

**Case Title (Times New Roman Font, Bold, With Size 18, Please use a clinical and straight forward title that mentions the diagnosis, Do not use cryptic, humorous or play-on-word titles, There should be no exclamation mark in the title, Do not put the patient's age or ethnicity in the title)**

**ABSTRACT**

Write nonstructured abstracts in English maximal 250 words for each version. Abstracts are written in Times New Roman font size 10 with a space of 1, aligned right left according to the template. The abstract should be clear, and descriptive and should give a brief overview of the problem under study. This is a summary of the entire manuscript. Use a maximum of 150 words summarising the case presentation and outcome. Give a good flavour of the case and emphasise the learning points. The SUMMARY is distinct from the BACKGROUND section below - do not copy and paste.

Keywords: Write keywords here, a maximum of 5 words/phrases, between words/phrases are limited to semicolons.

**INTRODUCTION**

The introduction described the background/justification underlie why this case report needs to be presented. The introduction also described the specific presentation of the case study.

- Give the context of your manuscript
- Is this a prevalent health problem?
- Is there a clear message?
- The BACKGROUND is distinct from the SUMMARY section above. Do not copy and paste
- Citation writing uses superscript numbers before point1.
- Library writing using Vancouver2.

Subtitles are written in times new roman font size 12 pt, Bold, spacing 1.15; before 12 pt and after 6 pt. The contents of the subtitles were made Times New Roman size 11 pt, justify, spacing 1.15; before 0 pt and after 0 pt. While the bibliography section is written with Times New Roman size 11 pt, Bold, spacing 1.15; before 0 pt and after 3 pt.

**CASE PRESENTATION**

Write down the Case Presentation here with *the font Times New Roman*, size 11 pt, space 1.15.

- Give a comprehensive account of the presenting features, including the medical/social/ family history
- This is the patient's story – anonymise the manuscript as far as possible. Exact ages are not necessary (“in his 20s” is sufficient). Ethnicities and exact occupations should be avoided unless essential to the manuscript. Place names and calendar dates are to be avoided – use regions of the world and “2 months/days later”, for example, instead.
- How did they present?

- What is the relevant history? Why is this relevant?
- Explain your findings and how they influenced your decisions
- Do not use abbreviations for diseases or investigations
- Use internationally accepted units for measurements
- Use only scientific names of drugs. Include the manufacturer in brackets when describing equipment
- Present information in ways that are easy to follow. Use diagrammatic flowcharts and timelines where appropriate. Results may be tabulated or presented graphically. Make clear that you have drawn figures and that these have not been taken from other publications or Internet sources.

#### **INVESTIGATIONS If relevant**

- All investigations that create a background (baseline) picture are relevant
- All investigations that are crucial to management decisions should be discussed in full – include the limitations of investigations and problems in their interpretation
- Choose appropriate images and videos to illustrate your point. Remove all details that identify the patient
- We do not publish images that include the patient's face
- Images and videos should be fully annotated. Use arrows and labels with explanations so that readers may understand easily and may learn from these

#### **DIFFERENTIAL DIAGNOSIS If relevant**

- Please do not list diagnoses. We want to understand how the final diagnosis was teased out. This is often the most important section and should be discussed in full
- All working diagnoses need to be substantiated

#### **TREATMENT If relevant**

- Include pharmacological and non-pharmacological treatment, e.g. surgery, physiotherapy, supportive care
- If your patient was treated as part of a clinical trial, please, give full details of licensing, dosage and permission for use of the drug, trial registration data and whether permission was obtained from the patient to receive the drug
- We do not publish reports of experimental therapies or drug treatments. If this is a recent therapy, cite all relevant scientific literature

#### **OUTCOME AND FOLLOW-UP**

- Always include comprehensive follow-up data; this gives readers a clear understanding of outcome
- Follow up data should include the health of the patient, return to daily activity, work and after care arrangements
- The follow-up period should be defined. Please update follow up data after final revision of the article
- Please state whether the patient has died and whether this was after discharge

## **DISCUSSION**

Include a very brief review of similar published cases

• This is the opportunity to describe mechanisms of pathology/injury, current guidelines, diagnostic pathways (use original diagrams to illustrate processes), and the points of interest of the case

- Cite up-to-date supporting literature
- Include a summary of similar published cases. Where appropriate these may be tabulated
- A summary of relevant clinical guidelines is important
- Please do not copy and paste from existing publications, texts or web resources (including material you have published yourself)
- Ensure that any content used from sources are clearly cited, with any significant sections of directly copied text either re-phrased or included as direct quotations and are referenced.
- Use software to check for overlapping text before you submit
- Please do not reproduce tables or figures from other publications without obtaining permission for reproduction before submission
- Do make clear whether you have drawn your own figures
- We welcome all figures that illustrate clinical-pathological correlations – these add substantially to the learning value of the article

Are your conclusions supported by the clinical information described? Do you need to temper your conclusions? Have you described a possible causal association with adequate caution?

## **CONCLUSION**

Are your conclusions supported by the clinical information described? This is the most crucial part of the case – what do you want readers to remember when seeing their own patients?

## **ACKNOWLEDGMENT**

Parties who are actually involved in the research, including research funders if any.

## **REFERENCES** (the 80% of references should be the recent 10 years publication)

1. Examples of journals/magazines: Xiong Y, Lu JQ, Zhao J, Wu GY. Metformin inhibits growth of hepatocellular carcinoma cells by inducing apoptosis via mitochondrion-mediated pathway. *APJCP* 2012; 13(7):3275-3279.
2. Hanna RK, Zhou C, Malloy KM, Sun L, Zhong Y, Gehrig PA, et al. Metformin potentiates the effects of paclitaxel in endometrial cancer cells through inhibition of cell proliferation and modulation the motor pathway. *Gyn Oncol* 2012;125:458-469
3. Example of textbooks: Darnell J, Lodish H, Baltimore D. *Molecular cell biology*. 2nd edition. New York: W.H. Freeman and Company; 1990.
4. Example if the editor as author book: Dinner HC, Wilkinson M, editor. *Drug-induced headache*. New York: Springer-Verlag; 1998.
5. Example book chapter: Robertson GL. Disorder of the neurohypophysis. In: Jameson JL, editor. *Harrison's Endocrinology* 2nd Edition of New York: Mc Graw-Hill; 2010:50-61.

6. Example of an Organization as a Writer: The Ministry of Health of the Republic of Indonesia (Depkes RI). Indonesia Health Profile 2008. Jakarta: Ministry of Health of the Republic of Indonesia; 2009.
7. Examples of manuscripts published in *proceedings*: Christensen S, Oppacher F. An analysis of koza's computational programming. In: Foster JA, Lutton E, Miller J, Ryan C, Tettamanzi AG, editors. Genetic Programming: Euro GP 2002: Proceedings of the 5th European Conference on Genetic Programming; 2002 Apr 3-5; Kindsdale, Ireland. Berlin: Springer; 2002:182-91.
8. Example of dissertation or thesis: Indrasetiawan P. Activity of alpha terpineol as an anticancer candidate on *cell line* T47D: cytotoxicity, proliferation barriers and apoptosis races [translate from Indonesian Language] [Thesis]. Yogyakarta: Gadjah Mada University; 2011.
9. Examples of journals from the internet: Garfinkel PE, Lin E, Goering P. Should amenorrhea be necessary for the diagnosis of anorexia nervosa? Br J Psych [online serial] 1996 [citation August 17, 1999];168(4):500-6. Uploaded from: [URL:http://biomed.niss.ac.uk](http://biomed.niss.ac.uk)