

**ACADEMIC WRITING for international students (English programme) SPRING 2016**

**SESSION 3 (selected activities), 8 April 2016**

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**LESSON PLAN FOR SESSION THREE:**

**1. FREEWRITING**

**2. REVISION OF TOPICS COVERED IN THE PREVIOUS SESSION + HOMEWORK**

**3. STUDENT PRESENTATION ON PROCRASTINATION AND BLOCKING**

**4. THE GENRE OF MEDICAL CASE REPORTS: LANGUAGE AND STRUCTURE
 - discussion: What are medical case reports?
 - listening: interview with a physician about case reporting
 - language exercises**

**5. GRAMMAR: COHESIVE DEVICES – LINKING EXPRESSIONS FOR SENTENCE STRUCTURE**

**6. WRITING: READING A MEDICAL PAPER AND WRITING AN ABSTRACT, PEER-REVIEW**

**7. FINAL SUMMARY, HOME ASSIGNMENT**

**E-learning:**

[**https://is.muni.cz/auth/el/1411/jaro2016/aVLAW061/index.qwarp**](https://is.muni.cz/auth/el/1411/jaro2016/aVLAW061/index.qwarp)

**I. FREEWRITING**

**What do I remember about abstracts?
What were my concerns/challenges during the writing of the abstract for HW?**

**II. CULTURAL THOUGHT PATTERNS**

**Cultural thought patterns (logical arrangement of ideas) will vary depending on the culture and the mother tongue of the writers. What about your culture and mother tongue?**



**III. MEDICAL CASE REPORTS**

***A. Discuss the following questions in groups and make notes:***

1. Have you ever seen, read, or written a medical case report?

2. What is a medical case report?

3. What topics/themes can be included in medical case reports?

4. Where can medical case reports be published?

5. Why are medical case reports important?

6. Why are medical case reports suitable to medical students and junior doctors?

7. What is the typical structure of medical case reports?

8. How should the main part (case presentation section) be written?

***B. Listen to the following extract from an interview with a physician about medical case reporting. Complete the following statements.***

1. According to the physician, the main purpose of a case report is to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

2. In his opinion, much of medicine is based on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

3. The first thing authors write is an \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

4. He wrote a case report about a patient with back pain who was treated with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

5. In the end, the patient suffered from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ which caused the back pain.

6. The patient underwent the following therapy: local debridement or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the use of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

***C. Complete the following imaginary case presentation with the suitable word(s) from the box.***

|  |
| --- |
|  examination revealed denied complained presented initiated family history underwent confirmed  past medical history history treated negative |

A 28-year-old Caucasian woman **\_\_\_\_\_\_\_\_\_\_\_\_\_** with a 3-month **\_\_\_\_\_\_\_\_\_\_\_\_\_** of increased sweating and palpitations with weight loss of 7 kg. Her **\_\_\_\_\_\_\_\_\_\_\_\_\_** included type 1 diabetes, hypertension, and osteoarthritis. She had a strong **\_\_\_\_\_\_\_\_\_\_\_\_\_** of breast carcinoma. Physical **\_\_\_\_\_\_\_\_\_\_\_\_\_** was within normal limits. The patient **\_\_\_\_\_\_\_\_\_\_\_\_\_** smoking or other illicit drug or alcohol use. Her medical history was **\_\_\_\_\_\_\_\_\_\_\_\_\_** for cardiac symptoms or metabolic diseases. She was **\_\_\_\_\_\_\_\_\_\_\_\_\_** with diuretics and hypertensives and subsequently **\_\_\_\_\_\_\_\_\_\_\_\_\_** thrombolysis with heparin and urokinase. Upon discharge, she **\_\_\_\_\_\_\_\_\_\_\_\_\_** of a continuous bilateral tension headache. Her physical examination **\_\_\_\_\_\_\_\_\_\_\_\_\_** her blood pressure to be 170/100. A chest X-ray **\_\_\_\_\_\_\_\_\_\_\_\_\_** inflammatory breast cancer. Therapy with capecitabine was **\_\_\_\_\_\_\_\_\_\_\_\_\_**.

**PROBLEM-SOLUTION PATTERN USED IN CASE PRESENTATION SECTIONS**

***D. Match the moves with their descriptions***

|  |  |
| --- | --- |
| **MOVE 1** PRESENTING A PROBLEM  | **A.**Describing actions taken to treat the patient by recapitulating any surgical or pharmaceutical interventions |
| **MOVE 2** INVESTIGATING THE PROBLEM  | **B.**Stating the success or failure of the patient’s treatment having resulted either in the patient’s survival and cure or death  |
| **MOVE 3** ADDRESSING THE PROBLEM  | **C.** Providing a clinical identification of the patient by specifying the patient’s demographics and history  |
| **MOVE 4** EVALUATING THE OUTCOME  | **D.**Summarizing the patient’s diagnostic data from: - significant examination findings and/or - results of investigative procedures and determining the diagnosis |

***E. Indicate the above moves in the following case presentation section of a medical case report:***

A 62-year-old Caucasian woman **presented with** a two-month **history of** intermittent fever. Her **past medical history** included hypertension, coronary artery disease and mild chronic kidney disease. She was found to have endocarditis of her native, bicuspid, aortic valve. She **was treated with** vancomycin, gentamicin and penicillin and subsequently **underwent** aortic valve replacement (AVR) in October of 2004. The patient had been **discharged and re-admitted multiple times** and was **ultimately transferred** to the Oklahoma University Medical Center in May 2005. Upon transfer, the patient **complained of** dyspnea and lower-extremity swelling. Her **physical examination** revealed jugular venous distention and bilateral lower-extremity edema to the knees. **No** peripheral stigmata of endocarditis **were identified**. Nine **blood cultures** obtained over a five-day period **were positive for** Candida lusitaniae. **Transesophageal echocardiography** revealed multiple vegetations on a mechanical aortic valve (Figure 1) with severe aortic valvular regurgitation (Figure 2). **Therapy** with caspofungin **was initiated**. The patient eventually **underwent** repeat AVR with coronary artery bypass grafting. Vegetations were noted on her removed prosthetic valve (Figures 3 and 4). Her postoperative course was complicated by a chest hematoma which was evacuated. **Despite** eventual clearance of her fungemia, the **patient died from** multi-organ failure in June 2005.

**CASE PRESENTATION SKELETON**

A (AGE)-year-old (RACE) man/woman presented/was admitted with a (PERIOD)-month/year, history of (PATHOLOGY/SIGN/SYMPTOM). His/her past medical history included (LIST OF DISEASES). He/she had a strong family history of (DISEASE). (EXAMINATION) was within normal limits. The patient denied/admitted to (UNHEALTHY HABIT). His/her medical history was positive/negative/significant for (PATHOLOGY/SIGN/SYMPTOM). He/she was treated with (DRUGS) and subsequently underwent (SPECIAL PROCEDURE). Upon discharge, he/she complained of (SYMPTOMS). His/her physical examination revealed (SIGNS). (SPECIAL PROCEDURE) confirmed (DISEASE). Therapy with (DRUG) was initiated.

**Links to the internet – writing guides and journals publishing case reports:**

[**http://www.biomedcentral.com/collections/GuideCaseReports**](http://www.biomedcentral.com/collections/GuideCaseReports)

[**http://casereports.bmj.com/**](http://casereports.bmj.com/)

[**https://www.dovepress.com/international-medical-case-reports-journal-archive46**](https://www.dovepress.com/international-medical-case-reports-journal-archive46)

**IV. OPEN ACCESS PUBLISHING**

***What is open access publishing? What does closed publishing mean?***

***Watch the following video and note down all the advantages of open access publishing as opposed to closed publishing.***

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| **ADVANTAGES OF OPEN ACCESS PUBLISHING:** |