**AJPMR RFS CARE Checklist**

1. *Title* – The area of focus and “clinical vignette” should appear in the title
   1. *Lines 1*-2
2. *Keywords* – Two to five keywords that identify topics in this case report
   1. *Line 23*
3. *Patient Information*
   1. De-identified demographic and other patient information
      1. Line 25
   2. Main concerns and symptoms of the patient’s presenting illness
      1. Line 26
   3. Pertinent medical, family, and psychosocial history
      1. Lines 25-26
   4. Relevant past interventions and their outcomes
      1. Lines 26-31
4. *Clinical Findings* – Relevant physical examination (PE) and other clinical findings
   1. Lines 33-39
5. *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. *Diagnostic Assessment*
   1. Diagnostic Methods (PE, laboratory testing, imaging, surveys)
      1. Lines 59-72
   2. Diagnostic Challenges
      1. Lines 69-70
   3. Diagnostic Reasoning including a Differential Diagnosis
      1. Lines 44-54
   4. Prognostic Characteristics when applicable
7. *Therapeutic Intervention*
   1. Types of intervention (pharmacologic, surgical, preventive)
      1. Lines 70-72
   2. Administration of intervention (dosage, strength, duration)
      1. Lines 70-72
   3. Changes in the interventions with explanations
      1. Lines 64-72
8. *Follow-up and Outcomes*
   1. Clinician and patient-assessed outcomes when appropriate
      1. Lines 150-152
   2. Important follow-up diagnostic and other test results
      1. Lines 152-153
   3. Intervention adherence and tolerability (how was this assessed?)
      1. Lines 152-153
   4. Adverse and unanticipated events.
      1. NA
9. *Discussion*
   1. Strengths and limitations in your approach to this case
      1. Lines 123-135
   2. Discussion of the relevant medical literature
      1. Lines 137-147
   3. The rationale for your conclusions
      1. Lines 154-157
   4. The primary “take-away” lessons from this clinical vignette
      1. Lines 153-155
10. *Patient Perspective* (optional) – The patient can share their perspective on their case
11. *Informed Consent* – The patient should give informed consent
    1. Patient provided verbal informed consent.
12. *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?)
       1. Lines 41, 56
    2. Describe pathognomonic signs/symptoms, physical exam findings, and/or radiographic findings.
       1. Lines 91-98; 1001110
    3. Discuss testable features (i.e., describe how this could appear on a board exam).
       1. Lines 75-78; 91-92