#### CLINICAL CASE (MANUSCRIPT TEMPLATE)

Indicate for which section of the journal the manuscript is intended, scientific specialty and its code should be also indicated.

#### 1. TITLE OF ARTICLE

Diagnosis and / or the most significant medical intervention (preventive, surgical, pharmacological, etc.) within the framework of the clinical situation under consideration. The title must contain the marker (separated by a colon) "clinical case" (or "clinical cases" if two or more patients are described in the manuscript).

#### 2. AUTHOR (s)

see Rules for Authors

#### 3. AFFILIATION

see Rules for Authors

## **4. ABSTRACT** (250-300 words)

## 4.1. Introduction

A summary of the "Introduction" section is presented in the main body of the manuscript (without links).

# 4.2. Description of the clinical case

Here to be indicated are significant clinical, laboratory, instrumental and other data, their qualitative or quantitative characteristics, as well as the final clinical diagnosis, interventions and outcomes.

## 4.3. Conclusion

A summary of the Conclusion section is presented in the main body of the manuscript.

## 5. Keywords

see Rules for Authors

#### 6. Conflicts of interest

see Rules for Authors

#### 7. INTRODUCTION

see Rules for Authors

#### CLINICAL EXAMPLE

Attention! Sections of the "Clinical case" are drawn up in accordance with modern requirements for the patient examination plan (case history diagram).

#### 8. Patient information

- de-identified passport data of the patient (age, gender, etc.)
- the main complaints of the patient with a detailed description
- medical history
- patient's life history

!Information that is relevant in the context of the clinical situation under consideration should be described.

## 9. Physical diagnostics

Results of examination, palpation, percussion, auscultation of the patient.

!Information that is relevant to the clinical case under consideration should be described.

## 10. Provisional diagnosis

Text

## 11.Timeline

The most important events of a clinical case should be presented in chronological order (organized in a timeline).

Attention! Illustrations are not only placed in the text of the manuscript, but also uploaded as separate files (editable PowerPoint format) as part of accompanying documents (see Rules for Authors).

Example:

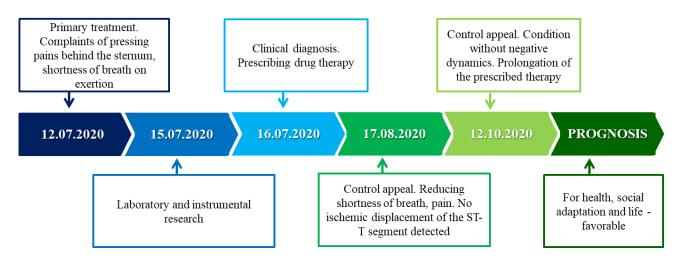


Fig 1. Chronology of the development of the disease in female patient O.: key events and prognosis.

# 12. Diagnostic procedures

The results of laboratory, instrumental and other research methods are described, indicating the place of their implementation (department, organization, city, etc.), as well as the conclusions of specialist consultants.

Here to be indicated are diagnostic procedures that were not performed due to objective reasons (cultural, religious, financial, etc.) *if available* 

Attention! Diagnostic procedures are presented in chronological order with time points or intervals. At the first mention of the indicators of laboratory and instrumental studies, the reference interval is indicated (in brackets); it is recommended to write clinical diagnostic devices, etc. in accordance with the recommendations of the publication (see Rules for Authors).

Example:

Diagnostic procedures

Laboratory research

Tex<sub>1</sub>

Instrumental studies (if applicable)

Text

**Histological examinations** (if applicable)

Tex<sub>1</sub>

*Immunofluorescence study, etc.* (if applicable)

**Text** 

## 13. Clinical diagnosis

**Text** 

## 14. Differential diagnosis

Text

#### 15. Medical interventions

Here to be marked are all performed medical interventions (pharmacological, surgical, prophylactic, self-medication, etc.) *in chronological order*.

The main medical interventions are described in detail, indicating the dose, method and time of administration, concentration, frequency, duration and sequence of use, operation protocol, etc. (*if applicable*). Rationale for the choice of specific treatment measures (*if necessary*), *including with reference and / or footnotes to the source*.

Indicate medical interventions that were not performed due to objective reasons (cultural, religious, financial, etc.) *if available*.

## 16. Dynamics and outcomes

Pay attention to the dynamics of the development of the studied state, including the dynamics of the results of significant laboratory, instrumental and other studies of the patient, as well as the results of medical interventions, consultations of specialists.

It is necessary to reflect the medical interpretation of new clinical symptoms and syndromes, the results of additional research methods, as well as justify changes in treatment tactics (*if any*).

The side effects that occurred during medical interventions, their consequences (*if any*) are described.

The conclusion is made about the adequacy of the prescribed therapy and its effectiveness.

When the patient's condition worsens, the doctor's opinion on the possible causes of such deterioration is given (violation of the treatment regimen, diet, progression of the underlying disease, ineffectiveness or inadequacy of the prescribed therapy, etc.), a plan for further examination and treatment of the patient is justified.

If the outcome is favorable (for example, discharge from the hospital), complete the description of the section with the final clinical diagnosis, it may differ slightly from the preliminary diagnosis and from the clinical diagnosis given to the patient earlier. However, all changes and clarifications of the diagnosis should be reflected in the text of the manuscript. In case of a lethal outcome, describe a pathological diagnosis, preferably with details of the posthumous findings.

# 17. Prognosis

The prognosis for the patient in the context of his/her health, life, work, etc. Provide the most essential recommendations and prescriptions for the prognosis.

# 18. Opinion of the patient

The patient (and / or his/her legal representative) should share his/her point of view regarding the treatment carried out, the motivation for seeking medical help, etc. (if applicable).

#### 19. DISCUSSION

Interpretation of the data obtained, a detailed analysis of the research results in comparison with the literature data, which serves as a basis for the conclusion. Discuss the pros and cons of health care delivery. Authors' statements must be accompanied by a reference to the source(s) of the literature; without reference to the source – in case of expressing their own opinion (indicating "in our opinion", etc.).

# **20. CONCLUSION** (about 150 words)

Reflect what is the peculiarity of the clinical case, what "lessons" can be learned from this case (whole text, without numbering).

## 21. INFORMATION CONSENT

see Rules for Authors

#### 22. FINANCIAL SOURCE

see Rules for Authors

# **23. ACKNOWLEDGEMENTS** (*if necessary*)

see Rules for Authors

#### 24. REFERENCES

see Rules for Authors

#### 25. AUTHORS' CONTRIBUTION

see Rules for Authors

## 26. INFORMATION ABOUT THE AUTHORS

see Rules for Authors