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Guidelines for writing and formatting high quality Case Reports

Name of Journal:
Manuscript Type: CASE REPORT
Title: <i>The words "case report" should be in the title. Key elements of the case should be mentioned in the title and might include the presenting symptoms, diagnosis, intervention, or outcome.</i>
Kind reminder: Is the title appropriate and does it reflect the key feature(s) of the Case Report?
Running title:
Authorship
Authorship, Institution
ORCID number:
Author contributions:
Supported by
Informed consent:
Conflict-of-interest:
CARE Checklist (2016) statement:
Corresponding author:
Telephone:
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Abstract:

The structured abstract should be at least 250 words. The abstract subsections will include background, case summary, and conclusion, written as:

BACKGROUND (no more than 80 words)

What does this case report add to the medical literature? Why did you write it up?

CASE SUMMARY (no more than 150 words)

What were the chief complaints, diagnoses, interventions, and outcomes?

CONCLUSION (no more than 20 words)

What is the main "take-away" lesson from this case?

Kind reminder: Does the abstract's overall content match that of the main and short titles? Is it structured according to the format shown above?

Key words:

Please list 4-7 key words (including "case report") which reflect the content of the study and are selected mainly from the MeSH descriptors of the content appropriate MeSH Tree category. For more information on the Medical Subject Headings (MeSH), go to: <https://www.nlm.nih.gov/mesh/>

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Core tip :

Please write a summary of no more than 100 words to present the core content of your manuscript, highlighting the most innovative and important findings and/or arguments.



INTRODUCTION

The Introduction describes the subject, purpose and merit of the case report, and the strategy used for the literature review.

The key points for writing the Introduction are as follows:

- Describe the subject matter.
- State the purpose of the case report.
- Provide background information.
- Provide pertinent definitions.
- Describe the strategy of the literature review and provide search terms.
- Justify the merit of the case report by using the literature review.
- Introduce the patient case to the reader.
- Make the Introduction brief and less than three paragraphs.

Kind reminder: Does the Introduction clearly describe a special clinical problem? Does it present adequate and reasonable rationales for the study? Does it clearly describe a research aim or a research hypothesis?

CASE PRESENTATION

Under the heading of Case Presentation, the following seven aspects must be presented in this order: 1) Chief complaints; 2) History of present illness; 3) History of past illness; 4) Personal and family history; 5) Physical examination upon admission; 6) Laboratory examinations—e.g., routine blood tests, routine urine tests and urinary sediment examination, routine fecal tests and occult blood test, blood biochemistry, immune indexes, and infection indexes; and 7) Imaging examinations—e.g., ultrasound, plain abdominal and pelvic CT scan, high-resolution chest CT scan, and head MRI. The patient case presentation should be descriptive, organized chronologically, accurate, salient, and presented in a narrative form.



The key points for writing the Case Presentation are as follows:

- Describe the case in a narrative form.
- Provide patient demographics (age, sex, height, weight, race, occupation).
- Avoid patient identifiers (date of birth, initials).
- Describe the patient's complaint.
- List the patient's present illness.
- List the patient's medical history.
- List the patient's family history.
- List the patient's social history.
- List the patient's medication history before admission and throughout the case duration that is described in the report.
- Ensure that the medication history includes any herbals, vaccines, depot injections, and nonprescription medications, and state that the patient was asked for this history.
- List each drug's name, strength, dosage form, route, and dates of administration.
- Verify the patient's medication adherence.
- Provide renal and hepatic organ function data for determining the appropriateness of medication dosing regimens.
- List the patient's drug allergy status, including the name of the drug (brand or generic) and the date and type of reaction.
- List the patient's adverse drug reaction history and the dates of any reactions.
- Provide pertinent serum drug levels and include the time of each level taken and its relationship to a dose.
- Provide the patient's dietary history.
- Provide pertinent findings on physical examination.
- Provide pertinent laboratory values that support the case.



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- Provide the reference range for laboratory values that are not widely known or established.
- List the completed diagnostic procedures that are pertinent and support the case.
- Paraphrase the salient results of the diagnostic procedures.
- Provide photographs of histopathology, roentgenograms, electrocardiograms, skin manifestations, or anatomy as they relate to the case.
- Obtain permission from the patient to use the patient's photographs, or follow institutional guidelines.
- Provide the patient's events in chronological order.
- Ensure a temporal relationship.
- Ensure a causal relationship.
- Ensure that the patient case presentation provides enough detail for the reader to establish the case's validity.

Kind reminder: Are patient characteristics described appropriately in the Case Presentation? Is the initial clinical scenario described appropriately? Does the clinical scenario support the intervention? Are other interventions discussed? Is there any good reason to rule out other interventions? Are intervention techniques and clinical operations described appropriately? Are clinical outcomes described in detail? Are the effects of treatment clearly reported? Are follow-up outcomes reported? Do figures adequately and appropriately describe the initial clinical scenario? Do figures adequately and appropriately describe the technical process of treatment? Do figures adequately and appropriately describe the final clinical scenario?

MULTIDISCIPLINARY EXPERT CONSULTATION (if relevant)

Andrzej S Tarnawski, DSc, MD, PhD, Professor, Chief of Gastroenterology



Bao-Gan Peng, MD, PhD, Chief Doctor, Professor, Department of Spinal Surgery

FINAL DIAGNOSIS

TREATMENT

OUTCOME AND FOLLOW-UP

DISCUSSION

The discussion should compare and contrast the case report's findings with the literature review, establish causal and temporal relationships, and validate the case with a probability scale. The literature review should be extensive and should support the justification of the Case Report. The discussion section should end with a brief summary of the case along with rational recommendations and conclusions.

The key points for writing the Discussion are as follows:

- Compare and contrast the nuances of the case report with the literature review.
- Explain or justify the similarities and differences between the case report and the literature.
- List the limitations of the case report and describe their relevance.
- Confirm the accuracy of the descriptive patient case report.
- Establish a temporal relationship.
- Establish a causal relationship.
- Report the validity of the case report by applying a probability scale such as the Naranjo nomogram.
- Summarize the salient features of the case report.
- Justify the uniqueness of the case.
- Draw recommendations and conclusions.

Kind reminder: Are the limitations of methodology discussed from a perspective of



research design in the Discussion? Is there any discussion about the potential variation of clinical outcomes? Is there any discussion about literature evidence supporting the intervention? Are the factors that limit the intervention's proper implementation discussed?

CONCLUSION

The Conclusion section must provide a brief conclusion with evidence-based recommendations.

The key points for writing the Conclusion are as follows:

- Provide a justified conclusion.
- Provide evidence-based recommendations.
- Describe how the information learned from this case report will apply to one's own practice.
- List opportunities for research.
- Ensure that this section is brief and does not exceed one paragraph.

Kind reminder: Is the conclusion clear and does it have bias? Is it drawn based on the clinical significance of research results? Do you clearly describe whether the treatment was successful?

ACKNOWLEDGMENTS

Brief acknowledgments should be included for persons who have made genuine contributions to the manuscript and who endorse the data and conclusions. The name of commercial companies, such as English language editing companies, should not be present in this section.

REFERENCES

- Case Reports generally have 30–60 references.

Appendix A – Criteria for publishable Case Reports



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Publishable patient case reports include cases that:

- Advance medical science and spawn research.
- Describe rare, perplexing or novel diagnostic features of a disease state.
- Report therapeutic challenges, controversies, or dilemmas.
- Describe a new surgical procedure.
- Report how a drug can enhance a surgical procedure.
- Teach humanistic lessons to the health care professional.
- Review a unique job description of a health care professional that improves patient care.
- Report new medical errors or medication errors.
- Discover a device malfunction that results in patient harm.
- Describe adverse effects and patient toxicity of a radiopaque agent.
- Describe life-threatening adverse events.
- Describe dangerous and predictable adverse effects that are poorly appreciated and rarely recognized.
- Describe rare or novel adverse drug reactions.
- Describe a therapeutic failure or a lack of therapeutic efficacy.
- Describe rare or novel drug–drug, drug–food or drug–nutrient interactions.
- Report unlabeled or unapproved uses of a medication.
- Explore the use of pharmacogenomics to manage disease.
- Use life-saving techniques not previously documented.
- Use pharmacoeconomic principles that improve patient care.
- Uncover barriers to patient adherence.
- Discover an interaction between a drug and a laboratory test that yields a false-positive or false-negative result.
- Describe the effect of drugs in pregnancy and lactation.



- Detect novel pharmacokinetic or pharmacodynamic principles.
- Use technology to improve patient outcomes.

Appendix B – Preparing to upload the manuscript and relevant files

- Manuscript File

<https://www.wjgnet.com/bpg/GerInfo/187>

- Signed Informed Consent Form(s) or Document(s)

<https://www.wjgnet.com/bpg/GerInfo/287>

- Conflict-of-Interest Disclosure Form

<http://www.icmje.org/about-icmje/faqs/conflict-of-interest-disclosure-forms/>

- Copyright License Agreement

<https://www.wjgnet.com/bpg/gerinfo/250>.

- Non-Native Speakers of English Editing Certificate

<https://www.wjgnet.com/bpg/gerinfo/240>.

- CARE Checklist (2016)

<https://www.care-statement.org/care-checklist.html>

Appendix C – References for preparing the Case Report with guidelines for writing and content formatting

1 **Cohen H.** How to write a patient case report. *Am J Health Syst Pharm* 2006; 63(19):1888-92.

<http://www.ajhp.org/content/63/19/1888.long?sso-checked=true>

2 **Oliveira GJ, Leles CR.** Critical appraisal and positive outcome bias in case reports published in Brazilian dental journals. *J Dent Educ* 2006;70(8):869-74.

<http://www.jdentaled.org/content/70/8/869.long>

3 **CARE Checklist (2016).** <https://www.care-statement.org/care-checklist.html>