

INSTRUCTIONS FOR AUTHORS OF CASE STUDIES

All cases should be submitted online at www.pharmpress.com/casestudies. If you have any queries about the submission process, please contact casestudies@rpsgb.org

WRITING YOUR CASE

AIM

Case studies are written with particular learning objectives in mind and can range from common scenarios aimed at students at earlier learning stages through to extreme or atypical cases that are more challenging for advanced students or practitioners. The aim of a good case study is to represent pharmacy practice in the chosen setting in the most realistic way possible – we are interested in the educational value of the case rather than its novelty.

Case studies may include quantitative and qualitative data and rely on multiple sources of evidence. The student may be required to obtain additional information from external reference sources to determine the best course of action. Cases may be extended over a prolonged time period so that the student can follow the patient's progress and determine the best course of action based on the outcome of previous treatment and the progression of the condition.

DIFFICULTY LEVELS

Authors may produce cases at one of 3 different levels of difficulty:

- Level 1: Years 1-2 of Pharm.D curriculum
 - Simple cases
 - Multiple choice questions or short answer questions
 - Single correct answer
 - Little prior knowledge required
- Level 2: Year 3 of Pharm.D curriculum
 - Intermediate cases
 - Multiple choice questions, short or long answer questions
 - Mixture of single correct answers and ambiguous cases
 - Prior knowledge or clinical experience may be useful
- Level 3: Year 4 of Pharm.D curriculum and postgraduates
 - Complex cases
 - Short or long answer questions, potentially including the requirement to prepare a pharmaceutical care plan (see Manuscript Preparation and Formatting section for the standard template)
 - Not necessarily an absolutely correct answer so students may need to explain the rationale behind their final decision
 - Need to draw on a wide knowledge base and show understanding of the ethical, social and/or legal issues involved in a particular course of action

When you submit your case online you will be asked to select the case level. Please ensure when writing your case that you define your audience carefully and write at the appropriate level.

TYPE OF CASE

Cases may be based on real scenarios experienced in pharmacy settings. Alternatively, cases may be purely theoretical, devised to address particular learning outcomes. For cases based on real patients, please be careful to anonymise any data.

SETTING

Your case may be set within any type of pharmacy setting e.g. clinical, hospital, retail/community. The details provided in your case will be dependent on this setting. For example, in a hospital the pharmacist may have access to a full patient history, laboratory test data and information from other healthcare workers, whereas this is unlikely to be true for a retail pharmacist.

PATIENT AND DRUG INFORMATION

Please describe the patient's age and gender in your case presentation. Ethnicity should be included if this is relevant to the treatment outcome.

The use of generic drug names rather than branded drug names is preferred.

CLASSIFICATIONS AND KEYWORDS

When you submit your case study, you will be asked to classify it broadly by core ACPE curriculum topic, organ system and disease state. Classification lists are supplied and you should choose the most relevant keyword(s) for your case in each category. This will assist users in finding the most appropriate cases for their learning requirements.

In addition, authors are encouraged to supply 5-10 additional keywords that more specifically describe the content of the case.

LENGTH

Cases should be a maximum of around 800 words, including any discussion section. The length of each case will vary depending on the level of difficulty and the setting, but please be concise - a longer case does not necessarily imply a better quality learning exercise.

CASE STUDY TEMPLATE

The structure of your case should, as far as possible, follow the template below, although we acknowledge that different types of cases will contain different components depending on the setting, level, topic and learning outcome.

Title of case

Authors

Key learning objectives

Case presentation – including, where applicable:

- Patient history
- Laboratory test data
- Illustrations

Assessment questions – please indicate if pharmaceutical care plan is required

Correct or recommended answers – including completed pharmaceutical care plan, where applicable

Discussion – including alternative case management strategies, where applicable

References – for example:

- Information on relevant drugs or treatments, including interactions

- Clinical practice guidelines
- Legal information

Further reading

Acknowledgements

MANUSCRIPT PREPARATION AND FORMATTING

FORMAT

Please submit your manuscript as a Microsoft Word file, containing **text** only. Avoid unnecessary styling and formatting.

STYLE

- Please use American English
- Always use SI units unless there is a good reason for not doing so; if other units are used please put the SI equivalent in parentheses or provide a conversion table
- Use italics for mathematical symbols, species names and Latin terms
- Please avoid using defamatory or discriminatory language

FIGURES, TABLES AND MULTIMEDIA

We would like each case to be as accessible and interactive as possible, so the inclusion of illustrations and tables is encouraged. Also, if you have a lecture or procedural video that will supplement your case, please consider submitting this as well. Figures should be submitted as separate files in JPEG or TIFF formats in a resolution of no less than 300 dpi.

Please ensure that each figure and table is numbered and accompanied by a brief caption. The placement of each figure and table should also be indicated within the text.

PHARMACEUTICAL CARE PLAN

For advanced level 3 cases in which the completion of a pharmaceutical care plan is required, the following template care plan will be provided to students. When submitting recommended answers for these cases, please include a sample completed care plan in this style.

Patient profile		Medical history	
Birth date		Allergies	
Height		Adverse drug reactions	
Weight		Diagnoses	
Sex		Other information	
Race			
Medication history			
Drug	Strength	Regimen	Quantity
Medication-related problem(s)			
Subjective and objective information	Assessment	Plan(s)/goal(s)	Evaluation(s)/outcome(s)

REFERENCES

Please include references to data, guidelines or background reading that are necessary for determining the best course of action for the case scenario. Suggestions for further reading on the topic are also encouraged.

Please do not use any reference or footnote program. Examples of how references should be formatted are as follows:

Journal article

Szeto,HH(1976). Simultaneous determination of meperidine and normeperidine in biofluids. *J Chromatogr* 125: 503-510.

Authored book

Rang HP, et al. (1995). *Pharmacology*. Edinburgh: Churchill Livingstone.

Chapter in an edited book

Ellenhorn MJ, et al. (1997). Cyanide poisoning. In Banker GS, Rhodes CT, eds. *Modern Pharmaceutics*. New York: Marcel Dekker, 591-626.

Online reference

IOC/WADA (2000). The Olympic Movement Anti-Doping Code. Lausanne: IOC/WADA. www.olympic.org/uk/organisation/commissions/medical/antidoping_uk.asp (accessed 12 August 2009).

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It is our policy not to publish material that we deem to be sexist, racist or prejudicial in any way. Sentences can usually be reworked to avoid sexist and non-inclusive language, for example, replacing mankind (humans, humanity, people); man-made (artificial, synthetic); manpower (workforce, staff, human resources); the man (the person, the individual), etc. Please be aware of the effects of any parochialism, racist language or stereotyping in your text and modify it if necessary.

PATIENT CONFIDENTIALITY

Any personal medical information contained within a case needs to be anonymised to ensure that the patient cannot be identified. For example, any identifying marks should be removed from photographs. If there is any chance that a patient may be identified from a photograph or a case description, we will need the signed consent of the patient or their guardian before the case can be published.

EDITORIAL POLICY

Pharmaceutical Press considers all manuscripts on the strict condition that they have not been published already, nor are they under consideration for publication or in press elsewhere.

PEER REVIEW PROCESS

Contributions will be subjected to review at the discretion of the editorial office and manuscripts accepted may be subject to editorial revision. Decisions regarding acceptability will be made on the basis of scientific quality, educational value and the presentation of the manuscript.

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