



**CARE Checklist (2013) of information to include when writing a case report**



Topic	Item	Checklist item description	Reported on Page Number
<b>Title</b>	1	The words "case report" should be in the title along with the area of	1
	2	2 to 5 key words that identify areas covered in this case	3
<b>Key Words</b>	3a	Introduction—What is unique about this case? What does it add to the medical literature? . . . . .	5
	3b	The main symptoms of the patient and the important clinical findings . . . . .	5
	3c	The main diagnoses, therapeutics interventions, and outcomes . . . . .	5
	3d	Conclusion—What are the main "take-away" lessons from this case? . . . . .	5
<b>Abstract</b>	4	One or two paragraphs summarizing why this case is unique with references . . . . .	5
<b>Introduction</b>	5a	De-identified demographic information and other patient specific information . . . . .	5
	5b	Main concerns and symptoms of the patient . . . . .	5
	5c	Medical, family, and psychosocial history including relevant genetic information (also see timeline) . .	6
	5d	Relevant past interventions and their outcomes . . . . .	6
<b>Patient Information</b>	6	Describe the relevant physical examination (PE) and other significant clinical findings. . . . .	6
	7	Important information from the patient's history organized as a timeline . . . . .	6
<b>Clinical Findings</b>	8a	Diagnostic methods (such as PE, laboratory testing, imaging, surveys). . . . .	7
	8b	Diagnostic challenges (such as access, financial, or cultural) . . . . .	7
	8c	Diagnostic reasoning including other diagnoses considered . . . . .	7
	8d	Prognostic characteristics (such as staging in oncology) where applicable . . . . .	7
<b>Timeline</b>	9a	Types of intervention (such as pharmacologic, surgical, preventive, self-care) . . . . .	7
	9b	Administration of intervention (such as dosage, strength, duration) . . . . .	7
	9c	Changes in intervention (with rationale) . . . . .	7
<b>Diagnostic Assessment</b>	10a	Clinician and patient-assessed outcomes (when appropriate) . . . . .	7
	10b	Important follow-up diagnostic and other test results . . . . .	7
	10c	Intervention adherence and tolerability (How was this assessed?) . . . . .	7
	10d	Adverse and unanticipated events . . . . .	7
<b>Therapeutic Intervention</b>	11a	Discussion of the strengths and limitations in your approach to this case . . . . .	8
	11b	Discussion of the relevant medical literature. . . . .	8
	11c	The rationale for conclusions (including assessment of possible causes) . . . . .	8
	11d	The primary "take-away" lessons of this case report . . . . .	9
<b>Follow-up and Outcomes</b>	12	When appropriate the patient should share their perspective on the treatments they received . . . . .	10
	13	Did the patient give informed consent? Please provide if requested . . . . .	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
<b>Discussion</b>	12	When appropriate the patient should share their perspective on the treatments they received . . . . .	10
	13	Did the patient give informed consent? Please provide if requested . . . . .	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
<b>Patient Perspective</b>	12	When appropriate the patient should share their perspective on the treatments they received . . . . .	10
	13	Did the patient give informed consent? Please provide if requested . . . . .	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
<b>Informed Consent</b>	12	When appropriate the patient should share their perspective on the treatments they received . . . . .	10
	13	Did the patient give informed consent? Please provide if requested . . . . .	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>