

Some hints for health care professionals on writing case reports for publication

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The report should generally include 4 sections (Introduction, Case Description, Discussion, and References).

- Introduction
 - Keep it brief (about 1–3 paragraphs).
 - Do not review the general topic in detail. Instead, focus on the reasons why the case is unique or important.
- Case Description
 - Usually includes the following details (in order):
 - The patient’s primary symptoms, or, if the patient was referred to you by another clinician, the reasons why.
 - A brief medical history that focuses on those details that are most relevant to the patient’s current condition. The time sequence of events should be made as clear as possible.
 - Physical examination results.
 - Laboratory test results.
 - Other test results.
 - Treatment.
 - Outcome.
 - Some of these elements can be described in independent sections of the report if they are particularly detailed. For example, if the case involved a novel surgical

procedure, the description of the procedure could follow the Case Description in a separate Surgical Technique section.

- The Case Description section should emphasize those symptoms, findings, or aspects of treatment that distinguish the case from others (and therefore make it worthy of a case report).
- Discussion
 - Discuss any published evidence that relates to your case.
 - If you are describing a novel disease or syndrome, discuss any important ambiguities in or alternative explanations for your findings.
 - If you are describing a new treatment approach, explain why conventional approaches were ruled out.
 - Conclude with the implications of your case for research, diagnosis, or treatment.
 - In some journals, you may include a Conclusions section instead of or in addition to the Discussion. (You may want to look at other case reports in your target journal to see what is usual.)
- References
 - Include only references that are directly relevant to your report. Most case reports need no more than a dozen references (with the exception of case reports that double as literature reviews).

Important considerations

- Before you start writing, conduct a thorough literature search to make sure that your case is sufficiently different from others to justify writing a report about it. The most

commonly cited reason for the outright rejection of a case report by a journal is that the report does not include any particularly new information.

- Consult the journal's Instructions to Authors before you start writing, or after you finish your first draft, to make sure your report fits the journal's requirements (eg, for length, number of references, required information).
- Figures are often important, particularly when you are reporting a phenomenon that readers are unlikely to have seen. For example, if you are reporting an unusual congenital cardiac malformation, you will want to include images (e.g., CT scans, MR images, or operative photographs) that show it clearly.
- Provide relevant demographic information about the patient (e.g., age, sex) but avoid including any details or photographs that would enable a reader to identify the patient. If such details must be included, the patient should be asked to give informed consent.
- Avoid language that dehumanizes the patient. For example:
 - Remember that "patient" and "case" are not synonyms. A case is an instance of a disease; a patient is a person who has the disease.
 - Refer to the patient as a "man," "woman," "boy," or "girl," and not as a "male" or "female." (These words could just as easily describe a rat or a rhesus monkey as they could a patient).