



Topic Checklist Item description

Reported on Line

Topic	Item	Checklist Item description	Reported on Line	
Title	1	The words "case report" should be in the title along with the area of focus.	<input checked="" type="checkbox"/>	
	Key Words	2	2 to 5 key words that identify areas covered in this case report.	<input checked="" type="checkbox"/>
		3a	Introduction—What is unique about this case? What does it add to the medical literature?	<input checked="" type="checkbox"/>
		3b	The main symptoms of the patient and the important clinical findings.	<input checked="" type="checkbox"/>
Abstract	3c	The main diagnoses, therapeutics interventions, and outcomes.	<input checked="" type="checkbox"/>	
	3d	Conclusion—What are the main "take-away" lessons from this case?	<input checked="" type="checkbox"/>	
	4	One or two paragraphs summarizing why this case is unique with references.	<input checked="" type="checkbox"/>	
Introduction	5a	De-identified patient specific information.	<input checked="" type="checkbox"/>	
	5b	Main concerns and symptoms of the patient.	<input checked="" type="checkbox"/>	
	5c	Medical, family, and psychosocial history including relevant genetic information (also see timeline).	<input checked="" type="checkbox"/>	
	5d	Relevant past interventions and their outcomes.	<input checked="" type="checkbox"/>	
	6	Describe the relevant physical examination (PE) and other significant clinical findings.	<input checked="" type="checkbox"/>	
Clinical Findings	7	Important information from the patient's history organized as a timeline.	<input checked="" type="checkbox"/>	
	Diagnostic Assessment	8a	Diagnostic methods (such as PE, laboratory testing, imaging, surveys).	<input checked="" type="checkbox"/>
8b		Diagnostic challenges (such as access, financial, or cultural).	<input checked="" type="checkbox"/>	
8c		Diagnostic reasoning including other diagnoses considered.	<input checked="" type="checkbox"/>	
8d		Prognostic characteristics (such as staging in oncology) where applicable.	<input checked="" type="checkbox"/>	
Therapeutic Intervention	9a	Types of intervention (such as pharmacologic, surgical, preventive, self-care).	<input checked="" type="checkbox"/>	
	9b	Administration of intervention (such as dosage, strength, duration).	<input checked="" type="checkbox"/>	
	9c	Changes in intervention (with rationale).	<input checked="" type="checkbox"/>	
Follow-up and Outcomes	10a	Clinician and patient-assessed outcomes (when appropriate).	<input checked="" type="checkbox"/>	
	10b	Important follow-up diagnostic and other test results.	<input checked="" type="checkbox"/>	
	10c	Intervention adherence and tolerability (How was this assessed?).	<input checked="" type="checkbox"/>	
	10d	Adverse and unanticipated events.	<input checked="" type="checkbox"/>	
Discussion	11a	Discussion of the strengths and limitations in your approach to this case.	<input checked="" type="checkbox"/>	
	11b	Discussion of the relevant medical literature.	<input checked="" type="checkbox"/>	
	11c	The rationale for conclusions (including assessment of possible causes).	<input checked="" type="checkbox"/>	
	11d	The primary "take-away" lessons of this case report.	<input checked="" type="checkbox"/>	
Patient Perspective	12	When appropriate the patient should share their perspective on the treatments they received.	<input checked="" type="checkbox"/>	
	13	Did the patient give informed consent? Please provide if requested.	<input checked="" type="checkbox"/>	

Yes No

