

**SDI FINAL EVALUATION FORM 1.1**

**PART 1:**

Journal Name:	<b>Journal of Complementary and Alternative Medical Research</b>
Manuscript Number:	<b>Ms_JOCAMR_119401</b>
Title of the Manuscript:	<b>Profile of Primary Headache Patients at Tanjung Priok Health Center for the Period of January – December 2023</b>
Type of the Article	<b>Original Research Article</b>

**PART 2:**

<b>FINAL EVALUATOR'S comments on revised paper (if any)</b>	<b>Authors' response to final evaluator's comments</b>
<b>Take it into consideration for publication</b>	

**Reviewer Details:**

Name:	<b>Shivaranjani Kantharia</b>
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