

# Radiology Case Reports

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## From the editor's desk: Common errors in submission of case reports

Matthew Heller, MD; Marinos Kontzialis, MD; Anita Anderson, BA; and Puneet Bhargava, MD

Case reports remain an invaluable resource in the literature, and they continue to serve an equally important role in scientific advancement. They record discoveries, report the unexpected, and spark further research. Preparation of a case report can be a great learning experience, especially for medical students, residents, and young physicians. It serves as an excellent introduction to academic writing, familiarizing them with all aspects of publishing, from a structured case presentation and literature review to submitting and revising a manuscript. It can also stimulate an interest in a specific topic and gradually lead to more involved and complex academic endeavors.



*Matthew Heller, MD, University of Pittsburgh Medical Center; Section Editor for RCR*

*Radiology Case Reports* (RCR) is a unique, open-access, peer-reviewed journal that fills a much-needed place in the radiology literature, since numerous radiology journals are moving away from the publication of case reports for vari-

ous reasons. The radiologic case report aims to make a unique contribution to the literature by describing the imaging findings of a rare or unknown disease, specific treatment, or novel image-guided procedure (1, 2). Case reports effectively convey these unique contributions in the form of brief written communications. Compared to research publications, case reports lack specific sections, such as Materials and Methods, and are not subjected to the scientific rigor of blinded, hypothesis-driven clinical trials.

Despite these differences, case reports remain a cornerstone of discovery and knowledge advancement (3). To be accepted for publication in the radiologic literature, case reports must contain key information, and this information must be presented in a manner that convinces the editor and reviewers of its merit. Not uncommonly, the publication of a case report is significantly delayed or potentially precluded due to one of several correctable errors that occur during the writing or submission process. Many of these errors are due to not following specific instructions set forth on the journal's Web site. Inspired by the article by Pierson from 2004 (4), we describe several common errors encountered during the review process tailored to a case report submission.

### 1. Inappropriate manuscript

RCR provides a venue for case reports that feature radiologic imaging. Manuscripts describing a different type of medical imaging, such as endoscopy or nonhuman radiology, would be more appropriately submitted elsewhere. Additionally, the journal is not a forum for unsupported opinions or hypothesis-driven research. You can avoid

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Dr. Kontzialis is a resident in Diagnostic Radiology at the Ohio State University Wexner Medical Center, Columbus OH. Dr. Heller is an Assistant Professor at the University of Pittsburgh Medical Center, Pittsburgh PA. Ms. Anderson is a technical writer and editor. Dr. Bhargava is an Assistant Professor in the Department of Radiology, VA Puget Sound Health Care System and University of Washington, Seattle WA, and editor-in-chief of *Radiology Case Reports*. Contact Dr. Bhargava at [bhargp@uw.edu](mailto:bhargp@uw.edu).

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manuscript rejection based on these factors by reviewing the scope and goals of the journal before submission.

### 2. Incorrect format

Although the Information for Authors link on the journal's Web site specifies the font size, line spacing, and sections of manuscript layout, some authors choose to deviate from these instructions. While few submissions are overtly rejected because of these violations, publication may be significantly delayed, as the Editorial Office will need to list required changes even before the reviewer has seen the manuscript. One might assume that following the directions for formatting and general manuscript mechanics would be the easiest of the correctable errors to avoid, yet a significant percentage of submissions fall into this category.

### 3. Incomplete or incorrect authorship information

On the full title page, indicate the authors' full names (not just initials), pertinent academic degrees, and institutional affiliations. Also indicate the corresponding author. Include a valid email address for each author, as well as the full mailing and email address for the corresponding author. To avoid authorship abuse, grant authorship only to the individuals who made significant contributions to the manuscript writing and preparation; otherwise, you can make an acknowledgment at the end of the manuscript. Additionally, avoid an excessive number of authors (5).

### 4. Improperly processed figures

It is very important that you not combine multiple images into a common figure, since this creates difficulty during layout. The journal requires that each uploaded file consist of *only one figure part*; this allows the proper stacking or separation within the layout template. Each figure part submitted to support the manuscript should consist of a high-resolution image in JPEG or TIFF format. Photographs of images from a film or viewing monitor do not provide the proper resolution. Edit submitted images so that all patient demographic information has been removed.

### 5. Improperly formatted references

List references in the order in which they are cited in the manuscript; you must cite all references in the body of the manuscript, and they should use the standard index medicus format. Journal articles follow the style used by the National Library of Medicine. Journal articles must also include the PubMed identification number (PMID) in the exact format (PMID:344454) without any spaces. This number is used to generate a link so that readers can go directly to the article that you cite.

A proper reference might look like this:

1. Cohen O, Stener-Birmanns B, Biran I, Abramsky O, Honigman S, Steiner I. Recurrence of acute disseminated encephalomyelitis at the previously affected brain site. *Arch Neurol* 2001;58(5):797-801. PMID:11346375

You can also look at references already published in *Radiology Case Reports* for good examples to follow.

### 6. Suboptimal writing

The case report manuscript should be crisp and efficient, no longer than necessary while properly describing the unique contribution of the submitted case. Use of overly complicated vocabulary and superfluous paragraphs can quickly erode the teaching points of the case; this is especially common in the discussion section (6). Use the discussion to explain the meaning or result of the case (7). Avoid excessive brevity, acronyms, and jargon. If you are an inexperienced author or are not accustomed to writing a manuscript in English, seek assistance.

### 7. Failure to adequately revise a manuscript after peer review

Almost all submissions that undergo peer review require some degree of revision. The reviewers' comments are intended to improve the manuscript and safeguard against any erroneous statements. You will facilitate publication of your manuscript by providing a timely, point-by-point response to the reviewers' comments detailing how you have addressed each of them (4). A common issue for case reports is the requirement of surgical or pathologic proof of the entity being described; it is important to note that if neither of these is available, it is very unlikely that the case report can be accepted for publication.

In summary, the submission of a case report remains a worthwhile endeavor for its authors and for the radiology literature (8). However, since fewer radiology journals routinely accept case reports, it is becoming more difficult for authors to publish their unique findings and contributions to the literature in these forums (9). Case reports submitted for possible publication may also be delayed or rejected for numerous other reasons. Many of these delays or rejections are due to avoidable errors incurred during the writing and submission process. Therefore, it is important for you to familiarize yourself with the scope of the journal, its readership, and the guidelines set forth for its potential authors, as listed on the journal's Web site. Attention to these details will facilitate the timely acceptance of your case report—in an era when the number of case-report submissions is increasing and the number of participating journals is decreasing.

### References

1. Kontzialis M, Heller M, Bhargava P. From the editor's desk: Why still write a case report? *Radiology Case Reports (Online)* 2012;7:757.
2. Medverd JR, Pugsley JM, Harley JD, Bhargava P. Lateral approach for radiocarpal wrist arthrography. *AJR American Journal of Roentgenology*. 2011;196(1):W58-60. Epub 2010/12/24. doi: 10.2214/AJR.10.4900. [PubMed]

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3. White A. Writing case reports—author guidelines for acupuncture in medicine. *Acupunct Med.* 2004; 22(2):83-6. Epub 2004/07/16. [\[PubMed\]](#)
4. Pierson DJ. The top 10 reasons why manuscripts are not accepted for publication. *Respir Care.* 2004; 49(10):1246-52. Epub 2004/09/28. [\[PubMed\]](#)
5. DeBakey L, DeBakey S. The case report. I. Guidelines for preparation. *Int J Cardiol.* 1983;4(3):357-64. Epub 1983/10/01. [\[PubMed\]](#)
6. Byrne DW. *Publishing your medical research paper. What they don't teach in medical school.* Baltimore: Lippincott Williams & Wilkins; 1998.
7. Hess DR. How to write an effective discussion. *Respir Care.* 2004;49(10):1238-41. Epub 2004/09/28. [\[PubMed\]](#)
8. Vandembroucke JP. Case reports in an evidence-based world. *J Royal Soc Med* 1999;92(4):159-63. Epub 1999/08/18. [\[PubMed\]](#)
9. Green BN, Johnson CD. How to write a case report for publication. *J Chiropr Med.* 2006;5(2):72-82. doi: 10.1016/S0899-3467(07)60137-2.