CARE Checklist – 2016: Information for writing a case report

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| **Topic** |  | **Item Checklist item description** | **Line/Page** |
| **Title** | **1** | The words “case report” should be in the title along with the area of focus | \_2/1\_\_\_ |
| **Key Words** | **2** | Four to seven key words—include “case report” as one of the key words | \_9/4\_\_ |
| **Abstract** | **3a 3b 3c** | Background: What does this case report add to the medical literature? Case summary: chief complaint, diagnoses, interventions, and outcomes Conclusion: What is the main “take-away” lesson from this case? | \_3/3\_  \_11/3\_\_  \_4/4\_ |
| **Introduction** | **4** | The current standard of care and contributions of this case—with references (1-2 paragraphs) | \_4/5\_\_\_ |
| **Timeline** | **5** | Information from this case report organized into a timeline (table or figure) | Table 2\_ |
| **Patient Information** | **6a 6b 6c** | De-identified demographic and other patient or client specific information Chief complaint—what prompted this visit?  Relevant history including past interventions and outcomes | \_Table 1\_\_  \_10/6\_  \_Table1\_ |
| **Physical Exam** | **7** | Relevant physical examination findings | NA\_\_ |
| **Diagnostic** | **8a** | Evaluations such as surveys, laboratory testing, imaging, etc. | \_9/6\_\_ |
| **Assessment** | **8b 8c 8d** | Diagnostic reasoning including other diagnoses considered and challenges Consider tables or figures linking assessment, diagnoses and interventions Prognostic characteristics where applicable | \_Table1\_\_\_  Table2  \_4/12\_\_\_\_  \_NA\_ |
| **Interventions** | **9a 9b 9c 9d** | Types such as life-style recommendations, treatments, medications, surgery Intervention administration such as dosage, frequency and duration  Note changes in intervention with explanation Other concurrent interventions | \_\_12/7\_\_\_  \_16/7\_\_  \_\_11/8\_\_  \_ 18/8\_ |
| **Follow-up and** | **10a** | Clinician assessment (and patient or client assessed outcomes when appropriate) | 5/9\_\_ |
| **Outcomes** | **10b 10c** | Important follow-up diagnostic evaluations  Assessment of intervention adherence and tolerability, including adverse events | NA\_  \_11/9\_\_ |
| **Discussion** | **11a 11b 11c 11d** | Strengths and limitations in your approach to this case  Specify how this case report informs practice or Clinical Practice Guidelines (CPG) How does this case report suggest a testable hypothesis?  Conclusions and rationale | 13/13;3/14\_  \_6/10\_\_\_  \_14/10\_\_  \_17/14\_ |
| **Patient Perspective** | **12** | When appropriate include the assessment of the patient or client on this episode of care | \_11/9\_\_ |
| **Informed Consent** | **13** | Informed consent from the person who is the subject of this case report is required by most journals | attachment |
| **Additional Information** | **14** | Acknowledgement section; Competing Interests; IRB approval when required | \_11/8\_\_\_ |

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