WASHINGTON STATE UNIVERSITY
Elson S. Floyd
College of Medicine

Workshop Series: Writing Case Reports

Matthew Hsin and Devin Peterson

Wednesday 02/12/2025

1200-1300

SMED 175

Disclosures

None

Objectives

WASHINGTON STATE UNIVERSITY
Elson S. Floyd
College of Medicine

This workshop will help you:

1. Identify unique cases suitable for reporting
2. Structure and write your case report
3. Identify resources to navigate the publication process

Why write a case report?

WASHINGTON STATE UNIVERSITY
Elson S. Floyd
College of Medicine

- Enhance your own personal learning
- Bolster your residency application and CV
- Demonstrate interest in scholarly projects
- Demonstrate interests within specialty
- Network with attendings in your field of interests/networking

Things to consider prior to start

WASHINGTON STATE UNIVERSITY
Elson S. Floyd
College of Medicine

- Which cases are worth publishing
- Authorship
- Journal for publication
- Media/EMR access
- IRB approval/consent forms

Selecting a case

WASHINGTON STATE UNIVERSITY
Elson S. Floyd
College of Medicine

- Common conditions with atypical presentation
- Uncommon conditions with typical presentation
- Uncommon conditions with atypical presentation
- "Bread and butter" teaching cases (publication specific)
- Uncommon management of common and/or uncommon conditions

Case report: A novel approach of closed-loop brain stimulation combined with robot gait training in post-stroke gait disturbance

Atsushi Shima[1†] Tomoaki Miyake[2†] Kazuki Tanaka[1] Akari Ogawa[1,3] Erika Omae[1,4]

CASE REPORT Open Access

Atypical presentation of Lemierre's syndrome: case report and literature review

Marie-Eva Laurencet[1], Sarah Rosset--Zufferey[1] and Jacques Schrenzel[2,3*]

Case report

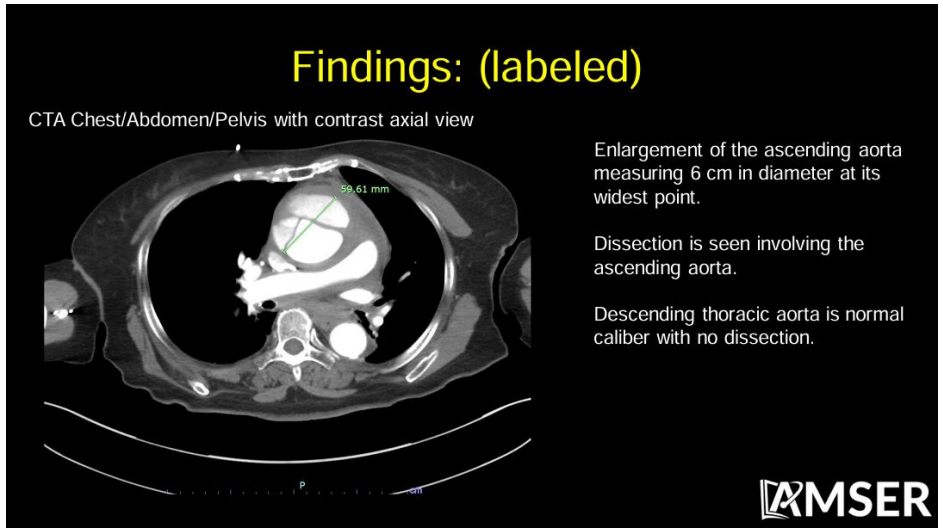
Fibrodysplasia Ossificans Progressiva: A rare disease due to unawareness, case report and literature review

Yabello Hirbo Guyolla [a,*], Fasil Tesfaye Abebe [a], Abduselam Jemal Ahmed [b]

[a] Jimma University Medical Centre, College of Health Sciences, Department of Surgery, Jimma, Ethiopia
[b] Karl Metu Hospital, Metu, Ethiopia

A Case Report of an Atypical Presentation of Morvan Syndrome

Sara G Haroutunian [1 2 3], Rana Hoseen [1 2], Donya Farmand [4], Marinelle Camilon [2], Sanaz Hashemi [2]



Things to consider prior to start

WASHINGTON STATE UNIVERSITY
Elson S. Floyd
College of Medicine

Which cases to consider

Authorship

Journal for publication

Media/EMR access

IRB approval/consent forms

Authorship

WASHINGTON STATE UNIVERSITY
Elson S. Floyd
College of Medicine

People who see a high volume of cases in their field:

- Residents, attendings, professors, techs
- Ask, show early interest
- Co-authors may have connections to other potential authors

Consider collaborating with classmates interested in research/similar fields

Things to consider prior to start

WASHINGTON STATE UNIVERSITY
Elson S. Floyd
College of Medicine

Which cases to consider

Authorship

Journal for publication

Media/EMR access

IRB approval/consent forms

Deciding who to submit to:

- Speak with your attendings
- Literature review may point you in the right direction
- Journal websites will tell you exactly what they're looking for

3. Categories of Articles

Accepted papers are published in the following journal sections:

1. Diseases
- Unknown etiology
- Unusual clinical course
- Rare disease
- Congenital defects or anatomical anomaly / variation

2. Diagnosis
- Challenging differential diagnosis
- Mistake in diagnosis

3. Treatment
- Unusual or unexpected effect of treatment
- Unusual setting of medical care
- Management of emergency care

4. Complications and accidents
- Diagnostic / therapeutic accidents
- Patient complaints / malpractice

5. Drug reactions
- Unexpected drug reaction
- Adverse events of drug therapy

6. Other
- Educational purpose (only if useful for systematic review or synthesis)
- Clinical situation which can not be reproduced for ethical reasons

From the American Journal of Case Reports

Case Reports

- Up to 1000 words
- Unstructured abstract
- Up to 10 references
- Up to 7 images
- ★ Only novel and previously unreported clinical findings and/or highly innovative approaches to patient management will be considered for publication as a single Case Report. Case Reports that do not meet these criteria but have high quality images should be submitted for the Images in Vascular Ultrasound section.
- ★ Suggested sections for Case Reports are: Introduction, Case (patient history, results of tests, treatment, outcome or follow-up), Discussion, and Conclusion.
- In order to enhance the value of their Case Report to readers of the JVU, authors are encouraged to expand their manuscript to a Case Series whenever appropriate. While a Case Report focuses on a single patient, a Case Series provides information on multiple patients who share one or more common clinical features, such as diagnosis, treatment, or image findings.

From the Journal for Vascular Ultrasound

Things to consider prior to start

WASHINGTON STATE UNIVERSITY
Elson S. Floyd
College of Medicine

Which cases to consider

Authorship

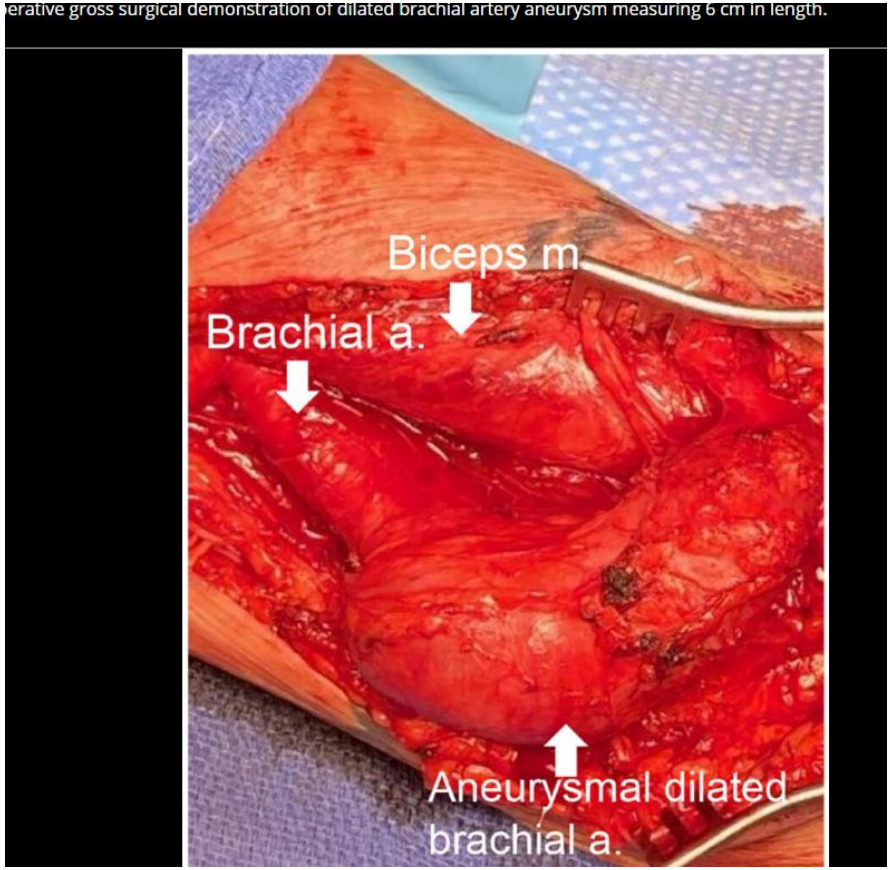
Journal for publication

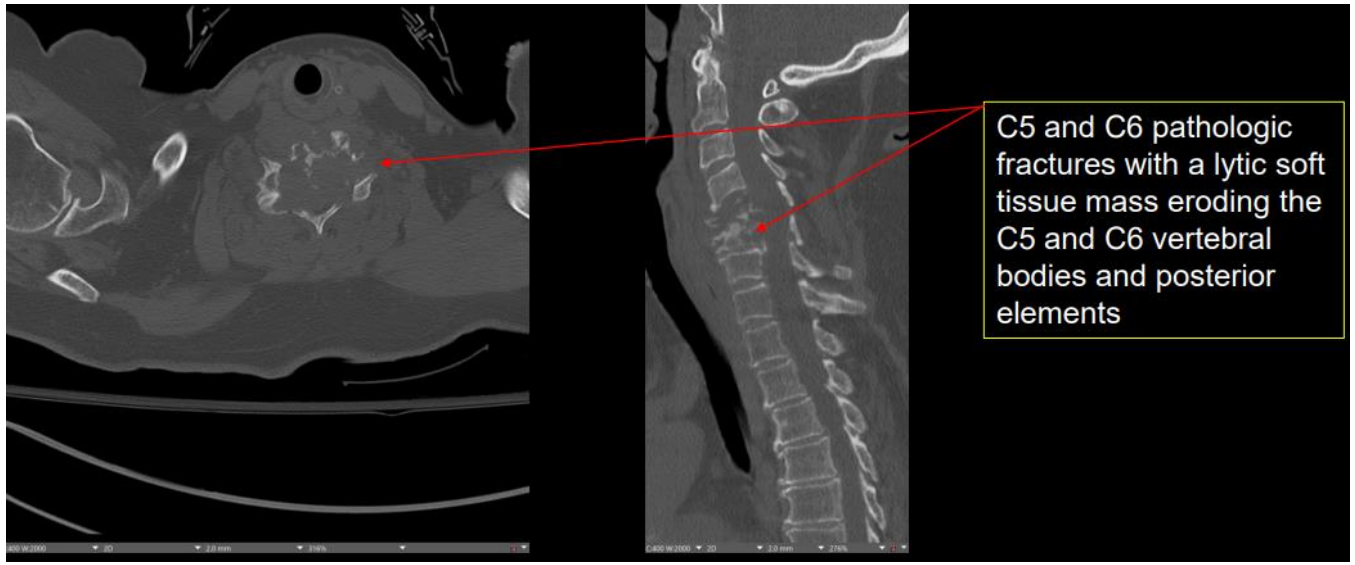
Media/EMR access

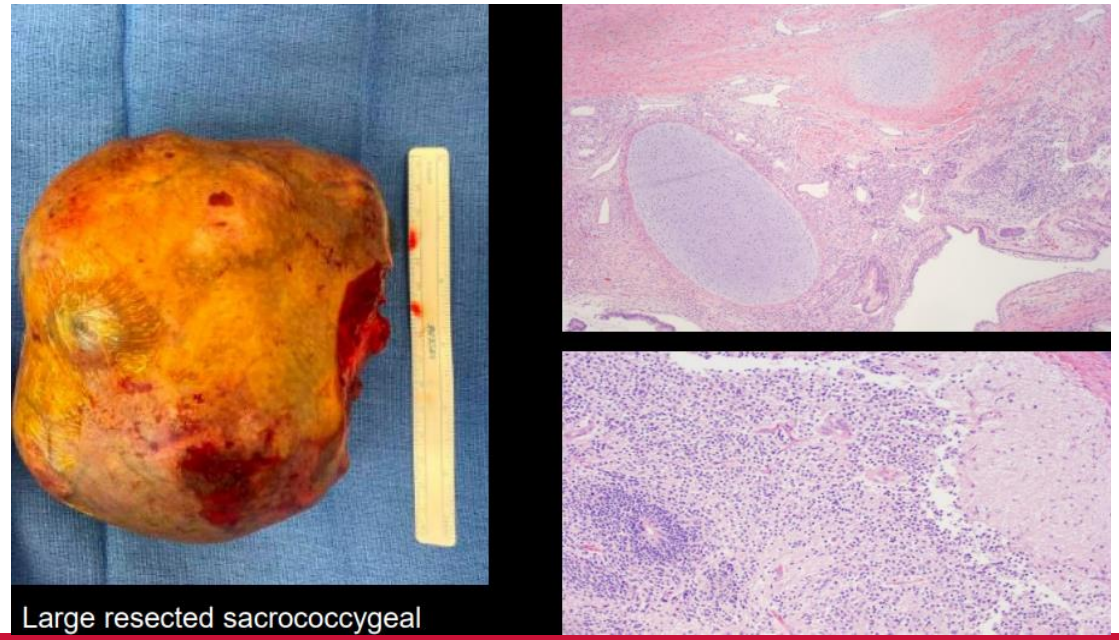
IRB approval/consent forms

Media/EMR access

If this is an old case, you may no longer have access to the EMR







Things to consider prior to start

WASHINGTON STATE UNIVERSITY
Elson S. Floyd
College of Medicine

Which cases to consider

Authorship

Journal for publication

Media/EMR access

IRB approval/consent forms

IRB

WASHINGTON STATE UNIVERSITY
Elson S. Floyd
College of Medicine

Most case reports are de-identified and will not require IRB approval

-Check with IRB to make sure, and if the journal requires written documentation

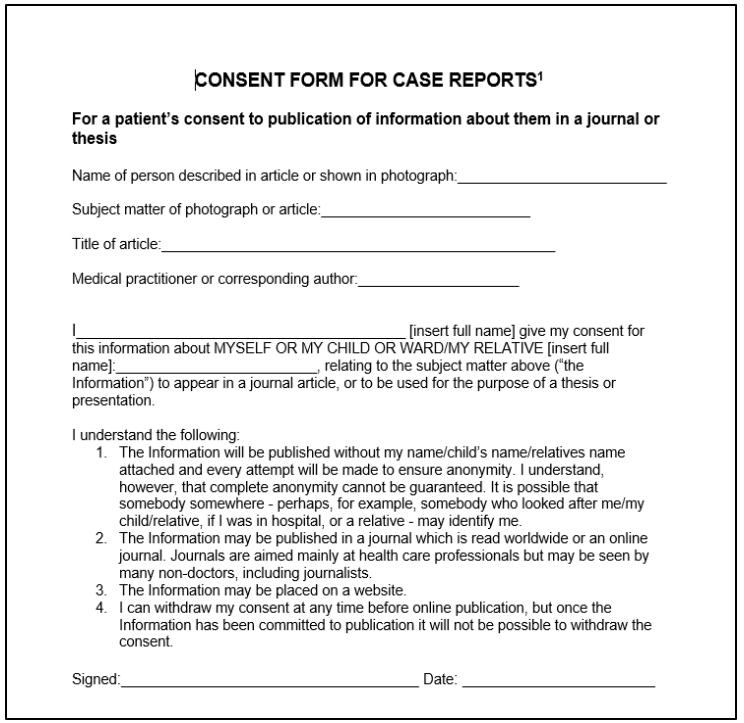
IRB@WSU.EDU

Consent Forms

WASHINGTON STATE UNIVERSITY
Elson S. Floyd College of Medicine

- Recommended to always get signed patient consent when possible

  (better to have and not need…)
- Look to publisher requirements for their policies surrounding consent
- Case report consent form templates are available online



CONSENT FORM FOR CASE REPORTS[1]

For a patient's consent to publication of information about them in a journal or thesis

Name of person described in article or shown in photograph:_____

Subject matter of photograph or article:_____

Title of article:_____

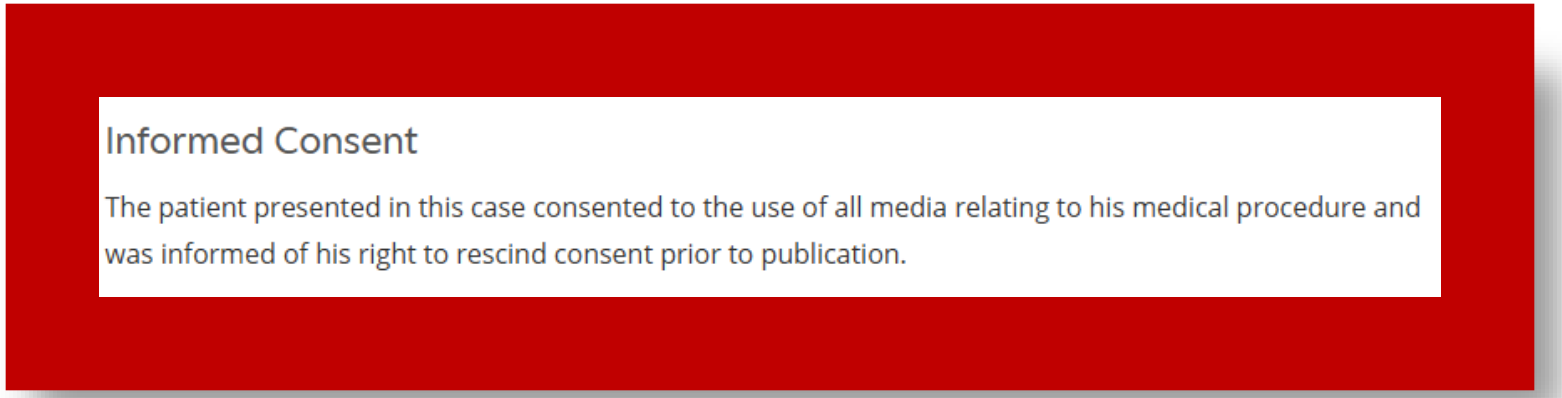
Medical practitioner or corresponding author:_____

I_____ [insert full name] give my consent for this information about MYSELF OR MY CHILD OR WARD/MY RELATIVE [insert full name]:_____, relating to the subject matter above ("the Information") to appear in a journal article, or to be used for the purpose of a thesis or presentation.

I understand the following:

1. The Information will be published without my name/child's name/relatives name attached and every attempt will be made to ensure anonymity. I understand, however, that complete anonymity cannot be guaranteed. It is possible that somebody somewhere - perhaps, for example, somebody who looked after me/my child/relative, if I was in hospital, or a relative - may identify me.
2. The Information may be published in a journal which is read worldwide or an online journal. Journals are aimed mainly at health care professionals but may be seen by many non-doctors, including journalists.
3. The Information may be placed on a website.
4. I can withdraw my consent at any time before online publication, but once the Information has been committed to publication it will not be possible to withdraw the consent.

Signed:_____ Date: _____



Informed Consent

The patient presented in this case consented to the use of all media relating to his medical procedure and was informed of his right to rescind consent prior to publication.

Structuring/writing your case report

WASHINGTON STATE UNIVERSITY
Elson S. Floyd
College of Medicine

A good case report starts with a thorough literature review

- Mendeley
- Pubmed/NCBI
- Cochrane Reviews
- Google Scholar
- WSU online libraries
- Go down the rabbit hole of citations

Structuring/writing your case report

WASHINGTON STATE UNIVERSITY
Elson S. Floyd
College of Medicine

- Title/authors
- Abstract (summary of the case and take-home points)
    - Write out your abstract, then the rest of the paper, then refine the abstract to summarize your paper
- Introduction (Context and backdrop for the case)
    - What is the current understanding of the disease in your case report? Why is this case important? What do you want readers to walk away knowing?
- Case (purely objective information):
    - HPI
    - PEX, labs, imaging
    - Diagnosis, management/surgical interventions, follow-up
- Discussion
    - How does your case align with existing understanding of the topic? How does your case deviate from current understanding? What is novel or impactful about your case?
- Conclusion
    - Summarize and condense: Deliver your take home messages

Structuring/writing your case report

WASHINGTON STATE UNIVERSITY
Elson S. Floyd
College of Medicine

- Generative AI large language models (GPT, Claude, Gemini etc.)

"In this study, ChatGPT was found to be inadequate in generating scientifically accurate case reports, as it produced reports with critical flaws such as incorrect diagnoses and fabricated references. Although ChatGPT was useful for reviewing grammar and punctuation and providing synonyms and alternate phrasing, these tasks are commonly performed by grammar software."

The Readiness of ChatGPT to Write Scientific Case Reports Independently: A Comparative Evaluation Between Human and Artificial Intelligence

Maryam Buholayka, Rama Zouabi, Aditya Tadinana

2023 May

Structuring/writing your case report

WASHINGTON STATE UNIVERSITY
Elson S. Floyd College of Medicine

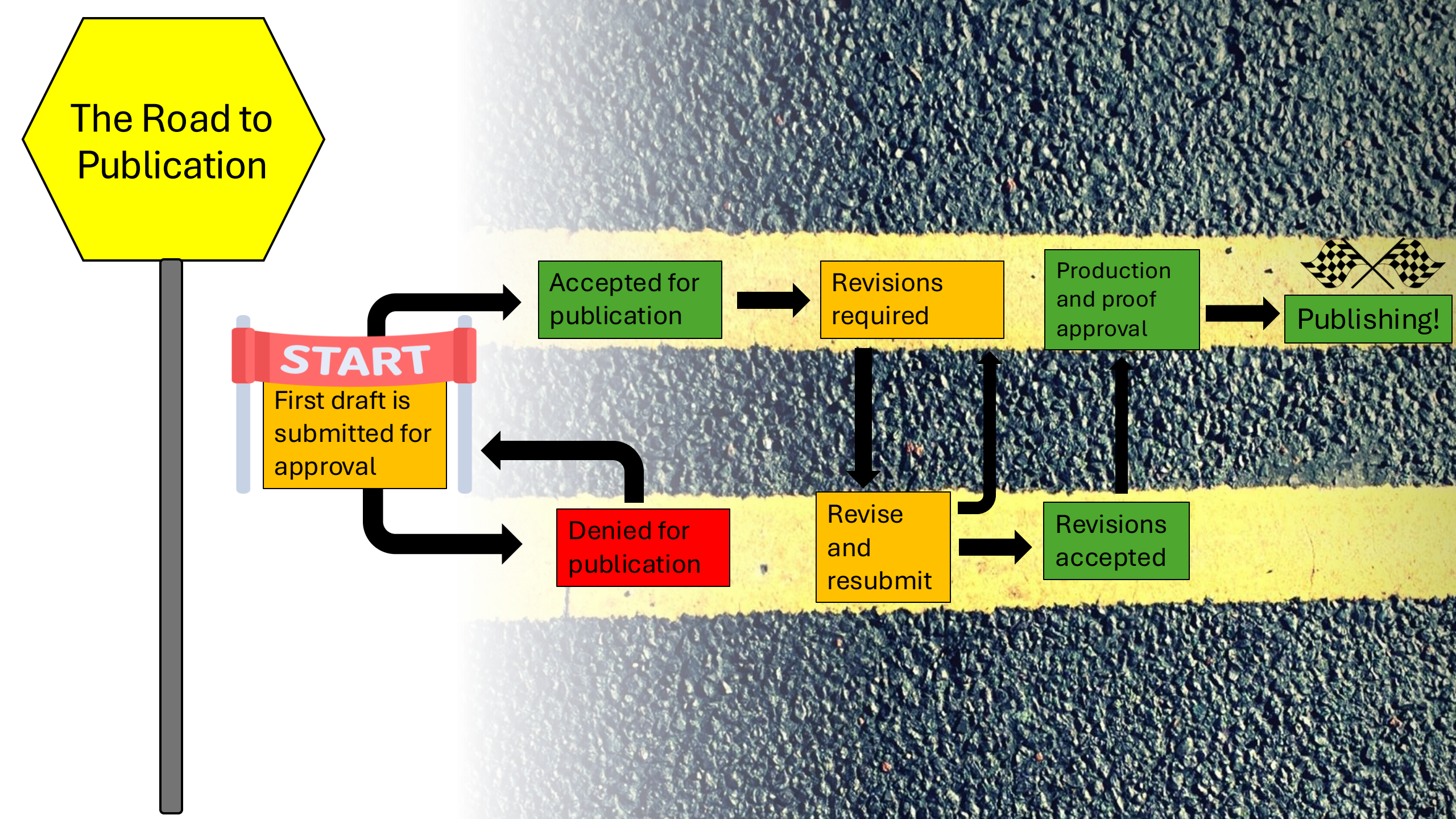
"Generate an outline for my case report on a patient with miliary tuberculosis"

4. Patient Presentation

- **Demographic information:** Age, gender, relevant medical history (e.g., comorbidities such as HIV, immunosuppression).
- **Symptoms:** What symptoms led to the diagnosis of miliary TB (e.g., fever, weight loss, cough, night sweats, malaise).
- **Physical examination findings:** Any notable physical examination findings (e.g., hepatosplenomegaly, lymphadenopathy, signs of respiratory distress).
- **Diagnostic work-up:** Outline the tests conducted to confirm the diagnosis, such as chest X-ray, CT scan, sputum smear, culture, and blood tests (e.g., complete blood count, liver enzymes, etc.). Mention the use of PCR or other molecular techniques for diagnosis.
- **Diagnosis:** Confirmation of miliary tuberculosis, possibly with histopathology or microbiological culture.

5. Discussion

- **Pathophysiology:** Briefly explain the pathogenesis of miliary tuberculosis. Mycobacterium tuberculosis spreads hematogenously, leading to the formation of small granulomas in multiple organs.
- **Clinical manifestations:** Discuss the varied presentations of miliary tuberculosis, emphasizing that symptoms can be nonspecific, which can lead to delayed diagnosis. Discuss how it can mimic other conditions, such as pneumonia, sepsis, or viral infections.
- **Complications:** Highlight potential complications
- **Diagnosis:** Emphasize the importance of using a combination of clinical findings, imaging studies, microbiological tests, and histological examination for accurate diagnosis.
- **Treatment:** Outline the standard treatment approach for miliary tuberculosis, including the use of first-line anti-TB drugs (isoniazid, rifampin, pyrazinamide, and ethambutol), duration of therapy (usually 6–9 months), and the role of adjunctive therapy (e.g., corticosteroids) in severe cases. Consider the role of drug resistance and the potential need for second-line drugs in resistant cases.
- **Prognosis:** Discuss the prognosis of miliary tuberculosis with early diagnosis and appropriate treatment. Highlight any known factors that may influence the outcome, such as delayed treatment or comorbid conditions.

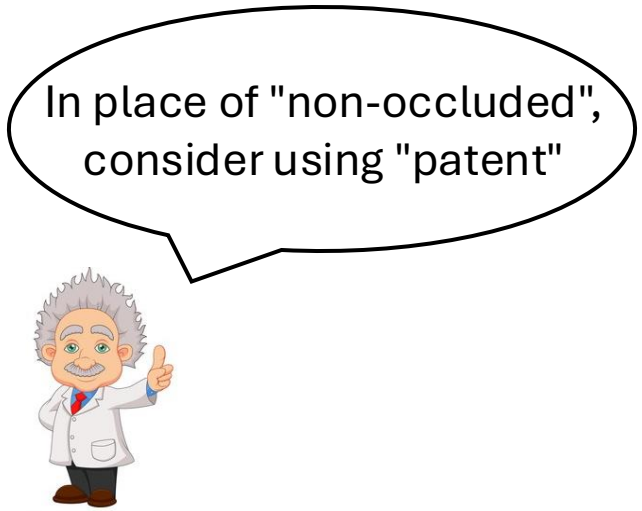

The Road to Publication
START
First draft is submitted for approval
Accepted for publication
Revisions required
Production and proof approval
Publishing!
Denied for publication
Revise and resubmit
Revisions accepted

Tips and resources to navigate the publication process

WASHINGTON STATE UNIVERSITY
Elson S. Floyd College of Medicine

- Tips for revising
  - Enable "track changes" on your revisions
  - Always create a copy before making revisions
  - Share the document to one drive or google docs for multi-user access
  - It's ok to push back on revision suggestions (pick your battles)

dilation with ultrasound in a patient with AVF creation is important for diagnosing aneurysms. The degree of aneurysmal dilation provides critical information to clinicians when determining risk of rupture, as annual risk of rupture is known to increase as the aneurysm diameter increases.[4] Assessing vessel aneurysm position relative to adjacent vessels such as the basilic, cephalic, and median cubital vein can help determine the risk of stent compression as eExtrinsic compression of adjacent vessels is a documented complication of peripheral AVF stent placement[4]. Therefore, Aassessing the aneurysm position relative to adjacent vessels such as the basilic, cephalic, and median cubital vein can help determine quantify the risk of stent compression. Finally, determining vessel patency informs surgical repair through assessing native vessel viability for grafting, as native outflow vessel harvest requires adequate patency to be viable for grafting. These findings in addition to other imaging modalities such as computed tomography angiography guide the surgical approach to aneurysmal repair. Other imaging modalities such as CT arteriography or digital subtraction angiography may also be used for surgical planning in conjunction with duplex Doppler ultrasound. As the prevalence of end stage renal disease (ESRD) and subsequent treatment with AV fistula creation for hemodialysis access increase with an aging population, we are likely to see an increase in the incidence of brachial artery aneurysms as a rare late complication of AVF creation. Brachial artery aneurysms are a result of arterial wall shear stress in the setting of a high flow state. AVF



Tips and resources to navigate the publication process

WASHINGTON STATE UNIVERSITY
Elson S. Floyd College of Medicine

- Good understanding of the journal requirements
- Make sure team members all have the time to dedicate as needed
- Collect all required data before starting, e.g. if you need imaging/surgical/pathology notes
- Know who to contact for IRB requirements
- Have a mentor in the subject area to review prior to sending to journal revisions (hopefully less revisions need to be made if reviewed well prior)

Journal of Medical Radiation Sciences
Open Access

J Med Radiat Sci. 2013 Jul 21;60(3):108–113. doi: 10.1002/jmrs.18

Tips for writing a case report for the novice author

Zhonghua Sun [1]

PMID: 26229618

ORCID
Connecting research and researchers

Consider registering for ORICD ID
https://orcid.org/register

Questions?

WASHINGTON STATE UNIVERSITY
Elson S. Floyd
College of Medicine

Devin Peterson:
devin.peterson@wsu.edu

Matthew hsin:
Matthew.hsin@wsu.edu

https://journals.sagepub.com/eprint/AWUWQASMKQ8M74XGPIWH/full

Dr. Coiado:
Olivia.coiado@wsu.edu

WSU IRB:
IRB@WSU.EDU

WSU office of research:
Research@wsu.edu