



**SDI FINAL EVALUATION FORM 1.1**

**PART 1:**

Journal Name:	<a href="#">International Journal of Medical and Pharmaceutical Case Reports</a>
Manuscript Number:	Ms_IJMPCR_25429
Title of the Manuscript:	<b>Rare fracture of coronoid process along with zygomatic complex fracture- a case report</b>
Type of Article	<b>Case study</b>

**PART 2:**

<b>FINAL EVALUATOR'S comments on revised paper (if any)</b>	<b>Authors' response to final evaluator's comments</b>
<b>GOOD.</b>	

Reviewer Details:

Name:	<b>Anonymous</b>
Department, University & Country	<b>Krishna Institute of Medical Sciences, India</b>