**CARE Checklist of information to include when writing a case report**

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| **Topic** | **Item No** | **Checklist item description** | **Reported on Page Number/Line Number** | **Reported on Section/Paragraph** |
| Title | 1 | The diagnosis or intervention of primary focus followed by the words “case report” | Page1/Line3 | Title/Paragraph1 |
| Key Words | 2 | 2 to 5 key words that identify diagnoses or interventions in this case report, including "case report" | Page2/Line33 | Abstract/Paragraph1 |
| Abstract  (Structured summary) | 3a | Background: state what is known and unknown; why the case report is unique and what it adds to existing literature. | NONE | Abstract/Paragraph1 |
| 3b | Case Description: describe the patient’s demographic details, main symptoms, history, important clinical findings, the main diagnosis, interventions, outcomes and follow-ups. | Page2/Line24 | Abstract/Paragraph1 |
| 3c | Conclusions: summarize the main take-away lesson, clinical impact and potential implications. | Page2/Line32 | Abstract/Paragraph1 |
| Introduction | 4 | One or two paragraphs summarizing why this case is unique **(may include references)** | NONE | - |
| Patient Information | 5a | De-identified patient specific information | NONE | - |
| 5b | Primary concerns and symptoms of the patient | NONE | - |
| 5c | Medical, family, and psycho-social history including relevant genetic information | NONE | - |
| 5d | Relevant past interventions with outcomes | NONE | - |
| Clinical Findings | 6 | Describe significant physical examination (PE) and important clinical findings | Page2/Line47 | Case/Paragraph2 |
| Timeline | 7 | Historical and current information from this episode of care organized as a timeline | Page2/Line36 | Case/Paragraph2 |
| Diagnostic Assessment | 8a | Diagnostic testing (such as PE, laboratory testing, imaging, surveys). | Page2/Line47 | Case/Paragraph2 |
| 8b | Diagnostic challenges (such as access to testing, financial, or cultural) | Page3/Line51 | Case/Paragraph2 |
| 8c | Diagnosis (including other diagnoses considered) | NONE | - |
| 8d | Prognosis (such as staging in oncology) where applicable | Page3/Line59 | Case/Paragraph2 |
| Therapeutic Intervention | 9a | Types of therapeutic intervention (such as pharmacologic, surgical, preventive, self-care) | Page3/Line49 | Case/Paragraph2 |
| 9b | Administration of therapeutic intervention (such as dosage, strength, duration) | Page3/Line57 | Case/Paragraph2 |
| 9c | Changes in therapeutic intervention (with rationale) | Page3/Line55 | Case/Paragraph2 |

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| Follow-up and Outcomes | 10a | Clinician and patient-assessed outcomes (if available) | Page3/Line58 | Case/Paragraph2 |
| 10b | Important follow-up diagnostic and other test results | Page3/Line59 | Case/Paragraph2 |
| 10c | Intervention adherence and tolerability (How was this assessed?) | NONE | - |
| 10d | Adverse and unanticipated events | Page4/Line96 | Discussion/Paragraph3 |
| Discussion | 11a | A scientific discussion of the strengths AND limitations associated with this case report | Page4/Line91 | Discussion/Paragraph3 |
| 11b | Discussion of the relevant medical literature **with references** | Page9/Line174 | Discussion/Paragraph3 |
| 11c | The scientific rationale for any conclusions (including assessment of possible causes) | Page4/Line77 | Discussion/Paragraph3 |
| 11d | The primary “take-away” lessons of this case report (without references) in a one paragraph conclusion | Page5/Line111 | Discussion/Paragraph3 |
| Patient Perspective | 12 | The patient should share their perspective in one to two paragraphs on the treatment(s) they received | NONE | - |
| Informed Consent | 13 | Did the patient give informed consent? Please provide if requested | **Yes✔** | **No** |

\*As the checklist was provided upon initial submission, the page number/line number reported may be changed due to copyediting and may not be referable in the published version. In this case, the section/paragraph may be used as an alternative reference.