SDI Review Form 1.6

Journal Name:	**International Journal of Medical and Pharmaceutical Case Reports**
Manuscript Number:	**Ms_IJMPCR_36791**
Title of the Manuscript:	**Atypical Femoral Fractures Following Use of Reclast™ After Prior Treatment with Alendronate: A Clinical Practice Series and Opinion**
Type of the Article	**Clinical Practice 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)

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	**It is a well written manuscript dealing with a topic of importance. The article can be published unaltered.**	
Minor REVISION comments		
Optional/General comments		

Reviewer Details:

Name:	*A. Papazafiropoulou*
Department, University & Country	*Department of Internal Medicine and Diabetes Center, Tzaneio General Hospital of Piraeus, Greece*