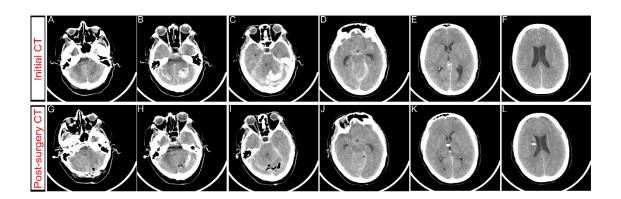
## SUPPLEMENTARY MATERIAL

Supplementary Figure 1: Initial computed tomography (CT) before and after emergent surgery. CT at admission (A-F): Extensive hemorrhage in the posterior fossa, showing left cerebellar parenchymal hematoma, subdural hematoma, and subarachnoid hemorrhage. The bleeding extended to contralateral cerebellar folia and fourth ventricle, which was compressed and displaced to the right. Hemorrhage produced a significant mass effect in the posterior fossa with tonsillar herniation signs. Notice also the enlargement of the supratentorial ventricular system. Post-surgical CT (G-L): Post-surgical changes secondary to decompressive craniectomy of the posterior fossa, with pneumocephalus and blood remnants in the surgical site. The fourth ventricle was reexpanded compared to the previous study. External ventricular drainage with front right entrance. The supratentorial ventricular system was decreased in size compared to the previous study.



**Supplementary Figure 2: Angio-CT and cerebral angiogram showed a cerebellar AVM and venous drainage impairment.** Angio-CT at admission: Axial (A1-A2), coronal (A3-A5) and sagital (B1-B5) views. Asymmetry between both transverse and sigmoid sinuses is observed, with smaller or absent caliber on the left. Besides, abnormal cerebellar vascular vessels were detected, thus suggesting the presence of a vascular malformation. Green arrows: transverse sinus. Yellow arrows: sigmoid sinus. Red arrows: vascular malformation. Cerebral angiogram: Cerebellar AVM (Spetzler-Martin grade I [S1V0E0], supplementary grade IV [A3U1D0]) demonstrated unilateral supply from the left PICA, as seen on left vertebral artery digital subtraction angiography. The venous pedicle drained superficially to the torcula. Arterial phase: (C1) left lateral, (C2) oblique, (C3) right lateral and (C4) anteroposterior views. C5: venous phase of left vertebral artery digital subtraction angiogram in anteroposterior view shows venous drainage to the peritorcular region. Notice also the lack of repletion of the left transverse and sigmoid sinuses. Green arrows: transverse sinus. Yellow arrows: sigmoid sinus.

