



How to write Case Studies?

TeachPhysio seeks self-driven and highly motivated clinicians who want to educate the next generation of physical therapists and add to the knowledge base of our profession.



Case Studies and Case reports are at the 5th level in an evidence-based hierarchy. A case report presents a typical or atypical case presentation and gives the clinician an opportunity to illustrate or critique an approach or aspect of the management of a patient. Case reports are studies with no controls, hence they cannot draw conclusions or establish cause and effect. A Case report should briefly describe examination, evaluation, diagnosis, prognosis, intervention and outcomes, as well as provide insight into clinical decision-making.. Our goal is to incorporate best evidence based practices so physical therapists can expand their critical thinking, problem-solving, and clinical decision-making skills. **Case studies provide a unique structured platform for developing clinical skills and problem-based learning methods.**

At TeachPhysio, we believe that teaching makes us better clinicians and ultimately helps us to provide better care to our patients.



TeachPhysio endorses the CARE guidelines for clinical case reports*. Authors should follow these guidelines while writing their case reports. CARE tools are available to improve the completeness, transparency, and usefulness of case reports. The CARE checklist**(www.equator-network.org) is used to guide writing of these case reports. Case reports must ideally be limited to 3500 words.

- The CARE statement and resources can be found at: www.care-statement.org
- Scientific Writing in Health and Medicine (SWIHM): www.swihm.com
- CARE-writer tool: www.care-writer.com

Specific CARE guidelines and links to the CARE checklist can be found at:

<https://www.equator-network.org/reporting-guidelines/care/>

The CARE Explanation and Elaboration (E&E) document gives a clear explanation of why and how to report each item and gives an example of good reporting from the literature. The CARE E&E can be found at:

<https://pubmed.ncbi.nlm.nih.gov/28529185/>

* CARE statement, SWIHM and CARE-writer tool links posted with permission from Dr. David Riley, MD.

** CARE guidelines link posted with permission from the Equator Network.

Guidelines for Consent

Institutional Consent: Authors must include a statement about meeting the HIPAA (Health Insurance, Portability, and Accountability Act) requirements of the institution for disclosure of protected health information.

Patient Consent: Authors must submit a signed patient consent form(s).

For publication on TeachPhysio, we recommend looking at the CARE guidelines and links above for reference. Please note our guidelines below:

A case study must be limited to clinically relevant information. Questions you must ask yourself:

- What is the purpose of writing this case study?
- How is this going to contribute to the current knowledge base in the literature?
- Research the current literature and gather facts on similar cases.



- Keep your interpretation of the development of pathology concise and back it up with current evidence.
- Support your case study by citing information correctly and having a reference list at the end.

The following SAMPLE Case study is an example for your reference:

<http://teachphysio.com/case-studies-rachna.html>

The Anatomy of a case study

- Title
- Abstract (You can write this LAST)
- Introduction
- History & Patient Characteristics
- Examination Findings
- Clinician Hypothesis
- Intervention
- Outcome
- Discussion
- References (In AMA format)

Title

Meaningful and short titles attract readers. Highlight the most essential keywords in your topic.

Abstract

An abstract summarizes the purpose, clinical presentation, examination, evaluation, intervention, and outcomes of the patient. The use of outcomes measures is highly desirable to gauge progress.

We suggest writing your abstract after you finish writing the case study.

Introduction

The introduction gives your readers an idea on the background of the case. It then briefly discusses similar cases cited in the literature. **The main goal of the introduction is to bring the reader's attention to the purpose of your case study.** The introduction must give the reader a clear idea of your objectives, why you chose this case, and what were the unique challenges you had in diagnosing and managing this case to bring it to a successful outcome.



History & patient characteristics

This is where you mention the patient demographics, their past medical history, and background and why this patient sought your help. **Describe the patient's chief complaint using their own words.**

Even though past medical history will give us a lot of information, try to eliminate non-relevant data. You must show how the patient's history guided your initial hypothesis, how you tested it, and how you arrived at a diagnosis. If you had a differential diagnosis it would be helpful to mention that too.

Examination Findings

Examination findings are based on what tests you used to rule in or rule out a specific condition. How did the tests guide your decision and how did the results help you reach the final diagnosis? Were there any unusual observations? This section must include valid and reliable tests that were used and your findings. Cite only relevant information.

Clinical Hypothesis/Impression

Your clinical hypothesis is based upon your findings on the physical examination. It would be helpful to document the pathway of your clinical reasoning.

Intervention

This section mentions the interventions you used to reach your treatment goals. Discuss your management program here. It would be helpful to name the techniques you used, describe them in detail, and make sure you **cite them appropriately**. If you modified the techniques, describe why you made these modifications and how they helped the patient.

Outcome

Your outcomes are essentially the degree of improvement that you see in a patient in response to the interventions you have used. Outcomes can document either improvement or worsening in the patient's symptoms. This is where you tell the reader how your interventions helped and if they did not help, what else do you think could be going on and how would this information determine the next steps for the patient. Would you recommend them returning to the MD for further diagnostics or would you consider referring them to another healthcare specialist?



Discussion

In this section you summarize your patient case and bring your own clinical insights to the reader. Here you draw conclusions, discuss implications and make recommendations. Reflecting on your patient case: If you had a similar patient or problem in the future, what would you do ? What was your clinical reasoning behind the interventions you chose and how did that improve your patient outcomes. Did the evidence support and guide your patient care or was the evidence lacking in your particular case.

References

Your case study should end with a reference list. Please include only those references that you have used in your case. Use AMA format to cite your references.