

DEVELOPING A CASE REPORT FROM OBSERVATION TO WRITING : AN ESSENTIAL GUIDE

¹Gokulakrishnan J, ²Dr P. Lakshmikanth

¹Assistant Professor, Thanthai Roever College of Physiotherapy, Perambalur, Affiliated to The Tamil Nadu Dr. M. G. R. Medical University, Chennai, India Tamilnadu,India

²Principal, Sir Issac Newton College of Physiotherapy, Nagapattinam, Affiliated to The Tamil Nadu Dr. M. G. R. Medical University, Chennai, India Tamilnadu,India

ABSTRACT

Since before Hippocrates, case reports have provided a rich resource for teaching and research in medicine. Case reports are published by many prominent journals—more than 140,000 case reports are indexed in MEDLINE from 1996 to present—and a number of narrative guidelines for the preparation of case reports have appeared in the medical literature. To facilitate the preparation of case reports, we reviewed the existing guidelines and a random sampling of published case reports and created a fill-in-the-blanks worksheet for physicians to use to capture unique scientific observations. Although originally developed to assist family practice residents to write case reports, the case report worksheet can be used by physicians in any practice setting and any discipline to collect and report interesting, unusual, or newsworthy cases.

KEY WORDS: Case reports, Guide, Medical Literature, Patient.

INTRODUCTION

- Describe the context of the case and explain its relevance and importance
- Describe whether the case is unique. If not, does the case have an unusual diagnosis, prognosis, therapy or harm? Is the case an unusual presentation of a common condition? Or an unusual complication of a disease or management?
- Describe the instructive or teaching points that add value to this case. Does it demonstrate a cost-effective approach to management or alternative diagnostic/treatment strategy? Does it increase awareness of a rare condition?

CASE DESCRIPTION

- Follow the basic rules of medical communication. Report the case in sequence.
- Describe the history, examination and investigations adequately. Is the cause of the patient's illness clear-cut? What are other plausible explanations?
- Describe the treatments adequately. Have all available therapeutic options been considered? Are outcomes related to treatments? Include the patient's progress and outcome.

Patient Information

- De-identified patient specific information.
- Primary concerns and symptoms of the patient.
- Medical, family, and psychosocial history including relevant genetic information.
- Relevant past interventions and their outcomes.

Clinical Findings – Describe significant physical examination (PE) and important clinical findings.

Timeline – Historical and current information from this episode of care organized as a timeline (figure or table).

Diagnostic Assessment

- Diagnostic methods (PE, laboratory testing, imaging, surveys).
- Diagnostic challenges.
- Diagnosis (including other diagnoses considered).
- Prognostic characteristics when applicable.

Therapeutic Intervention

- Types of therapeutic intervention (pharmacologic, surgical, preventive).
- Administration of therapeutic intervention (dosage, strength, duration).
- Changes in therapeutic interventions with explanations.

Follow-up and Outcomes

- Clinician- and patient-assessed outcomes if available.
- Important follow-up diagnostic and other test results.
- Intervention adherence and tolerability. (How was this assessed?)
- Adverse and unanticipated events.

DISCUSSION

- Discuss rationale for decisions that were made and the lesson from the case.
- Report a literature review of other similar cases. Describe how this case is different from those previously reported.
- Explain the rationale for reporting the case. What is unusual about the case? Does it challenge prevailing wisdom?
- In the future, could things be done differently in a similar case?
- Strengths and limitations in your approach to this case.
- Discussion of the relevant medical literature.

CONCLUSION

- The rationale for your conclusions.
- The primary “take-away” lessons from this case report (without references) in a one paragraph conclusion.

REFERENCES

References should be drawn primarily from peer-reviewed journal articles. Authors should use the most recent references possible, unless the history of scholarship in a topic area is being discussed. It is acceptable to use relevant references from books for information that is unlikely to change substantially over time; yet, journal articles provide current information. Magazines and newspapers should not be used as sources of evidence for a peer-reviewed clinical manuscript, except under highly unusual situations

Patient Perspective – The patient should share their perspective on the treatment(s) they received.

Informed Consent – The patient should give informed consent. (Provide if requested).

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