

## **#1 SPECIFIC COMMENTS TO AUTHORS**

HCH is the most common chronic diseases, it has become a topic of global public health discussions. The authors conducted this randomized controlled trial to investigate the role of rehabilitative nursing interventions in optimizing the postoperative mental status recovery phase. This provided clinical value for future rehabilitation of patients with cerebral hemorrhage. On the whole, the authors have analyzed the relevant data of patients with cerebral hemorrhage and have done a lot of work, but the manuscript also needs to be carefully checked by the authors. I have some minor remarks: 1. The description of "5 self-evaluation item" in Pittsburgh sleep quality index is incorrect; according to the reviewer, it should be "5 others review projects". 2. It is suggested that observation group be uniformly described in the full text, and interventions group are now used in some places. 3. Table 3 was not cited in the text. 4. At the end of the article, the Research methods of ARTICLE HIGHLIGHTS needs to be re-checked. Thanks

## **#2 SPECIFIC COMMENTS TO AUTHORS**

The authors analyzed 120 patients with postoperative hypertensive cerebral hemorrhage postoperative hypertensive admitted between May 2021 and May 2023 using simple random sampling. The results of this randomized controlled trial showed that quality nursing interventions have an optimizing effect on the psychological state of patients with cerebral hemorrhage, which can significantly improve the psychological state of patients, promote the recovery of their consciousness, and increase nursing satisfaction and improve the doctor-patient relationship. This topic is actual and well described. The manuscript is well written and very interesting, and authors presented also the limitations of the study. I have only one question: I noted that the study used Simple random sampling. Why not use block randomization? As far as I know, block randomization has many advantages over simple randomization.

Response letter

For Reviewer #1

Q1: I have only one question: I noted that the study used Simple random sampling. Why not use block randomization? As far as I know, block randomization has many advantages over simple randomization.

Response: Thank you very much for your suggestion and we strongly agree with the issues you mentioned. The simple random sampling method is simple and easy to implement, so we chose to use simple random sampling during the design phase of the study.

For Reviewer #2

Q1: The description of "5 self-evaluation item" in Pittsburgh sleep quality index is incorrect; according to the reviewer, it should be "5 others review projects".

Response: Thank you very much for your questions, we have revised the content of the manuscript. The revisions are as follows:

It consists of 19 self-rating items and 5 others review projects, of which the 19th self-rating item and the 5 others review projects do not take part in the scoring process.

Q2: It is suggested that observation group be uniformly described in the full text, and interventions group are now used in some places.

Response: Thank you very much for your question, we have revised all

the grouping names in the content of the manuscript.

Q3: Table 3 was not cited in the text.

Response: Thank you very much for your suggestion, and we have referenced Table 3 in the text.

Q4: At the end of the article, the Research methods of ARTICLE HIGHLIGHTS needs to be re-checked. Thanks

Response: Thank you very much for your suggestions, and I apologize for the errors in the last submission of the manuscript, which we have revised. The revisions are as follows:

This randomized controlled study included 120 patients with cerebral HCH who were contained to our neurosurgery department between May 2021–May 2023 as the participants. The participants has randomly sampled and grouped into the observation and control groups. The observation group received the rehabilitation nursing model, whereas the control group have given conventional nursing. The conscious state of the patients was assessed at 7, 14, 21, and 30 days postoperatively. After one month of care, sleep quality, anxiety, and depression were compared between the two groups. Patient and family satisfaction were assessed using a nursing care model.