Information for Authors of Case Studies

All case studies should be written in accordance with the *Journal of Pediatric Health Care* author guidelines (e.g., APA format with references listed). Instructions for authors can be found at http://www.jpedhc.org/authorinfo. The suggested word count for case studies is 3000 words. All case studies should be submitted using the Elsevier Editorial System (EES) at http://ees.elsevier.com/jphc.

Case studies should include a title page, brief introduction, case presentation, case discussion, and references. Author name(s), credentials, role, place of employment, mailing address, and e-mail address should be listed on the title page. At least three key words should be included on the title page. A disclosure statement should be included for each author on the title page. If an author has no conflicts of interest to declare, this must be stated. The following is sample text: Jane Smith reports having received lecture fees from XYZ Laboratories. Susan Brown disclosed consulting fees from 123 Inc. Elizabeth Wall reports no financial interests or potential conflicts of interest.

Patient anonymity should be maintained. In accordance with the International Committee of Medical Journal Editors recommendations (http://www.icjme.org) no patient names, initials, or hospital numbers should be included in manuscripts. Authors are encouraged to state female infant, 10-year-old African American female, etc. Although author affiliations may reflect where the patient was cared for, specific institutions should not be identified in the text and should be referred to as specialty Children’s Hospital, Pediatric Trauma Center, etc. All authors are encouraged to check with their employers if Institutional Review Board or other permissions are needed for case study publications.

Authors are encouraged to include evidence-based findings related to the case in their paper. References should be no older than 5 years old. Case studies can be written using template A with questions and referenced answers or presented or using template B with an introduction, case presentation, and case discussion referenced appropriately. For an example of appropriate writing style for template A, see Souto, A., Pudel, M., & Hallas, D. (2011). Evidence-based care management of the late preterm infant. *Journal of Pediatric Health Care*, 25(1), 44-49. For an example of appropriate writing style for Template B, see Lund, B. (in press). Herpes simplex virus reactivation and encephalitis after topectomy. *Journal of Pediatric Health Care*, 25(4).

**TEMPLATE A**

*Brief introduction* including a summary of the patient(s) that will be presented which may include the chief complaint and history of the present illness. An introduction to the diagnosis should be described.

*Case Presentation* including any of the following that are pertinent to the case:
- Chief Complaint
- History of Present Illness (includes status of immunizations, travel, exposure)
- Past Medical History (includes hospitalizations, surgeries, trauma)
- Medications
Family History
Personal/Social/Developmental History
Review of Systems
Pertinent Physical Examination Findings
Diagnostic Studies (include any laboratory or radiologic evaluation, which are of importance for diagnosis)

Case Study Questions
Three to five case study questions should appear at the end of the presentation and may be related to diagnosis, treatment, intervention and follow-up. Sample questions are listed below; however, authors are encouraged to tailor their questions to the case presented.

Examples of questions are:
What differential diagnoses should be considered for this child?
What diagnostic tests/criteria are you considering ordering?
What is your proposed management for the patient? What is the best available evidence that supports the management?
What is the recommended follow-up for this child?

Authors are encouraged to use practice guidelines when available. If there is a practice guideline available, critically appraise the guideline and briefly discuss whether the guideline was appropriate for use in the case. If a practice guideline is not available, please provide the best available evidence for the case management.

Case Study Answers
Provide detailed and referenced answers for each question chosen. Authors are encouraged to integrate evidence based research in answers when available. Discussion may include the following:
Differential Diagnoses
Assessment (include what is unique or important)
Management and Plan
Recommended Follow-up

A concluding paragraph should summarize the patient condition and outcome. For acute and specialty case studies, provide needed follow-up with primary care implications.

TEMPLATE B

Brief introduction including a summary of the patient(s) that will be presented which may include the chief complaint and history of the present illness. An introduction to the diagnosis should be described.

Case Presentation including any of the following that are pertinent to the case:
Chief Complaint
History of Present Illness (includes status of immunizations, travel, exposure)
Past Medical History (includes hospitalizations, surgeries, trauma)
Medications
Family History
Personal/Social/Developmental History
Review of Systems
Pertinent Physical Exam Findings
Diagnostic Studies (include any laboratory or radiologic evaluation which are of importance for diagnosis)

Discussion should include pertinent diagnostic testing, differential diagnoses, pathophysiology, scientific-based management, and follow-up for the patient presented. The patient outcome should be described.

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