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.

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
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.

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:

- 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. Use the discussion to explain the meaning or result of the case. 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. 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. 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. 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.

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