



SDI FINAL EVALUATION FORM 1.1

PART 1:

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
New Title:	IV Administration of Thrombolytic Therapy In A Case with Hemianopsia Symptoms
Type of Article:	Case report

PART 2:

FINAL EVALUATOR'S comments on revised paper (if any)	Authors' response to final evaluator's comments
<p>What was the NIHSS of the patient?</p> <p>In case presentation they mentioned: 1 In conclusion it was : 2</p> <p>Comments: English was well edited. After correction of the score we can accept the manuscript.</p>	

Reviewer Details:

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