To,

Covering Letter

The Editor

**Sub:** Submission of Manuscript for publication

Dear Sir,

We intend to publish an article entitled **“ ”** in your esteemed journal as an Case Report.

Provide the below information:

1. Why should the manuscript be published in the journal?
2. Provide an explanation of any issues relating to journal policies.
3. Provide a declaration of any potential competing interests / support/ permission.
4. Provide a confirmation that all authors have approved the manuscript for submission.
5. Provide a confirmation that the content of the manuscript has not been published, or submitted for publication elsewhere (see our Duplicate publication policy)
6. If you are submitting a manuscript to a particular special issue, please refer to its specific name in your covering letter.

On behalf of all the contributors, I will act as a guarantor and will correspond with the journal from this point onward.

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We would like to suggest following referees for the article.

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| **Name** | **Address** | **E-mail** |
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Thanking you,

Yours’ sincerely,

**Signature**

**Corresponding contributor:**

E-mail -

Encl: Contributor’s form signed by all the contributors

Checklist

**Note:**

* Please remove or blind any author / institute information found in Methods – e.g. Govt. Dental College / institute as this information may compromise double-blind peer review.
* Please do not include Abstract in the Title page file. Please make sure the Abstract in the main manuscript file.
* **Future Scope / Clinical Significance:  This section must be attached after the conclusion section.**
* **Abbreviations:**  Please list all abbreviations used in your manuscript under the heading "Abbreviations" after the conclusions section. If no abbreviations are used in the manuscript, please state "Not applicable" in this section.

Please minimize the use of abbreviations and do not cite references in the abstract.

Contributors’ form

### Contributors' form *(to be modified as applicable and one singed copy attached with the manuscript)*

**Manuscript Title: ­** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I/we certify that I/we have participated sufficiently in the intellectual content, conception and design of this work or the analysis and interpretation of the data (when applicable), as well as the writing of the manuscript, to take public responsibility for it and have agreed to have my/our name listed as a contributor. I/we believe the manuscript represents valid work. Neither this manuscript nor one with substantially similar content under my/our authorship has been published or is being considered for publication elsewhere, except as described in the covering letter. I/we certify that all the data collected during the study is presented in this manuscript and no data from the study has been or will be published separately. I/we attest that, if requested by the editors, I/we will provide the data/information or will cooperate fully in obtaining and providing the data/information on which the manuscript is based, for examination by the editors or their assignees. Financial interests, direct or indirect, that exist or may be perceived to exist for individual contributors in connection with the content of this paper have been disclosed in the cover letter. Sources of outside support of the project are named in the cover letter.

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### Checklist *(to be tick marked, as applicable and one copy attached with the manuscript)*

**Manuscript Title** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­\_

Checklist

**Covering letter**

* Signed by all contributors
* Previous publication / presentations mentioned
* Source of funding mentioned
* Conflicts of interest disclosed

**Authors**

* Middle name initials provided
* Author for correspondence, with e-mail address provided
* Number of contributors restricted as per the instructions
* Identity not revealed in paper except title page (e.g. name of the institute in material and methods, citing previous study as ‘our study’, names on figure labels, name of institute in photographs, etc.)

**Presentation and format**

* Double spacing
* Margins 2.5 cm from all four sides
* Title page contains all the desired information (vide supra)
* Running title provided (not more than 50 characters)
* Abstract page contains the full title of the manuscript
* Abstract provided (not more than 150 words)
* Unstructured abstract with information on brief background of the medical literature regarding the case report, objective, procedure and the conclusions derived from the case study to be provided for a case report.
* Key words provided (three or more)
* Introduction of not more than 200 words
* Headings in title case (not ALL CAPITALS, not underlined)
* References cited in superscript in the text without brackets
* References according to the journal’s instructions.

**Language and grammar**

* Uniformly British English
* Abbreviations spelt out in full for the first time
* Numerals from 1 to 10 spelt out
* Numerals at the beginning of the sentence spelt out

**Tables and figures**

* No repetition of data in tables/graphs and in text
* Actual numbers from which graphs drawn, provided
* Figures necessary and of good quality (colour)
* Table and figure numbers in Arabic letters (not Roman)
* Labels pasted on back of the photographs (no names written)
* Figure legends provided (not more than 40 words)
* Patients’ privacy maintained (if not, written permission enclosed)
* Credit note for borrowed figures/tables provided

Type of article: Case Report

Title Page

Title of the article:

Running title

Contributors

Department(s) and institution(s)

Corresponding Author:

Name:

Address:

Phone numbers:

Facsimile numbers:

E-mail address:

Total number of pages:

Total number of photographs:

Word counts

for abstract:

for the text:

Presentation at a meeting:

Organisation:

Place:

Date:

**Mandatory Sections for Title Page**

1. **Acknowledgements:**
2. **Conflicting Interest**
3. **Source(s) of support:**
4. **Patient declaration of consent statement:**
5. **Authors’ Contribution:** Enter the role of contributors in the first column and names of the contributors in the columns 2, 3, and so on.

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| --- | --- | --- | --- | --- | --- | --- |
| Role (Concepts, Design, Definition of intellectual content, investigation, manuscript writing, etc.) | Contributor 1 | Contributor 2 | Contributor 3 | Contributor 4 | Contributor 5 | Contributor 6 |
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1. **Data Availability statement:**

**Title of the article:**

Abstract Page

**Running title**

**Abstract:**

Keywords:

Introduction:

Case History:

Discussion:

Conclusion:

**Future Scope / Clinical Significance**

**List of Abbreviations:**

**References:**

**Legends of Tables (If Any)**

**Legends of Figures**

Reporting guidelines: The article adheres to the CARE reporting guidelines for case reports

Fill the CARE checklist given below:

Reporting guidelines for Case Report: CARE (2016)

|  |  |  |  |
| --- | --- | --- | --- |
| **Topic** | **Item** | **Checklist item description** | **Yes/ No** |
| **Title** | **1** | The words “case report” should be in the title along with the area of focus . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . |  |
| **Abstract** | **2a** | Structured abstract with the headings: Rationale, Patient concerns, Diagnosis, Interventions, Outcomes, Lessons  If unstructured abstract, all the details as per the above heading to be present |  |
| **2b** | Abstract structure outlines in the Information to Authors and contain all the information mentioned in 2a |  |
| **Introduction** | | | |
|  | **3a** | One or two paragraphs summarizing why this case is unique |  |
| **3b** | Statement to be cited adequately |  |
| **Case report** | | | |
| **Patient Information** | **4a** | De-identified demographic information and other patient specific information |  |
| **4b** | Main concerns and symptoms of the patient |  |
| **4c** | Medical, family, and psychosocial history including relevant genetic information (also see timeline) |  |
| **4d** | Relevant past interventions and their outcomes |  |
| **Clinical Findings** | **5** | Describe the relevant physical examination (PE) and other significant clinical findings |  |
| **Diagnostic Assessment** | **6a** | Diagnostic methods (such as laboratory testing, imaging, surveys) |  |
| **6b** | Diagnostic challenges (such as access, financial, or cultural) |  |
| **6c** | Diagnostic reasoning including other diagnoses considered |  |
| **6d** | Prognostic characteristics (such as staging in oncology) where applicable |  |
| **Therapeutic Intervention** | **7a** | Types of intervention (such as pharmacologic, surgical, preventive, self-care) |  |
| **7b** | Administration of intervention (such as dosage, strength, duration) |  |
| **7c** | Changes in intervention (with rationale) |  |
| **Follow-up and**  **Outcomes** | **8a** | Clinician and patient-assessed outcomes (when appropriate) |  |
| **8b** | Important follow-up diagnostic and other test results |  |
| **8c** | Intervention adherence and tolerability (How was this assessed?) |  |
| **8d** | Adverse and unanticipated events |  |
| **8e** | Follow-up duration and the last known status of the patient |  |
| **Discussion** | **9a** | Discussion of the strengths and limitations in your approach to this case |  |
| **9b** | Discussion of the relevant medical literature. |  |
| **9c** | The rationale for conclusions (including assessment of possible causes) |  |
| **9d** | The primary “take-away” lessons of this case report |  |
| **9e** | Citations adequate preferably from recent literature |  |
| **Informed Consent** | **10a** | Mention the patient (family/ legal representative) informed consent for publication of the case details.  For minor (children), consent statement should mention if “parental/ legal guardian consent” was obtained. |  |
| **10b** | Mention if the patient consent has been waived/ exempted by the IRB and to mention the appropriate details (including the exempt number) |  |
| **Figures** | **11** | Figures (full face) to be sufficiently obscured  Confidential data like patient’s name, date of birth, personal identification data should not be displayed in the images including the radiographs. |  |