



## **SPMI Case Reports**

### **Guide for Authors**

#### **A. General rules**

1. I have read and understood the “Instructions for Authors” available on the SPMI Case Reports website - <https://casereports.spmi.pt/index.php/cr/about/submissions>.
2. The contribution is original and is not under review or for publication in another journal;
3. The wording of the document meets the following requirements:
  - a) The text is single-spaced;
  - b) The font is 12 points;
  - c) Italics are used instead of underlining (except URL addresses);
  - d) Figures and tables are inserted in the text, not at the end of the document or as annexes.
4. At the time of submission, I confirmed that the following documents had been properly completed:
  - a) Patient consent for publication;
  - b) Declaration of potential conflicts of interest;
  - c) Declaration of authorial responsibility and contribution

#### **5. Text and limits**

	<b>Clinical cases</b>	<b>Images</b>
Words (excluding abstract, figures and tables)	Maximum 2000	Maximum 200
Abstract	Maximum 150 words	There is no abstract

Figures/Tables	Maximum 4	Maximum 2 figures
References	Maximum 20	Maximum 6
Authors	Maximum 5	Maximum 3

## 6. Abbreviations

Abbreviations or acronyms should not be used in the title or abstract. Their number should be limited in the body of the text. Non-established abbreviations need to be defined when they are first used, in full, followed by the abbreviation in brackets.

## 7. Units of measurement

The units in the “International System of Units” must be used.

## ARTICLE WRITING TEMPLATE

Read the tips provided in each section as you write. Use formal **Portuguese/English** and scientific terminology. You can use the template below to write your article.

### TITLE

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- Case title - use a direct title in Portuguese and clinical English that accurately reflects the subject of the case report.
- It should be informative, interesting and attractive.
- Do NOT use humorous words or phrases or a play on words. This makes the case more difficult to find in keyword literature searches and makes it harder to understand what the case is about. Humor does not translate well internationally and the message to patients can be disrespectful.

### ABSTRACT

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- It is one of the most important parts because it is the information that is available in electronic databases.
- It should be written last.
- Maximum 150 words, no abbreviations or references.
- Describe the essential information of the case and emphasize the learning points/key points.

- A concise and factual abstract is required, capable of representing the content of the article in a stand-alone format, written in Portuguese and English.
- No information that does not appear in the manuscript may be mentioned in the abstract.

## KEYWORDS

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- Select 5 keywords for your clinical case to help readers carry out a digital search.
- Use the terminology in the Medical Subject Headings (MeSH), <https://meshb.nlm.nih.gov/search>.

## INTRODUCTION

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- It should be 1 to 2 paragraphs long.
- In this section, the purpose of the clinical case should be clearly described and information provided to demonstrate how the case contributes to the medical literature.
- Abbreviations can be used here, once they have been defined in the text, and relevant scientific references should be included to justify the publication of the case.

## CASE DESCRIPTION

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- It should be 3-5 paragraphs long.
- Describe what happened, with a logical timeline.
- Present only relevant information.
- It can be divided into sub-sections:
  - *Patient information:*
    - Maintain the patient's anonymity while avoiding identifying the institution. If necessary, use phrases such as “presented to/in our Department”, “was referred to our specialized tertiary unit” ...

- The patient's main complaints and symptoms
- Medical, family and psychosocial history, including genetic information
- *Relevant clinical findings:*
  - relevant physical examination and other clinical findings (pertinent positive and negative)
- *Timeline* (not mandatory):
  - Episode information organized as a timeline (figure or table).
- *Diagnostic study* (investigation):
  - diagnostic methods (physical examination, analytical study, auxiliary diagnostic tests...)
  - Challenges and diagnostic reasoning including differential diagnosis
  - Prognostic characteristics, where applicable
- *Therapeutic intervention:*
  - Type of intervention (pharmacological, surgical, preventive)
  - Administration of intervention (dose, duration...)
  - Challenges in intervention with explanation
- *Follow-up and outcome:*
  - Description of the results
  - Follow-up diagnosis and other results
  - Adherence and tolerability to the intervention, and how it was assessed
  - Adverse and unforeseen events.

## DISCUSSION

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- It should be brief and focused.
- The discussion is a description of the “why” of the results reported in the specific case.
- It should include relevant and up-to-date scientific references, comparing the case with similar ones in the literature.
- It is important to discuss potential limitations.

- The last paragraph of the Discussion should be a Conclusion, consisting of a summary paragraph, highlighting the main message for the reader. Do not use references in this paragraph.

### **LEARNING POINTS (3-5 main points):**

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- Put the article's essential messages to the reader here.
- They should be short, targeted messages, specified in bullet points (3-5 points).

### **ACKNOWLEDGMENTS**

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- You can add an acknowledgements section, which should only be included if absolutely essential and should be succinct.

### **REFERENCES**

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- They should be as contemporary as possible (avoid publications more than 10 years old, except for “canonical” studies of extraordinary importance) and limited to those most relevant to the case.
- Maximum of 20 references for clinical cases.
- See the rules for the use of references indicated by the journal, in the “Preparing the manuscript” section of the “Submission Guidelines” - <https://casereports.spmi.pt/index.php/cr/about/submissions>.

### **FIGURE/VIDEO/TABLE CAPTIONS**

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- Maximum 4 figures/tables.
- Tables/Figures must be numbered in the order in which they are cited in the text and marked with Arabic numerals and identification.
- Figure: When referred to in the text is abbreviated to Fig., while Table is not abbreviated. In the captions, both words are written out in full.

- Each Table and Figure must be accompanied by a succinct and clear caption. Captions should be self-explanatory (without the need to refer to the text).
- See the guidelines for images, tables and figures in the “Preparing the manuscript” section of the “Submission Guidelines” - <https://casereports.spmi.pt/index.php/cr/about/submissions>.