Guidelines for Authors: Case Report

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Abstract

(J. Extra-Corpore. Technol. 19[4]: p. 412-414 Winter 1987). The case report occupies an important place in the medical literature. It combines clinical observation with scientific data to describe a patient condition, prescribe appropriate interventions and document outcomes. Various types of case reports are described and the mechanics for writing one are presented. The case report provides a vehicle for communicating timely and pertinent information to our colleagues and is an ideal format for contributions to the Journal by beginning authors.

Introduction

Historically, the case report is an important part of the medical literature. Years ago the case report did little more than present an observed clinical condition together with speculation about causes and outcomes. Today, with the development of the clinical sciences, the case report combines clinical observation and scientific data to describe a patient condition, prescribe appropriate interventions and document the outcomes.

The purpose of this paper is to define the case report and outline the mechanics of writing one. Simply stated, the case report describes an unusual clinical situation. In How to Write and Publish Papers in the Medical Sciences,1 Huth describes four types of case reports.

The first is the "unique case" which reports a condition that has not been previously described in the literature.

The "case of unexpected association" is the second type described by Huth. This is a situation where two or more distinct conditions are found in the same patient. The fact that they occur simultaneously may indicate a common cause or may just be coincidental. The writer must be careful not to draw conclusions unless they can be substantiated by finding a common basis.

The third type of case report is the "case of unexpected results." When a particular intervention produces not only its known effects but also an effect that is unanticipated, this may point to a previously unknown aspect of the technique or medication being used. Care must be used in speculating about the cause factors.

"Minor case reports" is the final category Huth describes. These are reports of unusual cases that have been previously documented and, according to Huth, do little to expand our knowledge of the particular condition. However, there may be a place for this type of report in the perfusion literature. Cases may have been previously documented, but it is likely that not much attention was given to the perfusion techniques and parameters. Elaborating on these aspects of a clinical situation would be a worthwhile contribution.

Mechanics of Writing a Case Report

The first step in deciding whether to write a case report is to conduct a thorough literature search. One or more of the bibliographic indexes should be consulted to verify that the occurrence has not already been documented. It is not sufficient to rely on one's experience or ability to recall prior reports. Several key words should be used in the search because the occurrence may have been described with different terminology in the past.

When an unusual situation occurs it is important to immediately remember and record as much information as possible about the case. Additional information from other members of the team should be collected.
The case report must be clear, concise and to the point. Details and test results that are not essential should be omitted. Avoid abbreviations and jargon. Prose style should be without unnecessary wordiness. Do not use pretentious words but state your thoughts simply. Avoid editorializing and speculation.

Remember rewriting is one of the most important parts of writing a paper. Wait several days to reread and then revise your manuscript. Say what you intend in the fewest words possible while maintaining the clarity of your writing.

The Form of the Case Report

Title

The title should specify that the paper is a case report. It should be as brief and descriptive as possible.

Abstract

The abstract should be no more than 200 words. It begins with a statement as to why this particular case is noteworthy. It should also be noted if there have been any documented events prior to this observation. It summarizes the case description and interventions and ends with any conclusions that are made. Remember the Abstract is a summary of the entire paper.

Introduction

The Introduction presents a summary of circumstances under which the reportable case occurred, why the case is being reported, and the results of the background literature search to help put the report in perspective. It should include pertinent information about the disease process or treatment being presented.

Case Description

This section consists of a description of the events surrounding the unique occurrence, the details of the occurrence, and when applicable, an account of the interventions used.

There may be situations where events are not reported chronologically. For example, it may not have been clear that a certain symptom or laboratory finding was pertinent until after the event had taken place. You can refer back to information from the past but you must make it clear when you return to the time frame of the actual occurrence.

Be sure to include all pertinent perfusion data in detail. For example, say “the patient was cooled to 30°C,” not “mild hypothermia was used.” Be precise: “ACT’s were determined every 15 minutes using the hand-held method,” not “ACT’s were measured frequently.” Enough information must be included so that the reader can apply any techniques you describe in his or her own practice.

Discussion

This is the final section of a case report. It is here that the author argues the uniqueness and relevancy of the report. Details of the literature search should be presented, i.e., which indexes and key words were used and what time period was reviewed. A description of any ramifications the writer deems important for the perfusion community can constitute the concluding paragraph.

Help for Writing

Help for the inexperienced writer is available from many sources. Much has been written about scientific writing. The books and article cited in the References of this paper contain information that will be of assistance. Excellent help can be gleaned from colleagues that have published papers. The editorial staff of the Journal is always available to help authors get started or with manuscript revisions. Another important and often overlooked source of help is to read articles in other good journals. Reading well written papers helps to develop a clearer idea of acceptable scientific language and an appreciation of the formats used for various types of articles. Finally, follow the Instructions for Authors, published in the Journal, to expedite the processing of your manuscript.

Conclusion

The case report should be of particular interest to the perfusion community. In institutions with large case-loads, the opportunity to observe unusual situations is increased and this information can be shared through the case report without the time and financial commitments original research projects entail. Even in programs where time and money may not be limiting factors, the case report can provide a vehicle for an individual to get started with scientific writing. Perfusion is a young profession comprising practitioners with varying educational backgrounds. Many perfusionists have had little or no experience with scientific writing. Planning and writing an original research paper can be intimidating, while writing a case report is a more manageable way to begin to participate in our Journal.

In summary, the case report provides an effective method of communicating timely and pertinent infor-
mation to our colleagues. Since a measure of the sophistication of a scientific discipline is reflected in the quality of its journals, our professional standing in the cardiac surgery community is enhanced by increasing the amount of information published in the Journal.

References