



CARE Checklist – 2016: Information for writing a case report

Topic	Item	Checklist item description	Line/Page
Title	1	The words "case report" should be in the title along with the area of focus	<input checked="" type="checkbox"/>
Key Words	2	Four to seven key words—include "case report" as one of the key words	<input checked="" type="checkbox"/>
Abstract	3a	Background: What does this case report add to the medical literature?	<input checked="" type="checkbox"/>
	3b	Case summary: chief complaint, diagnoses, interventions, and outcomes	<input checked="" type="checkbox"/>
	3c	Conclusion: What is the main "take-away" lesson from this case?	<input checked="" type="checkbox"/>
Introduction	4	The current standard of care and contributions of this case—with references (1-2 paragraphs)	<input checked="" type="checkbox"/>
Timeline	5	Information from this case report organized into a timeline (table or figure)	<input type="checkbox"/>
Patient Information	6a	De-identified demographic and other patient or client specific information	<input type="checkbox"/>
	6b	Chief complaint—what prompted this visit?	<input checked="" type="checkbox"/>
	6c	Relevant history including past interventions and outcomes	<input checked="" type="checkbox"/>
Physical Exam	7	Relevant physical examination findings	<input checked="" type="checkbox"/>
Diagnostic Assessment	8a	Evaluations such as surveys, laboratory testing, imaging, etc.	<input checked="" type="checkbox"/>
	8b	Diagnostic reasoning including other diagnoses considered and challenges	<input checked="" type="checkbox"/>
	8c	Consider tables or figures linking assessment, diagnoses and interventions	<input checked="" type="checkbox"/>
	8d	Prognostic characteristics where applicable	<input checked="" type="checkbox"/>
Interventions	9a	Types such as life-style recommendations, treatments, medications, surgery	<input checked="" type="checkbox"/>
	9b	Intervention administration such as dosage, frequency and duration	<input checked="" type="checkbox"/>
	9c	Note changes in intervention with explanation	<input checked="" type="checkbox"/>
	9d	Other concurrent interventions	<input checked="" type="checkbox"/>
Follow-up and Outcomes	10a	Clinician assessment (and patient or client assessed outcomes when appropriate)	<input checked="" type="checkbox"/>
	10b	Important follow-up diagnostic evaluations	<input checked="" type="checkbox"/>
	10c	Assessment of intervention adherence and tolerability, including adverse events	<input checked="" type="checkbox"/>
Discussion	11a	Strengths and limitations in your approach to this case	<input checked="" type="checkbox"/>
	11b	Specify how this case report informs practice or Clinical Practice Guidelines (CPG)	<input checked="" type="checkbox"/>
	11c	How does this case report suggest a testable hypothesis?	<input checked="" type="checkbox"/>
	11d	Conclusions and rationale	<input checked="" type="checkbox"/>
Patient Perspective	12	When appropriate include the assessment of the patient or client on this episode of care	<input checked="" type="checkbox"/>
Informed Consent	13	Informed consent from the person who is the subject of this case report is required by most journals	<input checked="" type="checkbox"/>
Additional Information	14	Acknowledgement section; Competing Interests; IRB approval when required	<input type="checkbox"/>