

CASE REPORTS

Case reports are retrospective analyses of one, two, or three clinical cases. Case reports are an important part of post-marketing surveillance. They serve an alerting function by informing about new, unusual, or unexpected events. These events may be adverse drug reactions, drug-drug interactions, or drug-disease interactions. Before submitting a case report, the author(s) must conduct a thorough literature search as well as a review of product labeling when a drug is involved. This will reduce the reporting of what may already be well known.

Reports of suspected adverse drug reactions should provide a description of the event, details regarding the implicated medication (e.g., purpose, when initiated), effects of discontinuation or re-challenge, treatment for the reaction, and duration of patient follow-up, if any. Evidence for causality must be strong. In the case of adverse drug events, use of the Naranjo Adverse Drug Reaction probability scale to determine the likelihood that the events were drug-related (Naranjo CA, et al. A method for estimating the probability of adverse drug reactions. Clin Pharmacol Ther 1981;30:239-245) is recommended. The manufacturer of the drug in question should be notified regarding any event before publication.

Importantly, **authors should clearly indicate in the cover letter whether the case was part of a larger study or meta-analysis**, and whether the case was reported in aggregate elsewhere.

The report should include a descriptive, succinct title; an introduction; a well-documented case description; discussion; conclusions; and references. The Introduction should announce the subject and purpose of the report, including statements of why the case is important and how the literature search was performed. The Case Description should include a narrative account of the case with brief, pertinent clinical, laboratory, and medication information. The Discussion should comment on evidence that the case is new or unusual and consider possible alternative explanations for case features. The Conclusions should provide a summary of the adverse drug reaction-medication relationship, how to treat it, and how to avoid it. (For more information about what constitutes a good case report, see Vandenbroucke JP. In defense of case reports and case series. Ann Intern Med. 2001;134:330-334 and DeBaey L, DeBaey S. The case report. I. Guidelines for preparation. Int J Cardiol. 1983;4:357-364.)

To be considered, **authors must provide documentation of patient informed consent to publish**, which can be attached to the cover letter. **All identifying information must be masked per HIPAA guidelines** prior to submission. (See Ethical Considerations for Case Reports).

Authors may be asked to reduce the length of the report substantially if similar cases were reported previously.

Abstract: None

Keywords: 4-6

Main Text: 1500-3500 words, structured as follows: Introduction, Case Description, Discussion, Conclusions

Tables/Figures: ≤2

References: ≤15, required

Supplemental Material: Not permitted