**CAR** **CASE REPORT WRITING TEMPLATE FOR AUTHORS**

**NAMA 2016**

**The guidelines are meant to be an overview of the case report writing process. It is very important that case reports are written in a structured manner so that they are easy to follow and serve as an easy to use tool for others.**

**General Considerations:** Please ensure that all client data has been de-identified. Please identify whether you have any competing interests.

**Informed Consent:** Confirm that the client provided informed consent for publication of this case report. (Examples of Informed Consent for case studies can be found on the Council for Ayurvedic Research website)

**Title:** Include the words “case report,” “case,” or “case study” in the title. Describe what is of greatest interest to you, the author.  This could be the presentation, the Ayurvedic assessment, a test result, the intervention, or the outcome. It is also helpful to include the presenting symptoms, assessment (Western and/or Ayurvedic), and the treatment intervention in the title.

**Abstract:** In a short summary (as per the journal guidelines or approximately 200 words) include the following information if relevant: (1) Rationale for this case report, (2) Presenting concerns of the client (such as chief complaints or symptoms, diagnoses), (3) Assessment, (4) Interventions (such as preventive, prognostic, therapeutic herbal, yoga, lifestyle, body work therapy etc ), (5) Outcomes, and (6) Main lessons to learn from this case report. The overall goal in the abstract is to concisely convey why the case was important and how it adds to our collective knowledge base.

**Key Words:** Provide 2 to 5 key words that will help potential readers search for and find this case report.  They should include both Ayurvedic and Western related terms that involve the assessment, treatment, and any other words that are important.

**Introduction:** Briefly summarize the background, context, and epidemiological information of this case report, particularly specifying the Ayurvedic context and any relevance for collaboration with other systems of medicine. This should include information about the condition being treated in both the Western and Ayurvedic perspectives.

**Presenting Concerns:** Why did the client come to you? Describe the client characteristics (such as the relevant demographics—age, gender, ethnicity, occupation) and their presenting concerns and symptoms with relevant details of related past medications, herbs, lifestyle interventions and/or procedures both biomedically and Ayurvedically. *It is very important not to include any observations or interpretation in this section. It should be a faithful report of the client’s perspective and their history. No clinical judgment should be reported beyond a faithful report of the history, previous assessments, and previous treatments.*

**History:** Describe the background information that is relevant to the client’s presentation. This includes but is not limited to: 1) Medical, family, and psychosocial history including lifestyle and genetic information, 2) Past history of Interventions (Ayurvedic, biomedical and other holistic or self-care).

**Timeline: This section is optional**. Create a timeline that includes specific dates and times in a table, figure, or graphic.  Visit [www.care-statement.org/case-report-examples](http://www.care-statement.org/case-report-examples) for one example of a case report timeline.

**Clinical Findings**: Include relevant biomedical findings and Ayurvedic constitutional assessment. Descriptions of the constitution and imbalance should be specific and brief. Describe the physical examination (PE) focused on the important findings including results from laboratory or other testing. *It is important not to render a diagnosis in this section and it should be restricted to reporting of the exam and laboratory findings.*

**Ayurvedic Assessment/Diagnosis:** Include the biomedical diagnosis. The Ayurvedic assessment/diagnosis should take into account the results from the physical exam and constitutional assessment. It is helpful to make a correlation to Western diagnosis when possible and appropriate so that the report can have greater readership and appreciation.

**Therapeutic plan:** Describe the (1) types of interventions (herbal, yoga, lifestyle, body work therapy etc.) and (2) administration, intensity, and duration of the intervention. Where applicable, include the dosage (amount/day and length of time taken).

**Follow-up and Outcomes:** Please describe the clinical course of this case including all follow-up visits. Use the same measures reported in the Ayurvedic clinical findings and exam details.

This section should address:

1. Interventionmodification, interruption, or discontinuation, and the reasons;
2. Adherence to the intervention and how this was assessed;
3. (A) Client-reported outcomes, (B) clinician assessed and reported outcomes, and (C) important positive and negative test results.
4. Adverse effects or unanticipated events.

**Discussion:** Please describe the strengths and limitations of this case report including case management, and the scientific and medical literature related to this case report. Please discuss what is unique about this case and the way in which the case study adds to the knowledge base in this area. Discuss how these results may be useful or applicable to other clinicians and clients. This discussion should including a summary of what is generalizable from the case report as well as what is individual and unique.

This section should include:

1. Main findings of the case report.
2. The rationale for the conclusions.
3. Strengths and limitations of the case report.
4. Contributions to the knowledge in the field.
5. Suggestions for future research.