Guidelines to prepare case reports for the ECPHM examination

THREE CASE REPORTS must be submitted as part of the application

These Case Reports should represent different topics in the field of swine health and production. Individual and population cases are acceptable in all practice categories. The reports should include complete and appropriate diagnostic workups and medical and/or surgical managements. Case Reports represent your ability to communicate medical observations and data in an organized and appropriate manner. Errors in spelling or syntax, or failure to follow the Case Report instructions, reflect poorly on your professionalism and will adversely affect the evaluation.

Previously published Case Reports may be submitted if written within the last five years.

Publication of Case Reports (even in refereed journals) does not necessarily imply that the organization and content of the Case Reports will be found acceptable by the Credentials Committee. If these previously published Case Reports were not written according to the format and style outlined herein, they must be rewritten in this style and format. Case Reports should allow the Credentials Committee to evaluate an applicant’s ability to recognize problems, formulate differential diagnoses, and develop and implement appropriate diagnostic, therapeutic or preventive plans. Case Reports that are original research or only a literature review of a topic are unacceptable.

Preparation of Case Reports

Layout
Case Reports must be in English and must include, in the following order:

1. Title
2. Summary

Provides an interpretative summary of the Case Report. Do not exceed 150 words!

3. Introduction

States the purpose of the report, a brief review of the problem, and a literature review that is pertinent and covers the breadth of current knowledge regarding the problem. This should include pathophysiology, typical history and presentation, important differentials, diagnostic approach, treatment options and mechanisms of action where appropriate, prognosis, and any other pertinent information about the topic.
4. Clinical Report

Includes the anamnesis, physical findings, diagnostic methods and results (e.g., laboratory and radiological findings), differential diagnoses, treatment and results, necropsy findings (when appropriate), final diagnoses, and outcome of case(s). All laboratory work performed must be reported in table form, including normal range values. Specialists who aided in the case should be acknowledged but not named. Indicate whether laboratory work was performed in-house or out-sourced.

5. Discussion

Consists of the author’s subjective critique of the clinical report and management of the problem. This is different from the clinical report, in which the clinical findings are objective. No new information should be added in the Discussion. Explanations of the deficits in case management are presented here and, when necessary, justifications for choices made that differ from management suggested in the literature review.

6. Acknowledgements

7. References

Format

In regard to references, it must be taken into consideration that:

1. All publications cited in the text must be presented in the reference list that follows the text of the manuscript. The manuscript should be carefully checked to ensure that the spelling of author’s names and dates are exactly the same in the text as in the reference list.

2. In the text, the author’s name (without initial) and year of publication must be referred. Examples: Jones, 1988 (in case of only one author), Jones and Ellis, 2003 (in case of two co-authors) or Jones et al. 1999 (in case of more than two co-authors).

3. References cited together in the text should be arranged chronologically. The list of references should be arranged alphabetically on authors’ names, and chronologically per author. If an author’s name in the list is also mentioned with co-authors the following order should be used: 1. publications of the single author, arranged according to publication dates; 2. publications of the same author with one co-author and 3. publications of the author with more than one co-author. Publications by the same author(s) in the same year should be distinguished from each other by placing a letter, in alphabetical order, after the year (e.g. 1974a, 1974b).
4. In the reference list, the following system must be used for arranging the references:

4.1 **For periodicals**: Author’s name(s), year of publication, title, full name of journal or periodical, volume and pages (e.g. Munsterhjelm C, Valros A, Heinonen M, Halli O, Peltoniemi O., 2006. Welfare index and reproductive performance in the sow. Reproduction in Domestic Animals 41: 494-500).

4.2 **For books**: Author’s name(s), year of publication, book title, publisher, city and country of publication and pages (e.g. Armitage, P., Berry, G., 1987. Statistical Methods in Medical Research. Blackwell Scientific Publications, Oxford (United Kingdom), pp. 94-100, 411-416).

4.3 **For book chapters in multi-author books**: Author’s name(s), year of publication, chapter title, and book information (preceded by “In”), including Editor’s name(s), book title, publisher, city and country of publication and pages (e.g. Dewey, C.E., Straw, B.E., 2006. Herd examination. In: Straw, B.E., Zimmerman, J.J., D’Allaire, S., Taylor, D.J. (Eds.), Diseases of swine, Blackwell Publishing, Ames (Iowa, USA), pp. 3-14).

5. Use the full name of the journals or periodicals.

6. In the case of publications in any language other than English, the original title is to be retained. However, the titles of publications in non-Latin alphabets should be transliterated, and a notation such as "(in Russian)" or "(in Greek, with English abstract)" should be added.

7. Work accepted for publication but not yet published should be referred to as "in press".

8. References concerning unpublished data and "personal communications" should not be cited in the reference list but may be mentioned in the text.

9. Web references may be given. As a minimum, the full URL is necessary. Any further information, such as author’s names, dates, reference to a source publication and so on, should also be given.

10. Articles available online but without volume and page numbers may be referred to by means of their Digital Object Identifier (DOI) code.
In regard to format and style of the text of case reports, it must be said that:

1. **Case Reports must be double-spaced** and **each page must be numbered**. The type must be of letter quality. Black ink should be used throughout. If hardcopies will be submitted, each of the four copies of all Case Reports must be of original quality. The Case Reports will not be returned to the author.

2. Products and equipment should be identified by chemical or generic names or descriptions. A **trade name may be included in a lettered endnote** along with name and location (city and state) of the manufacturer, when the product or equipment was essential to the outcome of the case.

3. If the report involved evaluation of efficacy or safety of a pharmaceutical, biologic, or other product, such **product must be commercially and legally available**.

4. For weights and measures, **metric units should be used**. Dosages should be expressed entirely in metric units and with specific time intervals, for example, 22 mg/ kg q 12 h, not 10 mg/lb BID.

5. Figures (e.g., radiographs, photographs, electrocardiograms, line drawings, etc.) necessary to support important portions of the case are recommended. These should be submitted as 5”x7” or similar-sized prints or as high-quality computer-generated graphics. Neatly tape, glue or print the laser images onto a separate sheet with an appropriate legend. Figures and tables should be placed on a separate page in the Case Report immediately following the first text reference to the figure or table. When prints are used, a separate print (not a photocopy) must be included in each of the four copies of the Case Report. Do not send original or copies of the medical record or laboratory reports. This information, if important, should be in the text, tables or figures.