**AJPMR RFS CARE Checklist**

1. *Title* – The area of focus and “clinical vignette” should appear in the title **Line 1;3**
2. *Keywords* – Two to five keywords that identify topics in this case report **Line 27 (non-blinded version)**
3. *X Patient Information*
	1. De-identified demographic and other patient information **Line 7**
	2. Main concerns and symptoms of the patient’s presenting illness **Lines 14-17**
	3. Pertinent medical, family, and psychosocial history **Lines 17-18**
	4. Relevant past interventions and their outcomes **Lines 10-13**
4. *X Clinical Findings* – Relevant physical examination (PE) and other clinical findings  **Lines 21-29**
5. *X Timeline* (optional) – Relevant data from this episode of care organized as a timeline (figure or table). This will not be counted towards the figure/table limit.
6. *X Diagnostic Assessment*
	1. Diagnostic Methods (PE, laboratory testing, imaging, surveys) **Lines 78-83**
	2. Diagnostic Challenges **Lines 36-71**
	3. Diagnostic Reasoning including a Differential Diagnosis **Lines 36-71**
	4. Prognostic Characteristics when applicable **N/A**
7. *X Therapeutic Intervention*
	1. Types of intervention (pharmacologic, surgical, preventive) **Lines 67-71, 90-99**
	2. Administration of intervention (dosage, strength, duration) **Lines 67-61, 90-99**
	3. Changes in the interventions with explanations **Lines 67-71, 90-99**
8. *X Follow-up and Outcomes*
	1. Clinician and patient-assessed outcomes when appropriate **Lines 99-100**
	2. Important follow-up diagnostic and other test results **Lines 99-100**
	3. Intervention adherence and tolerability (how was this assessed?) **Lines 99-100**
	4. Adverse and unanticipated events. **None**
9. *X Discussion*
	1. Strengths and limitations in your approach to this case **Lines 104-110**
	2. Discussion of the relevant medical literature **Lines 104-145**
	3. The rationale for your conclusions **Lines 104-145**
	4. The primary “take-away” lessons from this clinical vignette **Lines 149-151**
10. *Patient Perspective* (optional) – The patient can share their perspective on their case **N/A**
11. *X Informed Consent* – The patient should give informed consent **Completed**
12. *X Educational Interactivity*
	1. Transitional questions aimed to prime reader’s critical thinking (e.g. What is your leading differential with the following symptoms?; How would you design a focused exam?; What laboratory/diagnostic tests would you consider?) **31-32, 63-74, and 85-86**
	2. Describe pathognomonic signs/symptoms, physical exam findings, and/or radiographic findings. **Lines 112-115, 117-123**
	3. Discuss testable features (i.e., describe how this could appear on a board exam). **Lines 31-32, 63-74, and 85-86**