Journal Name:	Journal of Advances in Medicine and Medical Research
Manuscript Number:	**Ms_JAMMR_45576**
Title of the Manuscript:	**Administration of IV Thrombolytic Therapy in A Patient with Hemianopsia Symptoms**
Type of the Article	

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty'**, provided the manuscript is scientifically robust and technically sound.
To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline)

SDI Review Form 1.6

PART 1: Review Comments

	Reviewer's comment	**Author's comment** *(if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)*
Compulsory REVISION comments		
Minor REVISION comments	The authors present a clinical note reporting the case of a 60-year-old man with isolated hemianopia secondary to acute ischemic stroke in the PCA territory evaluated by IV thrombolysis. They reported the efficacy of thrombolytic therapy. This case report is potentially interesting but the manuscript can be improved according to the following suggestions: 1. Rewrite the Tittle: "Efficacy of IV thrombolytic therapy in a patient with isolated hemianopia due to ischemic stroke in the posterior cerebral artery territory" 2.In the Abstract it should be interesting to add "isolated hemianopia due to ischemic stroke in the posterior cerebral artery territory" 3. The results of echoDoppler of the supra-aortic trunks and echocardiography should be included. 4. Change in line 51 "Conclusions and Comments" to "Discussion" 5. A study on the impact of atrial fibrillation in prognosis in patients with ischemic stroke should be commented in the Discussion (see data in: Int J Cardiol 2000;73:33-42), and also mention that short-term prognosis of patients with cardioembolic stroke is poor when compared to other ischemic stroke subtypes (Expert Rev. Cardiovasc. Ther. 9(3), 367–379 (2011). 6. Clearly illustrate by an arrow the acute infarction observed in figure II. 7.Check reference #13	Echocardiography result was added. "Conclusions and Comments" have been changed to Sonuç Discussion Sonuç. (3), 367–379 (2011). The acute infarction seen in Figure II is clearly shown by the arrow. reference # 13 was checked.
Optional/General comments		

PART 2:

	Reviewer's comment	**Author's comment** *(if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)*
Are there ethical issues in this manuscript?	*(If yes, Kindly please write down the ethical issues here in details)*	