

Special section “Case Reports in Otolaryngology”

I have been invited to join the Editorial Board of *AME Case Reports (ACR)* and head up the Section “Case Reports in Otolaryngology”. While case reports tend to be misunderstood—more so by journal editors and academics because of their poor quality and “lowering the impact factor” of the journal in which it appears! Most academics were one time trainees and if they be honest their career in publishing must have included a number of “case reports”? (1).

The “case report” is an exercise describing the diagnosis and/or outcome of an individual patient, and a “case series” is usually a “retrospective” reporting of a “group of patients” with the same disease or condition or who have been treated in a similar way, over a defined period of time (1). Case reports allow clinicians to engage with real clinical scenarios, and to contemplate the decision making and actions of the treating team. In addition to the focus on health issues, case reports can be used to stimulate clinicians, mainly trainees, into considering the wider social, cultural, political, and economic issues that may contribute to and impact on health status of an individual (2). Effective working with other disciplines is an essential skill for all health care professionals, and inter-professional learning using case reports may contribute to and foster knowledge sharing and development of the required competencies to successfully collaborate with peers. In addition, sharing practices through case reports provides a means to actively engage trainee clinicians and through insight into the use of clinical guidelines, encourage consideration around issues on guideline informed practice (3).

To improve the quality of CAse REports or CARE Guidelines were developed in 2013 to provide a framework that supports transparency and accuracy in the publication of case reports and the reporting of information from patients encountered (4). These have been adopted by multiple journals and compliance with them has been mandatory at the *International Journal of Surgery Case Reports (IJSR)*. However, they are not tailored to surgery following a review of some 3,000 case reports (5). Following such findings a Delphi consensus exercise amongst experienced case report reviewers and editors was coordinated to develop the Surgical CAse REport (SCARE) Guidelines (6). The SCARE Guidelines developed [2016] consists of a 14-item checklist and the impact of such guidelines has resulted in a 10% improvement in reporting (7,8). A similar Delphi consensus exercise has been completed and its impact effect on the reporting of case series—Preferred Reporting Of CasE Series in Surgery (PROCESS) Guidelines (9,10).

ACR is an international, open access, peer-reviewed online journal publishing original and educationally valuable case reports. The launch of *ACR* as an open access journal is a giant leap forward in this process. *ACR* aims to provide clinical information on common and rare cases in all medical disciplines for healthcare professionals, researchers and others. With a rigorous peer review system and prominent strategic advisory board, *ACR* will publish spontaneously submitted reports along with those referred from over 40 supporter journals. Also, by delivering the content free of charge to authors and readers, and with a rapid and widespread dissemination in an electronic form, we will help facilitate the management of more cases encountered by many more surgeons and researchers.

Acknowledgements

None.

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doi: 10.21037/acr.2018.01.02

Conflicts of Interest: The author has no conflicts of interest to declare.

View this article at: <http://dx.doi.org/10.21037/acr.2018.01.02>

doi: 10.21037/acr.2018.01.02

Cite this article as: Bradley PJ. Special section “Case Reports in Otolaryngology”. *AME Case Rep* 2018;2:1.