

## CARE Checklist of information to include when writing a case report





Торіс	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"	1/1-2	1/1
Key Words	2	2 to 5 key words that identify diagnoses or interventions in this case report, including "case report"	2/46	2/1
Abstract (no references)	3a	Introduction: What is unique about this case and what does it add to the scientific literature?	2/37-44	2/1
	3b	Main symptoms and/or important clinical findings	2/30-37	2/1
	3c	The main diagnoses, therapeutic interventions, and outcomes	2/30-37	2/1
	3d	Conclusion—What is the main "take-away" lesson(s) from this case?	2/41-44	2/1
Introduction	4	One or two paragraphs summarizing why this case is unique (may include references)	3/55-125	3/1-7
Patient Information	5a	De-identified patient specific information	6/128-130, 7/155-158	4/1, 5/1
	5b	Primary concerns and symptoms of the patient	6/128-130, 7/155-158	4/1, 5/1
	5c	Medical, family, and psycho-social history including relevant genetic information	N/A nil significant & 7/156	N/A nil significant & 5/1
	5d	Relevant past interventions with outcomes	N/A nil significant piror	N/A nil significant piror
Clinical Findings	6	Describe significant physical examination (PE) and important clinical findings	6/129-131, 7/157-161	4/1, 5/1
Timeline	7	Historical and current information from this episode of care organized as a timeline	N/A described in text	N/A described in text
Diagnostic Assessment	8a	Diagnostic testing (such as PE, laboratory testing, imaging, surveys).	6/130-146, 7/157-176	4/1-3, 5/1-4
	8b	Diagnostic challenges (such as access to testing, financial, or cultural)	6,8,9/128-146,185-199	4/3,1, 6/1
	8c	Diagnosis (including other diagnoses considered)	6/146, 5/165-169	4/3, 5/2,3
	8d	Prognosis (such as staging in oncology) where applicable	7/150, 8/181-182	4/3, 5/5
Therapeutic Intervention	9a	Types of therapeutic intervention (such as pharmacologic, surgical, preventive, self-care)	6/132-149, 7/167-176	4/1-3, 5/3,4
	9b	Administration of therapeutic intervention (such as dosage, strength, duration)	6/132-149, 7/167-176	4/1-3, 5/3,4
	9c	Changes in therapeutic intervention (with rationale)	6/132-149, 7/167-176	4/1-3, 5/3,4

Follow-up and Outcomes	10a	Clinician and patient-assessed outcomes (if available)	6,7/147-150, 8/177	4/3, 5/5
	10b	Important follow-up diagnostic and other test results	7/150-152, 8/177-182	4/3, 5/5
	10c	Intervention adherence and tolerability (How was this assessed?)	6/147-149, 8/175-177	4/4, 5/4,5
	10d	Adverse and unanticipated events	N/A nil major AE & 8/177	N/A nil major AE & 5/5
Discussion	11a	A scientific discussion of the strengths AND limitations associated with this case report	8,9/185-220 ,10/229-234	6/1-4, 6/5,6
	11b	Discussion of the relevant medical literature with references	8,9,10/185-234	6/1-6
	11c	The scientific rationale for any conclusions (including assessment of possible causes)	9/208-217, 10/221-234	6/3, 6/5,6
	11d	The primary "take-away" lessons of this case report (without references) in a one paragraph conclusion	10,11/237-246	7/1
Patient Perspective	12	The patient should share their perspective in one to two paragraphs on the treatment(s) they received	N/A not included	N/A not included
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.