### CARE Checklist of information to include when writing a case report

| Topic          | Item No | Checklist item description                                                                 | Reported on Page Number/Line Number | Reported on Section/Paragraph |
|----------------|---------|--------------------------------------------------------------------------------------------|------------------------------------|------------------------------|
| Title          | 1       | The diagnosis or intervention of primary focus followed by the words “case report”         | 1/1-2                              | Title                        |
| Key Words      | 2       | 2 to 5 key words that identify diagnoses or interventions in this case report, including “case report” | 1/38                               | Keywords                     |
| Abstract (no references) | 3a | Introduction: What is unique about this case and what does it add to the scientific literature? | 1/24-25                           | Abstract                     |
| Abstract (no references) | 3b | Main symptoms and/or important clinical findings                                           | 1/25-29                           | Abstract                     |
| Abstract (no references) | 3c | The main diagnoses, therapeutic interventions, and outcomes                                | 1/29-31                           | Abstract                     |
| Abstract (no references) | 3d | Conclusion—What is the main “take-away” lesson(s) from this case?                         | 1/32-36                           | Abstract                     |
| Introduction   | 4       | One or two paragraphs summarizing why this case is unique (may include references)         | 1-2/44-97                         | Introduction                  |
| Patient Information | 5a | De-identified patient specific information                                                   | 2/101                             | Case presentation             |
| Patient Information | 5b | Primary concerns and symptoms of the patient                                               | 2/119-121                         | Case presentation             |
| Patient Information | 5c | Medical, family, and psycho-social history including relevant genetic information           | 2/102-106                         | Case presentation             |
| Patient Information | 5d | Relevant past interventions with outcomes                                                   | 2/108-117                         | Case presentation             |
| Clinical Findings | 6  | Describe significant physical examination (PE) and important clinical findings             | 2/123-127                         | Case presentation             |
| Timeline       | 7       | Historical and current information from this episode of care organized as a timeline       | 3/200                             | Figure 3                     |
| Diagnostic Assessment | 8a | Diagnostic testing (such as PE, laboratory testing, imaging, surveys).                      | 2/129-147                         | Case presentation             |
| Diagnostic Assessment | 8b | Diagnostic challenges (such as access to testing, financial, or cultural)                  | N/A                               | N/A                          |
| Diagnostic Assessment | 8c | Diagnosis (including other diagnoses considered)                                            | 2/154-150                         | Case presentation             |
| Diagnostic Assessment | 8d | Prognosis (such as staging in oncology) where applicable                                   | N/A                               | N/A                          |
| Therapeutic Intervention | 9a | Types of therapeutic intervention (such as pharmacologic, surgical, preventive, self-care) | 2/151-152, 3/171-176              | Case presentation             |
| Therapeutic Intervention | 9b | Administration of therapeutic intervention (such as dosage, strength, duration)             | 2/151-152, 3/171-176              | Case presentation             |
| Therapeutic Intervention | 9c | Changes in therapeutic intervention (with rationale)                                       | N/A                               | N/A                          |
| Follow-up and Outcomes | 10a | Clinician and patient-assessed outcomes (if available) | 2/161-169, 3/176-182 | Case presentation |
|------------------------|-----|-----------------------------------------------------|----------------------|------------------|
|                        | 10b | Important follow-up diagnostic and other test results | 3/184-206            | Case presentation |
|                        | 10c | Intervention adherence and tolerability (How was this assessed?) | 3/182-183            | Case presentation |
|                        | 10d | Adverse and unanticipated events                      | 3/179-180            | Case presentation |
| Discussion             | 11a | A scientific discussion of the strengths AND limitations associated with this case report | 3-7/225-445          | Discussion |
|                        | 11b | Discussion of the relevant medical literature with references | 3-7/225-445          | Discussion |
|                        | 11c | The scientific rationale for any conclusions (including assessment of possible causes) | 3-7/225-445          | Discussion |
|                        | 11d | The primary “take-away” lessons of this case report (without references) in a one paragraph conclusion | 7/447-454            | Discussion |
| Patient Perspective    | 12  | The patient should share their perspective in one to two paragraphs on the treatment(s) they received | 3/176-179            | Case presentation |
| Informed Consent       | 13  | Did the patient give informed consent? Please provide if requested | Yes ✓ No □          |                  |

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*As the checklist was provided upon initial submission, the page number/line number reported may be changed due to copyediting and may not be referable in the published version. In this case, the section/paragraph may be used as an alternative reference.