Clinico-Pathologic Conferences: A new format for maximizing the educational value of case reports published in the *Canadian Respiratory Journal*

George Rakovich MD

As you may have noticed, the *Canadian Respiratory Journal* (CRJ) has recently debuted a new feature called 'Clinico-Pathologic Conferences'. The article titled 'Inflammatory pseudotumor of the lung' (1), which was published in the December issue of *Journal*, was the first of this new series and illustrates our new format for case reporting. An additional example of the new format is published in the current issue of the *Journal* (pages 50-52) (2).

Generally speaking, there has been decreasing interest among medical journals in publishing case reports due to a widespread perception that case reports are not a valid or reliable source of scientific information. On the other hand, case presentations and discussions are recognized as a useful form of continuing medical education (CME), and are used regularly and successfully as a learning tool at CME conferences and in residency training programs. In pedagogical terms, case presentations represent a form of teaching called the 'case method', which relies on the principle of experiential learning. Incorporating teaching material into a realistic clinical context increases relevance to the reader, which facilitates significant (as opposed to superficial) learning, improves retention and facilitates the transfer of acquired knowledge to a real-life clinical setting (3).

The potential educational value of case reports has, to date, received little attention, and the few journals that continue to publish case reports do so without any clear learning objectives. Accordingly, the CRJ wanted to seize the opportunity to enhance the educational value of case reports published in the *Journal*.

The new format for case reporting that we have described consists of a focused clinical case presentation followed by a focused discussion; the body of the text will be accompanied by one or two clear learning objectives, a CanMEDs competency objective and a short pre/post test drawn from the article. Learning objectives and test questions will help the reader identify knowledge gaps and establish learning priorities, enabling them to read the paper with specific learning goals in mind. High-quality figures taken from imaging studies and pathology slides will be an essential part of these case presentations. Radiology, in particular, is often at the heart of the diagnostic process, and may help the reader integrate different aspects of a case including clinical features, relevant anatomy and key concepts in pathophysiology. The inclusion of such visual elements is a useful tool to consolidate newly acquired knowledge (4).

To further enhance the case reports' educational content, we have initiated a collaboration with Canadian respiratory medicine and

thoracic surgery training programs in an effort to create a pathway for publishing cases presented by trainees at local multidisciplinary Clinico-Pathologic Conferences. These are often high-quality presentations rich in educational content, which are otherwise seldom given an opportunity for publication. We have had a very positive response from a number of training programs throughout Canada, and we are currently working with them with the goal of publishing cases illustrating important points in chest medicine and otherwise addressing the CME needs of CRJ readers. We will also continue publishing rare, interesting and educational cases submitted to the *Journal* by independent authors. However, all case reports will be required to conform to the new format, and prospective authors are encouraged to consult the 'Instructions for Authors' section found on the CRJ's website. Clinico-pathological conferences will progressively replace conventionally formatted case reports in future issues.

The *Journal* is actively working with the Canadian College of Family Physicians, and the Royal College of Physicians and Surgeons of Canada to allow readers who have worked through a case and answered the post-test to automatically obtain CME credits for Mainpro and Mainport through CRJ's website; we expect these features to be launched in the coming months. We are also planning a formal evaluation of the new format using an online survey planned for 2013.

Thus, the CRJ will continue to publish scientifically relevant cases, but in addition, will be doing so with an educational purpose in mind. We are hopeful that this will increase the appeal and educational value of case reports published in the *Journal*.

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Correspondence: Dr George Rakovich, Division of Thoracic Surgery, Hôpital Maisonneuve-Rosemont, 5415 boulevard L'Assomption, Montreal, Quebec H1T 2M4. Telephone 514-252-3822, fax 514-252-3894, e-mail george.rakovich@umontreal.ca