

# IJLSSR Case Reports

**TITLE:** The words "case report" should be in the title. Key elements of the case should be mentioned in the title and might include the presenting symptoms, the diagnosis, intervention, or outcome.

**ABSTRACT:** In about 200-250 words summarize the: (1) Rationale for this case report, (2) Presenting concerns of the patient, (3) Diagnoses, (4) Interventions (including prevention and lifestyle), (5) Outcomes, and (6) Main lessons learned from this case etc.

**KEY WORDS:** Provide four to seven appropriate keywords after the abstract.

**INTRODUCTION:** Briefly summarize the background and context of this case report.

**CASE PRESENTATION(S):** This should present all relevant details concerning the case. The case presentation should contain a description of the patient's relevant demographic information (without adding any details that could lead to the identification of the patient); any relevant medical history of the patient; the patient's symptoms and signs; any tests that were carried out and a description of any treatment or intervention. If it is a case series, then details must be included for all patients.

**DISCUSSION:** This is an optional section for additional comments that provide any additional relevant information not included in the case presentation, and that put the case in context or that explain specific treatment decisions.

**CONCLUSION:** This should state clearly the main conclusions of the case report and give a clear explanation of their importance and relevance. Is it an original case report of interest to a particular clinical speciality of medicine or will it have a broader clinical impact across medicine? Please include information on how it will significantly advance our knowledge of a particular disease etiology or drug mechanism.

**PATIENT'S PERSPECTIVE (OPTIONAL):** This section is an opportunity for the patient to add a description of the case from their own perspective. The patient should be encouraged to state what originally made them seek medical advice, give a description of their symptoms, whether the symptoms were better or worse at different times, how any tests and treatments affected them, and how the problem is now.

This section can be written as deemed appropriate by the patient, but should not include identifying information that is irrelevant to the case reported. Consent to publish forms will be requested on submission for any manuscript that includes a patient's perspective.

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**ACKNOWLEDGEMENTS:** Acknowledgements should be placed in a separate section after the conclusion. If external funding has been obtained for the study, then that should be mentioned under a separate header “Funding”, after the acknowledgements.

**REFERENCES:** Vancouver style (Was the patient involved in a clinical trial? Please reference related articles). Click for references style: <http://ijlssr.com/instructions.php>

## **ILLUSTRATIONS AND FIGURES (IF ANY):**

Authors should make every effort to preserve the anonymity of the patient by removing or concealing any identifiable features, including birthmarks and tattoos. Please take extra care with images of the head and face, ensuring that only the relevant features are shown. Publication of facial images will be subject to approval by the Editor chief.

## **TABLES AND CAPTIONS (IF ANY): PREPARING TABLES**

Each table should be numbered and cited in sequence using Arabic numerals (i.e. Table 1, 2, 3 etc.). Tables should also have a title (above the table) that summarizes the whole table; it should be no longer than 15 words. Detailed legends may then follow, but they should be concise. Tables should always be cited in text in consecutive numerical order.