CARE case report guidelines

CARE Checklist of information to include when writing a case report

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Topic	Item No	Checklist item description	Reported on Page Number/Line Number	Reported on Section/Paragraph
Title	1	The diagnosis or intervention of primary focus followed by the words “case report”	1/1	Title
Key Words	2	2 to 5 key words that identify diagnoses or interventions in this case report, including "case report"	1/28	Key Words
Abstract (Structured summary)	3a	Background: state what is known and unknown; why the case report is unique and what it adds to existing literature.	1/4	Section 1 Paragraph 1
	3b	Case Description: describe the patient’s demographic details, main symptoms, history, important clinical findings, the main diagnosis, interventions, outcomes and follow-ups.	1/11	Section 1 Paragraph 2
	3c	Conclusions: summarize the main take-away lesson, clinical impact and potential implications.	1/23	Section 1 paragraph 3
Introduction	4	One or two paragraphs summarizing why this case is unique **(may include references)**	1/30	Section 2 paragraph 1
Patient Information	5a	De-identified patient specific information	2/51	Section 3 paragraph 1
	5b	Primary concerns and symptoms of the patient	2/53	Section 3 paragraph 1
	5c	Medical, family, and psycho-social history including relevant genetic information	2/55	Section 3 paragraph 1
	5d	Relevant past interventions with outcomes	2/56	Section 3 paragraph 1
Clinical Findings	6	Describe significant physical examination (PE) and important clinical findings	2/69	Section 3 paragraph 2
Timeline	7	Historical and current information from this episode of care organized as a timeline	n/a	
Diagnostic Assessment	8a	Diagnostic testing (such as PE, laboratory testing, imaging, surveys).	2/70	Section 3 paragraph 2
	8b	Diagnostic challenges (such as access to testing, financial, or cultural)	n/a	Section 3 paragraph 2
	8c	Diagnosis (including other diagnoses considered)	3/92	Section 3 paragraph 2
	8d	Prognosis (such as staging in oncology) where applicable	n/a	n/a
Therapeutic Intervention	9a	Types of therapeutic intervention (such as pharmacologic, surgical, preventive, self-care)	3/ 83-101	Sectin 3 paragraph 3
	9b	Administration of therapeutic intervention (such as dosage, strength, duration)	3/ 83-101	Sectin 3 paragraph 3
	9c	Changes in therapeutic intervention (with rationale)	n/a	n/a

Follow-up and Outcomes	10a	Clinician and patient-assessed outcomes (if available)	4/ 109	Section 3 paragraph 4
	10b	Important follow-up diagnostic and other test results	4/ 109	Section 3 paragraph 4
	10c	Intervention adherence and tolerability (How was this assessed?)	4/ 109	Section 3 paragraph 4
	10d	Adverse and unanticipated events	4/ 109	Section 3 paragraph 4
Discussion	11a	A scientific discussion of the strengths AND limitations associated with this case report	n/a	n/a
	11b	Discussion of the relevant medical literature **with references**	5/ 123-164	Section 4 paragraph 1-3
	11c	The scientific rationale for any conclusions (including assessment of possible causes)	5/146-153	Section 4 paragraph 3
	11d	The primary “take-away” lessons of this case report (without references) in a one paragraph conclusion	6/ 163	Section 5 paragraph 1
Patient Perspective	12	The patient should share their perspective in one to two paragraphs on the treatment(s) they received	n/a	n/a
Informed Consent	13	Did the patient give informed consent? Please provide if requested	**Yes** ☑	**No** ☐

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*As the checklist was provided upon initial submission, the page number/line number reported may be changed due to copyediting and may not be referable in the published version. In this case, the section/paragraph may be used as an alternative reference.