download the Format for authorship, institution, and corresponding author guidelines, and further check if the authors names and institutions m

meet the requirements of the journal.

Response: During the revision, Professor Nam, who was mainly involved in the work, was changed to First author, and Prof. Hwang was changed to 2nd author and submitted.

Step 2: Manuscript Information

Please check if the manuscript information is correct.

Response: We checked.

Step 3: Abstract, Main Text, and Acknowledgements

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ights” section should be provided. Detailed writing requirements for “Article Highlights” can be found in the Guidelines and Requirements for Manuscript Revision.

Response: We checked.

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Response: We added.

CONFLICT-OF-INTEREST DISCLOSURE FORM

Response: We added.

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