This Will be the Title of Your Paper

*Running (Short) Title*

First Author’s Full Name1, Second Author’s Full Name1,   
Third Author’s Full Name2, etc.

1 Department Name, Name of Institution, City, Country (first and second author’s affiliation, for example)

2 Department Name, Name of Institution, City, Country (third author’s affiliation, for example)

**Corresponding Author’s information:**

Full name, address, email address, telephone and/or fax number of the author responsible for manuscript preparation. Author details must not show any professional title (e.g. Managing Director), any academic title (e.g. Dr.) or any membership of any professional organization (e.g. Senior Member IEEE).

To avoid confusion, the family name must be written as the last part of each author name (e.g. John A. Smith).

Name of Department and Institution where work was done (required).

Source(s) of financial support in the form of grants (quote the number of the grant) equipment, drugs etc. (if applicable)

Statements and declarations regarding conflicts of interest (required).

Declaration about informed consent (required).

Abstract

**Background:**

This template will provide you with a guide for formatting your manuscript, as per the instructions of American Journal of Case Reports. Manuscripts must be submitted in this format to be considered for publication. The general guidelines for submission in American Journal of Case Reports are in accordance with: Uniform Requirements for Manuscripts Submitted to Biomedical Journals (N Eng J Med, 1997; 336: 309-15). Text should be one and a half spaced with 12-point typeface. Margins: 2.5 cm (1 inch) at top, bottom, right, and left.

**Case Report:**

Abstract should be in structured form, not exceeding 250 words, and should consist of three paragraphs labelled: Background, Case Report, and Conclusion. There should be *no citations* within the Abstract section of the manuscript.

**Conclusion:**

Each summary section should begin in a new line and briefly describe, respectively, the purpose of publishing the case and the principal conclusion that authors draw from the case report.

**MeSH Keywords:** 3 to 6 keywords or short phrases, separated by commas. The use of the MeSH-terms provided during the submission process is advised.

**Background:**

This section should contain scientific rationale and the reason for publishing the case report. Citations may begin in this section of the manuscript. Citations should be in square brackets [1], at full size, and should be numbered in the order in which they are cited, and listed in numerical order in the bibliography section. References must be up-to-date. References selected for publication should be chosen for their importance, accessibility, and for the further reading opportunities they provide. The style of references is that of Index Medicus, examples can be found in this template’s Reference section. List all authors when there are six or fewer; when there are seven or more, list the first three, then “et al”. Avoid using abstracts or review papers as references. Unpublished observations and personal communications can not be used as references. If essential, such material may be incorporated in the appropriate place in the text.

**Case Report:**

Your case report should be written in complete sentences, in narrative form. You may break your report into paragraphs, but be sure to include:

- Patient information: age, gender, ethnicity (age at diagnosis of related medical problem if different from the patient’s age)

- information about health hazards (tobacco smoking, alcohol, substance abuse)

- objectives for case reporting

- main medical problem

- co-existing diseases

- related medication and diagnostic and therapeutic procedures. The drugs and other chemicals should be precisely identified including generic name, dose and route of administration.

- clinical solution of the described problem. Report treatment complications.

In preparing your manuscript, all figures and tables should be saved in separate files and uploaded under the appropriate headings (ex. Figure 1, Figure 2, Table 1, etc.). Be sure to reference each of your figures and tables in your text. We will try to place them as close to the reference as possible. Figures should be at a preferred resolution of 300 dpi, in the following formats: .jpeg, .tiff, .eps, .psd, .pdf. Letters, numbers, and symbols should be clear and even throughout and of sufficient size that when reduced for publication each item will still be legible. All identifiable names must be redacted from any laboratory or radiological films. If a figure has been published previously in any manner, acknowledge the original source and submit written permission from the copyright holder to reproduce the material. Permission is required irrespective of authorship or publisher, except for documents in the public domain. The Titles and legends for your figures should appear at the end of the manuscript, after the references. References first cited in tables or figure legends must be numbered so that they will be in sequence with references cited in the text.

**Discussion:**

Discuss your case in reference to clinical practice and literature. Discussion should deal only with new and/or important aspects of the study. Do not repeat in detail data or other material from the Background or the Case Report section. Include in the Discussion the implications of the findings and their limitations, including implications for future research. The discussion should confront the results of other investigations especially those quoted in the text.

**Conclusion:**

State new hypotheses when warranted. Include recommendations when appropriate. Unqualified statements and conclusions not completely supported by the obtained data should be avoided.

**Acknowledgements:**

List all contributors who do not meet the criteria for authorship, such as technical assistants, writing assistants or head of department who provided only general support. Financial and other material support should be disclosed and acknowledged.

**Figure Legends**

Figure 1. Here you would describe each figure and its significance.

Figure 2. Be sure to include a legend for each figure. Be sure to note prominent features.

Figure 3. If you use arrows, letters, or other indicators in your figures, be sure that they are permanently affixed in place, and referenced in the legend.

**References (examples):**

1. **Standard journal article:** Lahita R, Kluger J, Drayer DE, Koffler D, Reidenberg MM. Antibodies to nuclear antigens in patients treated with procainamide or acetylprocainamide. N Engl J Med 1979; 301:1382-5.
2. **Article with published erratum**: Koffler D, Reidenberg MM. Antibodies to nuclear antigens in patients treated with procainamide or acetylprocainamide [published erratum appears in  N Engl J Med 1979;302:322-5]. N Engl J Med 1979; 301: 1382-5.
3. **Article in electronic form**: Drayer DE, Koffler D. Factors in the emergence of infectious diseases. Emerg Infect Dis [serial online] 1995 Jan-Mar [cited 1996 Jun 5]; 1(1):[24 screens]. Available from: URL:http://www.cdc.gov/ncidod/EID/eid.htm
4. **Article, no author given:** Cancer in South Africa [editorial]. S Afr Med J 1994;84:15.
5. **Book, personal author(s)**: Ringsven MK, Bond D. Gerontology and leadership skills for nurses. 2nd ed. Albany (NY): Delmar Publishers; 1996.
6. **Book, editor(s) as author:** Norman IJ, Redfern SJ, editors. Mental health care for elderly people. New York: Churchill Livingstone; 1996.
7. **Book, Organization as author and publisher:** Institute of Medicine (US). Looking at the future of the Medicaid program. Washington: The Institute; 1992.
8. **Chapter in a book:**Phillips SJ, Whisnant JP. Hypertension and stroke. In: Laragh JH, Brenner BM, editors. Hypertension: pathophysiology, diagnosis, and management. 2nd ed.  New York: Raven Press; 1995. p. 465-78.
9. **Conference proceedings:** Kimura J, Shibasaki H, editors. Recent advances in clinical neurophysiology. Proceedings of the 10th International Congress of EMG and Clinical Neurophysiology; 1995 Oct 15-19; Kyoto, Japan. Amsterdam: Elsevier; 1996.
10. **Conference paper:**Bengtsson S, Solheim BG. Enforcement of data protection, privacy and security in medical informatics. In: Lun KC, Degoulet P, Piemme TE, Rienhoff O, editors. MEDINFO 92. Proceedings of the 7th World Congress on Medical Informatics; 1992 Sep 6-10; Geneva, Switzerland.