Appendix
MISSISSIPPI OSTEOPATHIC MEDICAL ASSOCIATION
Case Study Abstract Format and Example

- **Title** – A summary of the abstract itself which convinces the reader that the topic is important, relevant, and innovative.

- **Author(s)** – Include name, degree and institutional affiliation. Authors listed should be only those who contributed significantly to the intellectual content of the case report.

- **Introduction** - The context of the case with explanation of its relevance and importance.
    - Describe whether the case is unique. If not, does the case have an unusual diagnosis, prognosis, therapy or harm? Is the case an unusual presentation of a common condition? Or, an unusual complication of a disease or management?
    - Describe instructive or teaching points that add value to this case. Does it demonstrate a cost-effective approach to management or an alternative diagnostic/treatment strategy? Does it increase awareness of a rare condition?

- **Case Description** – Follow basic rules of medical communication. Report the case in sequence.
    - Describe the history, examination, and investigation adequately. Is the cause of the patient's illness clear-cut? What other plausible explanations exist?
    - Describe treatments adequately. Have all available therapeutic options been considered? Are outcomes related to treatments? Include the patient's progress and outcome.

- **Discussion** – Discuss rationale for decisions made and the lesson learned from the case.
    - Are similar cases reported in the literature? Describe how this case is different from those previously reported.
    - Explain the rationale for reporting the case. What is unusual about the case? Does it challenge prevailing wisdom?
    - Could a future similar case be handled differently?

Note: Abstracts are limited to 350 words (Including title, authors, and institutions).

Appendix
Example - Case Study Abstract

Title: Osteopathic Treatment of Nephrotic Syndrome

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Introduction: Nephrotic syndrome is a clinical state characterized by proteinuria, hypoalbuminemia, hypercholesterolemia and peripheral edema/anasarca. In this case, an African American female with IgA nephropathy developed nephrotic syndrome. This case is remarkable as IgA nephropathy is uncommon in females and in those of African American descent. Furthermore, less than 10 percent of patients with IgA nephropathy acquire nephrotic range proteinuria. In addition, a literature review revealed no previous reports of osteopathic treatment in the clinical management of nephrotic syndrome.

Case description: A 19-year-old African American female with a medical history significant for gross hematuria secondary to IgA nephropathy presented to the hospital with complaint of fatigue, reduced appetite, abdominal distension, peripheral and facial edema, decreased urine output and weight gain. She reported no other autoimmune disorders. Physical examination was remarkable for facial and peripheral edema and abdominal distention with a positive fluid wave. Laboratory findings demonstrated proteinuria, hypoalbuminemia, elevated cholesterol and triglyceride levels and ascites on abdominal x-ray. She was admitted with a diagnosis of nephrotic syndrome was made. Medical management consisted of salt and fluid restriction diet, intravenous diuretics and albumin infusion. Despite the aggressive treatment to induce diuresis the patient developed anasarca with a urine output that was less than 200 cc's per day. On hospital day 5, daily osteopathic manipulative treatment was added to her management resulting in significant improvement. Within an hour after the first osteopathic treatment the patient voided 400 cc and thereafter the urine output increased exponentially with eventual return to the patient's baseline weight. The patient was discharged on day eight.

Discussion: This case illustrates the potential benefit of utilizing osteopathic manipulative treatment as part of the management of a patient presenting with nephrotic syndrome. Early institution of this form of treatment could reduce hospital stay. Research on this topic is recommended.