



SDI Review Form 1.6

Journal Name:	Journal of Advances in Medicine and Medical Research
Manuscript Number:	Ms_JAMMR_48974
Title of the Manuscript:	CEREBRAL HEMODYNAMICS IN CHRONIC DISORDERS OF CEREBRAL CIRCULATION
Type of the Article	Original Research Article

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

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)
<u>Compulsory</u> REVISION comments	The manuscript is well written. The authors are congrats with this work.	Thank you
<u>Minor</u> REVISION comments	Some English words mistakes are found in this manuscript and I wish the authors can be corrected those. I hope the authors can revised the references.	Corrected
<u>Optional/General</u> comments		