

## Case report papers guidelines: Recommendations for the reporting of case studies or action research in Business Management

### *Case report papers guidelines: Recomendaciones para el informe de estudios de caso o investigaciones en acción en el área de Gestión de Empresas*

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#### **Abstract**

*A Spanish version of the article is provided (see section before references).*

*Objective: To provide a working guide which facilitates the accuracy, transparency, and usefulness for academics and practitioners of case report papers as an article type which are fit for publishing in impact journals. In this way, we aim to increase the use and dissemination of recommendations in aid of the writing and publication of case study and action research.*

*Theoretical framework: A case report paper presents a story in narrative form and includes current individual or organisational concerns, situational diagnoses, interventions, outcomes including adverse events, and follow-up. The narrative should include a discussion of the rationale for any conclusions and lessons learned.*

*Method: We analysed the prevalence of these type of articles in publications as indexed in Web of Science (WOS) and in Scopus; we explain how we customised the case report guidelines (CAse REport or CARE) to optimise them for the scientific field of Management focussing particularly on Operations Management and Human Resources Management. We shared for discussion and feedback the adapted proposal among a group of academics and professionals in the field of Management.*

*Outcomes/Implications: Robust reporting guidelines help to improve research performance, reduce bias risk, provide information on the implementation of management practices, support the training of management professionals, and enable informed editorial decisions by journal editors and reviewers.*

**Keywords:** *case report; case study; action research; grounded theory; reporting guidelines; operations management; human resources management; evidence-based management.*

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## **Resumen**

*Objetivo: proporcionar una guía de trabajo que facilite la precisión, transparencia y, sobre todo, utilidad para académicos y profesionales de los case report papers como tipología de artículo publicable en revistas de impacto. De este modo, pretendemos incrementar el uso y difusión de las recomendaciones para ayudar a la redacción y publicación de informes de casos e investigación en acción.*

*Marco teórico: los case report papers cuentan una historia en un formato narrativo que incluye las preocupaciones actuales de una persona o una organización, diagnósticos de situación, intervenciones, resultados (incluidos los eventos adversos) y seguimiento. La narrativa debe incluir una discusión de la justificación de cualquier conclusión y lecciones aprendidas.*

*Método: analizaremos la prevalencia de este tipo de artículos en las publicaciones indexadas en Web Of Science (WOS) y Scopus; explicaremos como hemos hecho la adaptación de los case reports (CARE) guidelines para que sean aplicables en el área científica de Management (especialmente en Operations Management y Human Resources Management). Debatiremos la propuesta adaptada con un grupo de académicos y profesionales del área de Management.*

*Resultados/Implicaciones: las guías de reporte (reporting guidelines) ayudan a mejorar la investigación realizada, reducir el riesgo de sesgo, proporciona información sobre la implantación de prácticas de gestión, favorece la formación de profesionales en gestión y permite tomar decisiones editoriales informadas a las personas que actúan como editoras de revistas o revisoras.*

**Palabras clave:** *Case report; Case study; Action Research; Grounded Theory; Reporting guidelines; Operations Management; Human Resources Management; Evidence-based Management*

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## **Introduction**

A case report paper is a variant of a research report, such as a scientific paper or article, which describes for business management, scientific, or educational purposes a problem or situation experienced by one or more analytical units (e.g., at individual, departmental, or organisational level). A case report paper relates a story in a narrative format which includes the problems or situations encountered by an individual or an organisation, the diagnoses of the challenges, the interventions made, the results obtained including adverse effects, and any follow-up actions realised. (Gagnier et al., 2013).

In the field of Business Management, case report papers can be used as research reports based on fieldwork methods linked to ethnography (Bryman & Bell, 2011). This is especially so in single case studies and, above all, in action research. In these researches an iterative process is normally employed where an in-depth and objective analysis of a situation is presented, and where the researcher or the participating organisation has little control over the events (Kratowill & Levin, 2010; McCutcheon & Meredith, 1993). In this sense single case studies and action research share aspects of observational

studies (Kratochwill & Levin, 2010; Losilla et al., 2018). The objectivity of the report is realised by complementing observations and/or interviews with documents, reports, organisational diagrams, statistical analyses of organisational data, etc. (Bonache, 1999; McCutcheon & Meredith, 1993; Voss et al., 2002). All this must be performed while maintaining methodological rigour to mitigate against a lack of transparency, and to assure validity and reliability in the measurements processed (Marin-Garcia, 2015; Marin-Garcia, 2021; Tight, 2017; Voss et al., 2002).

Case report papers allow for reporting in detail on the study of a single plant, department, person, or situation over time and analysing the effect of a course of intervention. In this way, other practitioners can use this knowledge gained to make decisions in comparable situations (Tight, 2017). In the majority of this type of research the sample consists of a single analysis unit (e.g., an individual, a department, or an organisation) (Pacewicz, 2022; Small, 2009). However, if the case report papers are rigorously reported and appropriately labelled thus facilitating systematic retrieval and combination, they can in the future be analysed together with other similar research and provide an opportunity to discover beneficial or detrimental effects of the tools or programmes considered by the organisations.

Research based on multiple case reports and integrated through a systematic literature review can serve to (France et al., 2019; Gagnier et al., 2013; Heart Views, 2017; Tight, 2017): (a) identify management actions (e.g., tools, programmes, or initiatives) which can help or harm an organisation, or units within the organisation, and the conditions under which one or the other occurs; (b) assess the achieved benefits, the problems which are alleviated or solved, the resources, investments, or costs required, any undesired effects which may appear, and how these factors evolve over time; c) identify factors external to the intervention that affect or are impacted by the process (e.g., the culture of the organisation, personalities of the people involved, internal and external relationships, economic situation, etc.); and d) assess how the participants perceive the process. In addition, multiple case reports can play an important role in recognising new practices and/or underutilised practices.

Randomised controlled trials can be complicated to design and conduct in fields such as Management (e.g., Operations Management, Human Resources Management, or other sub-fields of Management) because the context in which the intervention takes place can be extremely complex (Booth et al., 2013; France et al., 2019; Guise et al., 2017; Lewin et al., 2015). In this respect, research with a case study, action research, or grounded theory approach provides a way to study this complexity, and case report papers offer a way to report details that allow describing and standardising future experiments. In addition, they promote dissemination of good practices and provide information for their application in other contexts (Shani & Coghlan, 2021; Tight, 2017). In this respect, this work broadens the context in which other guidelines can be applied, such as that of Marin-Garcia and Alfalla-Luque (2021) which focused exclusively on the teaching and learning environments.

This paper adapts the case reports guidelines (CAse REport or CARE) (Gagnier et al., 2013; Riley et al., 2017), which have been developed in the field of Health Sciences, in order to apply them in the scientific field of Management, especially in Operations Management and Human Resources Management. We build on the work of the Health Sciences expert group and discuss the adapted proposal with a group of academics and practitioners from the discipline of Management.

The aim of this paper is to provide a working guide which facilitates the accuracy, the transparency, and, above all, the usefulness for academics and practitioners of case report papers as an article type

publishable in impact journals. We analyse the prevalence of this type of article in publications as indexed in Web Of Science (WOS) and in Scopus. Finally, we explain how we adapted the CARE guidelines and we make public the list of criteria that WPOM uses during the review process to facilitate the editorial decision to accept papers for publication. We contend, in line with previous research (Gagnier et al., 2013; Hirst & Altman, 2012; Riley et al., 2017), that rigorous reporting guidelines help to improve the conducted research, to reduce the risk of bias, to provide information on the implementation of management practices, to promote the training of management professionals, and to enable informed editorial decisions by journal editors and reviewers.

### **Case report papers in the service of evidence-based management**

Business management is a complex task which requires tackling difficult problems and/or situations. In some cases, managers are tempted to introduce changes or new business practices as inspired by a book read during downtime on a business trip, by information seen on the blog of a self-described business guru, by trying to emulate a dazzling company appearing in the media, or simply by trying to imitate companies similar to theirs. Arguably this provides fertile ground for the incursion of pseudoscience into the world of management (Callaghan, 2019; Dobusch & Heimstaedt, 2019; Grawitch & Ballard, 2019; Juandi & Tamur, 2021; Stroke, 1994; Sulkowski, 2019; Thaler & Shiffman, 2015).

Vendors can easily promise something highly desirable, but which is in reality virtually impossible to deliver (de Regt et al., 2020). For example, a proposal to reduce inventories to zero by using artificial intelligence to manage the alignment of delivery times with production schedules and the receipt of raw materials and components sounds promising. Such a proposal may also be sold as easy and with a guaranteed successful implementation. More often than not the reality is a complex problem usually does not have a simple or easy-to-implement solution (Manchón, 2021).

At other times, organisations may implement a method or a practice which is little more than a placebo and supported by seemingly promising results with little more weight than those easily explained by the Hawthorne effect (Adair, 1984; Hubbard et al., 1998; Juandi & Tamur, 2021; Leonard & Masatu, 2010; Levitt & List, 2011). Perhaps this accounts for why success stories usually abound, although it is difficult to find cases described as failures. There is a further clouding when an implementation does not work as expected, there arises a perverse incentive to mask the results or objectives after the fact, and to try to present it in a way that makes it appear as if the implementation has at least partly achieved its objectives.

In some cases, one might conclude the function of new a management practice introduction is not so much to achieve a real improvement in company indicators, but rather to ease the consciences of managers and to avoid making difficult decisions themselves, or simply to have a ready scapegoat in case decisions lead to a poor result. It is also possible external ideas are used as leverage to mobilise change, because what comes from outside can seem to be more valued in some contexts. Perhaps in these cases, fast thinking circuits win out over slow thinking ones, taking advantage of the appeal of using shortcuts which simplify problems for us, even if they are not the ones leading to the optimal solutions (Kahneman, 2011; Kahneman et al., 2016).

In this situation, illustrative examples of specific cases, detailing precise and transparent information on the process of implementing management practices and/or programmes, can help different groups such as:

- Business leaders: Reviewing and comparing options for practices they consider for implementation.
- Researchers or implementors of management practices: Sharing and comparing their experiences with those of their colleagues and peers.
- Management practice trainers: Having real cases that allow for evidence-based management teaching approaches or case-based teaching. In some contexts, capstone projects can be developed following the guidelines of case report papers.

Case report papers can play a role in bringing research results closer to people with managerial responsibilities in organisations. We have little information on what people in organisations holding management responsibility read (Armstrong & Pagell, 2003; Bigelow & Arndt, 2003; Bootsma et al., 1997; Perea & Brady, 2017). However, if we take the world of healthcare as a paradigm of evidence-based professional practice, in that context it is assumed, on average, healthcare workers spend between 3 and 4 hours per week reading scientific articles on Health Sciences (Nylenna, 1991; Saint et al., 2000; Tenopir et al., 2007). Obviously, these figures may depend on contexts (e.g., countries, medical field, etc.) and/or may have evolved in recent times. In general, healthcare workers appear to prefer reading articles based on results with real patients or systematic reviews and less so those based on basic research or results from laboratory experiments or simulations (González de Dios et al., 2011; O'Connor, 2009; Ru et al., 2017; Thoms, 2014). However, some work indicates less than a quarter of physicians read scientific articles to make evidence-based decisions (Baig et al., 2016). This likely occurs because, among other reasons, there are barriers to this path identified in medicine (Grimshaw et al., 2002). The challenge is to identify how and where managers in organisations are informed and what should be done to enhance the role case report papers can play as a source for evidence-based management.

Finally, it should be noted case report papers are neither a method of data collection (as opposed to, for example, participant observation, content analysis, surveys or interviews), nor a research methodology (as opposed to case studies, action research, or grounded theory) (Bonache, 1999). Case report papers are a way of scientifically reporting the results of research. The format is particularly well suited to research focused on ethnographically related methodology, especially action research.

In the field of Management there are various published guidelines related to case studies and to action research (Bleijenbergh et al., 2021; Bonache, 1999; De Massis & Kotlar, 2014; Elg et al., 2020; Elsahn et al., 2020; Erro-Garcés & Alfaro-Tanco, 2020; Ketokivi & Choi, 2014; Marin-Garcia & Alfalla-Luque, 2021; Oliva, 2019; Raelin, 2020; Shani & Coghlan, 2021; Swanepoel, 2019; Voss et al., 2002). All of them, except (Marin-Garcia & Alfalla-Luque, 2021), focus on the epistemological aspects including foundations and methodology of how to conduct research. In addition, most of these publications focus on recommendations for empirical work focused on building theories or models. However, they offer little on how to report on the research conducted and largely (Voss et al., 2002) focus on research which aims to analyse examples or counterexamples of how theories or models work, or which can help to confirm those models in different contexts or to uncover gaps in models or theories.

However, we have not located any reporting guidelines specific to case report papers in the field of Management. We propose the CARE guidelines (Gagnier et al., 2013; Riley et al., 2017) specific to Health Sciences can be adapted for the field of Management.

## Case report papers in the field of Business or Management Research

As discussed above, case report papers provide evidence of the effectiveness of management practices or programme implementation in real organisations, while articles showing the results of experiments provide evidence in controlled contexts with situations manipulated by the researchers. Therefore, both contributions complement each other and have value. In this sense, case studies or action research, informed by case report papers, allow for the analysis of novel and/or rare implementations.

Case report papers are rarely implemented in Business and Management research, or rarely labelled as such, which makes it difficult to discover and reuse them. Search strategies without a specific keyword led to many false positives and many false negatives as described below.

A search in Scopus in mid-July 2021 using the term "case report" in the title, abstract, and keyword fields yielded more than two and a half million articles. (Figure 1). Filtering on the subject fields of Business, Management, and Accounting reduced the results to 439 (Figure 2). Most of these results were on experiences in Health Sciences or Health Management. Additionally, most of the publications occurred after 2014 with approximately 40 articles of this type published each year.

Figure 1. Scopus search results (July 2021)

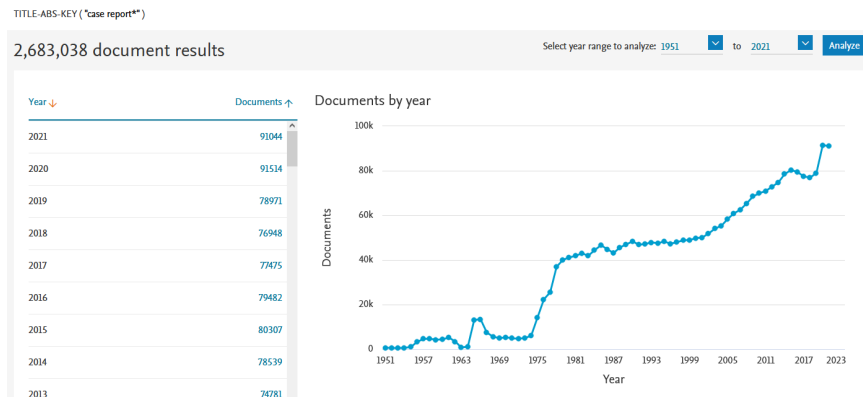
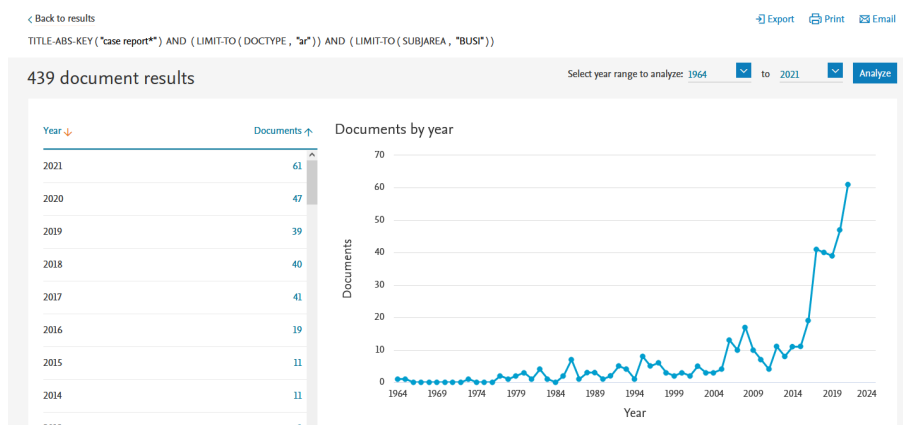


Figure 2. Scopus search results filtered by subject field (July 2021)



Focussing on those published in journals classified only in the fields of Business, Management, and Accounting, and excluding other fields, produced 49 results in all years indexed in Scopus (of which only one was published in the last four years):

- TITLE-ABS-KEY("case report") AND ( EXCLUDE ( SUBJAREA,"MEDI" ) OR EXCLUDE ( SUBJAREA,"BIOC" ) OR EXCLUDE ( SUBJAREA,"NEUR" ) OR EXCLUDE ( SUBJAREA,"IMMU" ) OR EXCLUDE ( SUBJAREA,"DENT" ) OR EXCLUDE ( SUBJAREA,"HEAL" ) OR EXCLUDE ( SUBJAREA,"NURS" ) OR EXCLUDE ( SUBJAREA,"VETE" ) OR EXCLUDE ( SUBJAREA,"PSYC" ) OR EXCLUDE ( SUBJAREA,"ARTS" ) OR EXCLUDE ( SUBJAREA,"SOCI" ) OR EXCLUDE ( SUBJAREA,"AGRI" ) OR EXCLUDE ( SUBJAREA,"ENVI" ) OR EXCLUDE ( SUBJAREA,"ENGI" ) OR EXCLUDE ( SUBJAREA,"CENG" ) OR EXCLUDE ( SUBJAREA,"MULT" ) OR EXCLUDE ( SUBJAREA,"PHYS" ) OR EXCLUDE ( SUBJAREA,"CHEM" ) OR EXCLUDE ( SUBJAREA,"COMP" ) OR EXCLUDE ( SUBJAREA,"MATE" ) OR EXCLUDE ( SUBJAREA,"MATH" ) OR EXCLUDE ( SUBJAREA,"EART" ) OR EXCLUDE ( SUBJAREA,"ENER" ) OR EXCLUDE ( SUBJAREA,"ECON" ) OR EXCLUDE ( SUBJAREA,"Undefined" ) ) AND ( EXCLUDE ( SUBJAREA,"PHAR" ) ) AND ( EXCLUDE ( SUBJAREA,"DECI" ) )

This low figure contrasted with the popularity of case reports in medicine with nearly 2.5 million results, and in nursing with more than 45,000 results (Figure 3). It is possible many of these results do not fit the exact characteristics of a case report as discussed in this article. The occurrence of false positive bias is also likely to exist, and may have been amplified, in the low figure of 49 results in the Business, Management, and Accounting field.

**Figure 3. Scopus search results by subject field (July 2021)**

Filter by subject area

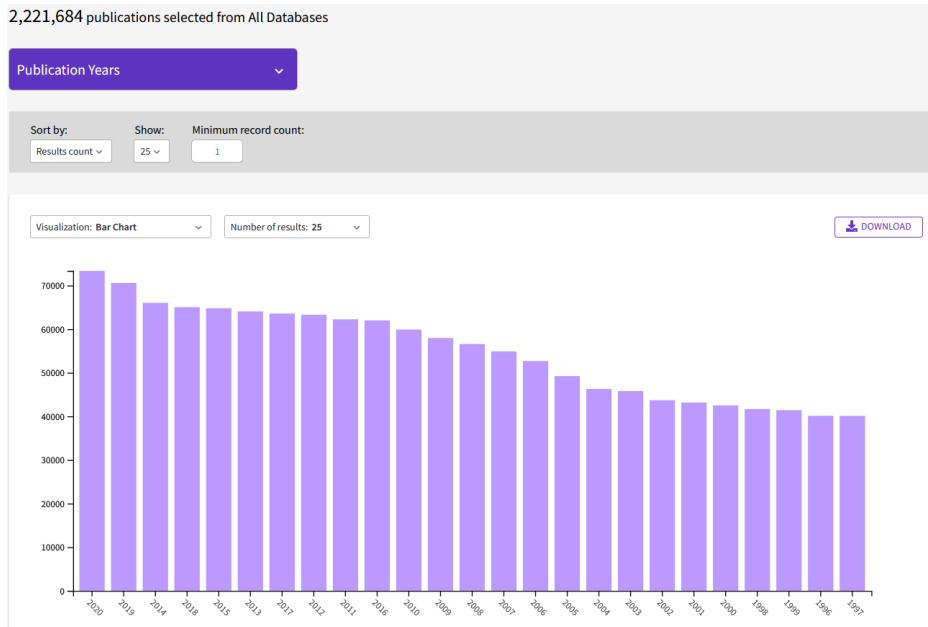
<input type="checkbox"/> Medicine	(2,448,421) >	<input type="checkbox"/> Arts and Humanities	(16,849) >	<input type="checkbox"/> Materials Science	(2,137) >
<input type="checkbox"/> Biochemistry, Genetics and Molecular Biology	(170,905) >	<input type="checkbox"/> Social Sciences	(16,488) >	<input type="checkbox"/> Mathematics	(771) >
<input type="checkbox"/> Neuroscience	(104,057) >	<input type="checkbox"/> Agricultural and Biological Sciences	(9,324) >	<input type="checkbox"/> Earth and Planetary Sciences	(566) >
<input type="checkbox"/> Immunology and Microbiology	(54,955) >	<input type="checkbox"/> Environmental Science	(8,188) >	<input type="checkbox"/> Energy	(450) >
<input type="checkbox"/> Dentistry	(51,038) >	<input type="checkbox"/> Engineering	(7,103) >	<input type="checkbox"/> Business, Management and Accounting	(441) >
<input type="checkbox"/> Health Professions	(46,916) >	<input type="checkbox"/> Chemical Engineering	(4,731) >	<input type="checkbox"/> Decision Sciences	(165) >
<input type="checkbox"/> Nursing	(45,529) >	<input type="checkbox"/> Multidisciplinary	(3,375) >	<input type="checkbox"/> Economics, Econometrics and Finance	(86) >
<input type="checkbox"/> Veterinary	(34,693) >	<input type="checkbox"/> Physics and Astronomy	(3,107) >	<input type="checkbox"/> Undefined	(2,053) >
<input type="checkbox"/> Psychology	(34,054) >	<input type="checkbox"/> Chemistry	(2,652) >		
<input type="checkbox"/> Pharmacology, Toxicology and Pharmaceutics	(31,753) >	<input type="checkbox"/> Computer Science	(2,339) >		

Repeating the search in WOS returned similar results. The Business and Economics field yielded 626 results with approximately 30 articles per year in recent years. In that number, there were many publications in health sciences, health economics, and health management. Filtering out the results published in journals which were only classified in the Business and Economics field, the figure reduced to 9 articles in all years of WOS coverage. In contrast, in any of the sub-fields of medicine covered by WOS, a search produced more than 30,000 results.



Taking advantage of the ability in WOS to use a specific "case report" tag for Document Type, we can see this document type yielded hundreds of thousands of results in each of the fields of Health Sciences. (Figure 4 and Figure 5). These results were published in various Health Sciences journals. (Figure 6).

**Figure 4. WOS search results (DT=("CASE REPORT")) 28 August 2021**



**Figure 5. Search results in WOS by Research Areas (DT=("CASE REPORT")) 28 August 2021**

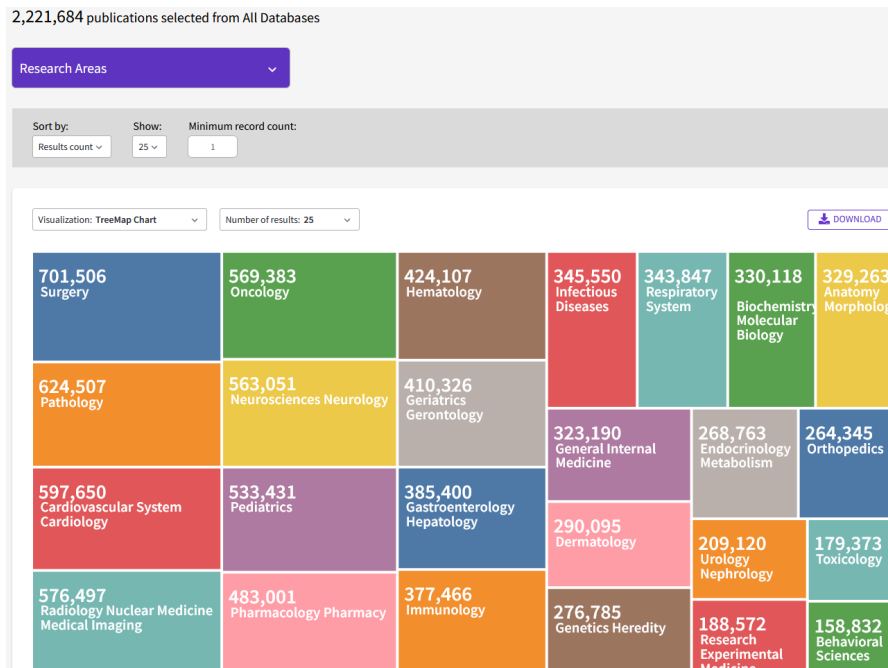




Figure 6. Search results in WOS by journals (DT=="CASE REPORT") 28 August 2021



None of the results were labelled as Management and of the 117 labelled Operations Management all were false positives. Specifically, they were explicit jobs from other areas. (Figure 7).

Figure 7. Example of WOS search results filtered by field Operations Research (28 August 2021)

117 results from All Databases for:  
 Q (DT=="CASE REPORT")  
 Refined By: Research Areas: Operations Research Management Science X Clear all  
 Copy query link  
 Publications You may also like... New

Refine results  
 Search within results for...  
 Quick Filters  
 Review Articles New 12  
 Open Access 16  
 Publication Years  
 2020 10  
 2019 2  
 2018 6  
 2017 4  
 2016 1  
 See all  
 Document Types  
 Case Report 117  
 Articles 90  
 Other 19  
 Review Articles 12

0/117 Add To Marked List Export Relevance 1 of 3

- 1 Unexplained Obstruction of an Integrated Cardiotomy Filter During Cardiopulmonary Bypass.  
 Alwardt, Cory M; Wilson, Donald S and Pajaro, Octavio E  
 2017-03 | The Journal of extra-corporeal technology 49 (1), pp.59-63  
 Cardiopulmonary bypass (CPB) is considered relatively safe in most cases, yet is not complication free. We present a case of an integrated cardiotomy filter obstruction during CPB, requiring circuit reconfiguration. Approximately an hour after uneventful initiation of CPB the integrated cardiotomy filter became obstructed over several minutes, requiring c... Show more  
 0 References
- 2 Schwannoma de glosofaringeo: Causa infrecuente de tumor parafaringeo  
 Montesinos, Manuel R; Ferro, Paula C and Lotti, Alejandro  
 2013-09 | Revista argentina de cirugía 105 (1), pp.47-50  
 Background: Parapharyngeal schwannomas are unfrequent, benign, slow growing tumors that usually arise from the vagus nerve or the cervical sympathetic chain. Objective: To describe clinical presentation, preoperative diagnosis, surgical management and outcome of a patient with a parapharyngeal schwannoma originated from the glos... Show more  
 4 References
- 3 Conscious Sedation on a General Ward: The MET and Clinical Governance  
 Warrillow, S; Bellomo, R and Jones, D  
 Feb 2007 | JOINT COMMISSION JOURNAL ON QUALITY AND PATIENT SAFETY 33 (2), pp.112-117  
 2 Citations  
 5 References

## Methods

We followed a four-phase process to reach consensus on the adapted guide. In Phase 1 we searched for guidelines or recommendations on how to write case report papers with extractable items. After the

search we considered whether the CARE guidelines (Gagnier et al., 2013; Heart Views, 2017; Riley et al., 2017) constituted the best model currently available and they enjoyed the greatest consensus and reuse within the scientific community (Appendix A).

In Phase 2, we adapted the components of the CARE guidelines to make them more meaningful in the context of management research (Appendix B).

In Phase 3, we consulted experts to refine the adapted guidelines and to help develop the proposed case report paper guidelines. In this phase, we contacted people who met at least one of the following two criteria: a) researchers in the field of Operations Management or Human Resources Management who have published articles or professional reports related to case studies or action research; b) professionals from organisations who have been involved in action research published in scientific journals or conferences.

The 29 candidates identified were contacted by an email in which the purpose of the research (to generate specific recommendations for case reporting) was explained to them, they were given instructions for participation, and they were asked to participate. 11 candidates accepted our invitation to collaborate and then received a document with the definition of a case report paper and the checklist adapted to the field of Management. Considering these they were asked the following:

- 1) Is there too much or too little relevant information to include in a case report paper?
- 2) The justification for their views regarding point 1.
- 3) Optionally, their opinion on the initiative to encourage the use of case reports paper.

We grouped the recommendations, integrated them, and refined the recommendations by assessing the reasons given by the participants in Phase 3. The refined version was used in Phase 4, which consisted of checking the consensus on the refined version from Phase 3. For Phase 4 we returned to the participants of from Phase 3 and we took advantage of academic events during 2022 (e.g., "II Jornadas de Experiencias Docentes en Dirección de Operaciones", linked to the ADINGOR environment and "XIII Workshop de la Sección de Dirección de Operaciones y Tecnología de ACEDE (ACEDEDEDOT)" and ACEDE conference) to present the refined draft of the guidelines and to collect the opinions and proposals of a wide range of researchers in the fields of Operations Management and Human Resources Management. The final recommendations below incorporate the relevant comments received.

## Results

As a result of the completion of the four phases detailed above, we present below the refined guideline proposal (Table 1).

**Table 1. Case report paper guidelines**

<ol style="list-style-type: none"> <li>1. <b>Title:</b> The problem, diagnosis, or intervention of primary focus followed by the words “case report”.</li> <li>2. <b>Key Words:</b> include "case report paper" and 2 to 10 key words that identify diagnoses, conditions, problems, or interventions in the case report, the methodology (case study, action research, etc.) and main uses for the case report (learning, practice, etc.).</li> <li>3. <b>Abstract:</b> <ul style="list-style-type: none"> <li>○ Summary: Briefly summarize the case (i.e., the main concerns and important facts) and why the case report adds value in terms of interest and contribution to research and/or practice.</li> <li>○ Methodology: The primary diagnoses, interventions, and outcomes.</li> <li>○ Conclusion: What are one or more takeaways presented in the case report? How can they improve our knowledge of the topic or practices in other organizations?</li> </ul> </li> <li>4. <b>Introduction:</b> Briefly summarize why the case report is interesting and relevant.</li> <li>5. <b>Theoretical background:</b> The main issues to be addressed are the decision making within the organisation, the solutions proposed for situations considered, and the limitations of the available knowledge.</li> <li>6. <b>Information about individuals and/or the organization and their relevant concerns:</b> <ul style="list-style-type: none"> <li>○ Preserving confidentiality, include anonymized people (e.g., demographic details) and/or organization-specific information (economic activity, ownership, size, etc.).</li> <li>○ Primary concerns and symptoms of problems (specific details for diagnosis will be treated in the diagnostic assessment section).</li> <li>○ Main stakeholders including relevant organizational information.</li> </ul> </li> <li>7. <b>Timeline:</b> Historical and current information from the situation organized into a timeline (e.g., a figure or table).             <ul style="list-style-type: none"> <li>○ Relevant past interventions and their outcomes.</li> <li>○ Detailed follow-up of the current intervention indicating actions and the duration of the actions.</li> </ul> </li> <li>8. <b>Diagnostic Assessment:</b> <ul style="list-style-type: none"> <li>○ Facts and Findings: Describe the significant facts and important findings supporting the concerns.</li> <li>○ Diagnostic methods and sources including how the information was obtained (e.g., action research, observation, in-depth interviews, surveys, information provided by organization or public sources, etc.).</li> <li>○ Diagnostic challenges encountered.</li> <li>○ Diagnosis, i.e., the identified condition, situation, or problem derived from analysing its symptoms or causes.</li> <li>○ Forecast of how things are expected to develop if no intervention is taken, where applicable.</li> </ul> </li> <li>9. <b>Intervention (without intervention see protocol papers <a href="https://doi.org/10.4995/wpom.11755">https://doi.org/10.4995/wpom.11755</a>) :</b> <ul style="list-style-type: none"> <li>○ Types of interventions/tools/programs deployed to solve the situation.</li> <li>○ Administration of the intervention (e.g., coverage, investment, duration, etc.).</li> </ul> </li> <li>10. <b>Follow-up and Outcomes:</b> <ul style="list-style-type: none"> <li>○ Organizational/departmental/individual assessed outcomes, if available.</li> </ul> </li> </ol>
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- Important follow-up monitoring or controls and other results.
  - Intervention adherence or resistance and how this was assessed.
  - Adverse and unanticipated events. Changes in planned interventions including explanations.
  - Organization/individual perspective (optional). People in the organization should share their perspective on the intervention(s) affecting them.
11. **Discussion and conclusions:**
- Discussion of the relevant managerial literature. Research implications.
  - Strengths and limitations in the approach to this case.
  - In what other cases or situations could the findings of the analyzed case be applied?
  - The rationale for any conclusions.
12. **Managerial implications:** The primary takeaways from the case report (without references) in one paragraph.
13. **Informed Consent:** People in the organization should give their informed consent. (Provide if requested).

The main recommendations made were: the modification of some terms or the use of synonyms (in order to avoid false-friend words for non-native English speakers); improved labelling of section headings to better represent the contents; relocation of some blocks of information to other sections or the creation of new sections; greater emphasis on linking to published scientific literature. The original version (Annex A) or the first adapted version (Annex B) can be compared with the refined proposal (Table 1).

In general, we believe it is appropriate the case report paper format should be in narrative form which puts into context and presents the story of the process followed by the unit under analysis (person, group, department, or organisation). In addition, it should include the reasons and motives, both for the decisions made in the unit of analysis and for the academic or professional conclusions (takeaways) derived from the case report. This is relevant if it is a case study report, but even more so if it is an action research (in which case, blocks of additional information specific to one of the 8 steps of the action research methodology can be incorporated) (Alfaro-Tanco et al., 2021; Marin-Garcia et al., 2018; Marin-Garcia et al., 2020)).

We recommend the title is brief, concise, and descriptive. In this sense, the title should describe the programme or phenomenon that is the focus of the paper (problems, diagnosis, interventions and/or results) and include the words "case report". In order to facilitate the retrieval of these papers in the future, "case report paper" should also be included as a keyword.

Case report papers, from a professional point of view, can be considered as lessons-learned reports with an additional academic contribution. The introduction section should clearly explain why it is important to read the case report paper.

It is advisable, in line with (Gagnier et al., 2013), that a timeline (e.g., a Gantt chart) be attached, in the form of a table or figure, highlighting chronologically and in detail the main milestones related to the case presented.

The level of detail should be high in order to be informative, but this should be balanced with the length of the case report paper not being too excessive, so it remains relatively quick and easy to read. We recommend to focus the details on the most relevant aspects of the context and the intervention: a recent

history of the organisation related to the main topic of the case report, the main characteristics of the organisation (size, sector, culture, management methodologies, organisational constraints, etc.), the diagnostic tools used and their rationale for selection, the results of the diagnosis, the main interventions and events in the follow-up after the intervention, etc. Additional information (e.g., details, intervention diary, tables, or figures) can be organised into annexes or as supplementary material to maintain a balance between detailed information (allowing step-by-step replication) and agile reading of the document.

We deem it essential to describe not only what interventions were deployed, but also how these interventions were executed (e.g., duration, frequency, resources invested and timing, people involved, roles, unforeseen events and how they were addressed, interruptions, discontinuities in the implementation process, adherence to protocols, how adherence was measured, etc.). The results, both expected and unexpected, should be well documented.

The introduction should justify the interest of the case for potential readers, the relevance of the issues/problems addressed, or the frequency (prevalence) of similar situations, or the impact for individuals or organisations of the addressed issues.

The theoretical framework should focus on the proposed solutions for situations such as those in the organisation, and their feasibility or expected results. Additionally, reference should be made to previous work related to the decisions taken in the organisation. The limitations of available knowledge or research should also be highlighted.

In the analysis of the case presented, it would be interesting to include how the need emerged, or the presence or seriousness of the problem was verified in the unit of analysis; what circumstances promoted or facilitated the situation; how the organisation experienced the situation; what aspects have influenced the decisions that were taken in the organisation, etc.

Whenever possible, monitoring data should be provided for a sufficient period of time to allow for the assessment of the results (or unintended effects) for the decisions implemented. The setting of such a period is not always obvious and information should be provided to justify the chosen time window.

An important aspect that can be difficult to resolve, or to balance with transparency, is anonymity or withholding the identification of the actual companies or participants in the study if they wish to remain anonymous. Confidentiality issues or avoiding the dissemination of strategic actions of organisations can also be a difficult issue to resolve in some cases.

It is particularly important to be careful about the terminology used. Organisations may use their own jargon or acronyms (not always in common or widespread use outside of the organisation), or they may use terms that are coined and well known, but with a different interpretation or meaning than they may have in other organisations or in academia. It is useful to include a glossary with a concise definition of terms used to identify programmes, practices, or interventions.

In the timeline section, interventions or actions of the past and activities related to intervention shown in the case report must be commented on.

The diagnostic assessment section includes aspects of methodology (how the information has been captured) and the interpretation (diagnosis and prognosis) made with said information.

In principle, a case report paper always includes an intervention, not just a diagnosis and an action plan. Without intervention, we would be closer to a protocol paper (Marin-Garcia, 2021). Describing the intervention and its results is an essential part of the case report. However, it is possible that the “intervention” you want to report on is how to diagnose and identify the problem. There are several alternatives to making a diagnosis. It can be subject to analysis if other options have failed in the past or if it has never been tried. For example, making a diagnosis with action research (with researchers involved in the process) can be analysed as an intervention instead of doing it only with staff from the organization or with people who are consultants but are not researchers. A case report paper always tells how to solve a problem and how it went. That problem can be how to make a diagnosis, an action plan, or the actions derived from the plan.

In the discussion section, you can describe the mechanisms that you think have worked to achieve the results shown in the case and whether, if there were implementation recommendations for the practices, any exceptions or adaptations to the recommendations were necessary.

There have also been recommendations on initiatives which could be implemented to encourage the dissemination of case report papers. On the one hand, it would be interesting to show an example case which is as close as possible to these recommendations (this case would also serve as an exercise to improve the recommendations as necessary). In addition, a training workshop on how to write a case report paper could be proposed and complemented with self-training resources. As an alternative to training, an event or talk could be held in specific forums (such as ADINGOR or ACEDEDOT) and disseminating its potential as a learning tool for professionals. Another option is to propose a special issue which serves as a launching event and helps to reach a consensus on criteria in a set of articles (which could then serve as an example, as proposed in the first suggestion). It would also be interesting to create case report protocols. In them, you would explain how you are going to collect data, what data you are going to collect, and include comparable information (Marin-Garcia, 2021) in collections of case report papers that share the same protocol and would facilitate integration and knowledge building.

## Conclusions

Case report papers appear to have had a relevant role in Health Sciences research for some time now. This type of article represents a source of relevant information for identifying new ideas or situations where the observed reality behaves differently from the established models (with either more positive or more negative results than expected). But, above all, they are an important element for discovering and disseminating what programmes or practices work and under what circumstances.

The process from which we have generated our proposal has some limitations. The proposal presented represents the consensus achieved with a specific group of participants. Although we have tried to have diversity in the panel (people from academia and people from business; specialists in operations management and specialists in human resource management; senior and junior people; business administration profiles and engineering profiles), not all possible variants are represented, nor can we guarantee that their opinions are wholly representative of the groups to which they belong.

We are unable to guarantee, even if the recommendations of this paper are followed, research adhering to these guidelines will provide evidence of causality. The aim of these guidelines is to increase the quality

of information reporting for research conducted using ethnographic methods, regardless of whether or not this can justify the cause-effect relationship between interventions and outcomes.

This work is considered an initial step allowing the discovery of aspects which can be extended in future research. It would be interesting to have detailed examples and counter-examples of the application of each of the points in the provided checklist. There is also uncertainty regarding the scientific reading habits of managers in organisations and whether the case report paper model shown here would serve to meet their needs and bridge the gap between research and professional practice. A possible future line of research may lay along these lines. Finally, it might be of interest to analyse the adherence to our guidelines of a sample of ethnographic (case study or action research) papers applied in the field of management. For example, we could analyse articles such as (Claudio et al., 2021; Hamlin, 2002; Nino et al., 2020) (Suárez-Barraza & Miguel-Davila, 2020).

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### **Full Disclosure**

The first two authors sit on the editorial board of the journal WPOM-Working Papers on Operations Management (<https://polipapers.upv.es/index.php/WPOM>)

### **Author Contributions**

Conceptualization (JAMG); data curation (JAMG); formal analysis (JAMG, JM, JPGS); investigation (JAMG, JM, JPGS); methodology (JAMG); validation (JAMG, JM, JPGS); writing, original draft (JAMG, JM, JPGS); writing, review and editing (JAMG, JM, JPGS).

### **Appendix A**

Checklist adapted from CARE (2013) available from <https://www.care-statement.org/checklist>.

A case report tells a story in a narrative format that includes the presentation of concerns for an individual or an organization, situation diagnoses, interventions, outcomes (including adverse events) and follow-ups. The narrative should include a discussion of the rationale for any conclusions and any takeaways.



## Appendix B

**Table 2 Case report papers guidelines adapted from CARE (phase 2)**

<ol style="list-style-type: none"><li>1. <b>Title</b> – The diagnosis or intervention of primary focus followed by the words “case report”.</li><li>2. <b>Key Words</b> – 2 to 10 key words that identify diagnoses or interventions in this case report (including "case report paper").</li><li>3. <b>Abstract</b> –<ul style="list-style-type: none"><li>○ Introduction – What is unique about this case and what does it add to the scientific literature?</li><li>○ The main concerns and important managerial findings.</li><li>○ The primary diagnoses, interventions, and outcomes.</li><li>○ Conclusion – What are one or more takeaways from this case report?</li></ul></li><li>4. <b>Introduction</b> – Briefly summarizes why this case is unique and may include managerial literature references.</li><li>5. <b>Individual or organizational Information</b><ul style="list-style-type: none"><li>○ Anonymized people or organization specific information.</li><li>○ Primary concerns and symptoms of problems.</li><li>○ History of main actors including relevant organizational information.</li><li>○ Relevant past interventions and their outcomes.</li></ul></li><li>6. <b>Managerial Findings</b> – Describe significant facts and important managerial findings.</li><li>7. <b>Timeline</b> – Historical and current information from this situation organized as a timeline (figure or table).</li><li>8. <b>Diagnostic Assessment</b><ul style="list-style-type: none"><li>○ Diagnostic methods.</li><li>○ Diagnostic challenges.</li><li>○ Diagnosis (including alternate diagnoses considered).</li><li>○ Forecasts made, where applicable.</li></ul></li><li>9. <b>Intervention</b><ul style="list-style-type: none"><li>○ Types of interventions/tools/programs put in place to address the situation.</li><li>○ Administration of intervention (coverage, investment made, duration).</li><li>○ Changes in planned interventions with explanations.</li></ul></li><li>10. <b>Follow-up and Outcomes</b><ul style="list-style-type: none"><li>○ Organizational/departmental/individual assessed outcomes if available.</li><li>○ Important follow-up monitoring or controls and other results.</li><li>○ Intervention adherence and tolerability. (How was this assessed?)</li><li>○ Adverse and unanticipated events.</li></ul></li><li>11. <b>Discussion</b><ul style="list-style-type: none"><li>○ Strengths and limitations in your approach to this case.</li><li>○ Discussion of the relevant managerial literature.</li><li>○ The rationale for the conclusions.</li><li>○ The primary takeaways from this case report (without references) in a one paragraph conclusion.</li></ul></li><li>12. <b>Organization/Individual Perspective</b> – People in organization should share their perspectives on the interventions affecting them.</li><li>13. <b>Informed Consent</b> – People in organization should give informed consent. (Provide if requested.)</li></ol>
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## Spanish version

### ***Case report papers guidelines: Recomendaciones para el informe de estudios de caso o investigaciones en acción en el área de Gestión de Empresas***

#### **Introducción**

Los *case report papers* son una variante de informes de investigación (*papers* o artículos científicos) que describen, con fines de gestión empresarial, científicos o educativos, un problema / situación experimentada por una o más unidades de análisis (a nivel individual, departamental u organizativo). Estos informes cuentan una historia en un formato narrativo que incluye las preocupaciones o situaciones que se presentan para una persona o una organización, el diagnóstico de la situación, las intervenciones realizadas, los resultados obtenidos (incluidos los efectos adversos) y el seguimiento realizado (Gagnier et al., 2013).

En el campo de la Gestión u Organización de Empresas, los *case report papers* se pueden utilizar como informes de investigaciones basadas en métodos de trabajo de campo vinculados con la etnografía (Bryman & Bell, 2011). Especialmente en los *single case studies* y, sobre todo, en las *action research*. En este tipo de investigaciones, se suele realizar un proceso iterativo, donde se presenta un análisis objetivo y profundo de una situación, donde no siempre el investigador-a(o las organizaciones participantes) tienen poco control de los acontecimientos (Kratochwill & Levin, 2010; McCutcheon & Meredith, 1993). En este sentido, los *single case studies* y las *action research* comparten aspectos de los estudios observacionales (Kratochwill & Levin, 2010; Losilla et al., 2018). La objetividad del informe se consigue complementando las observaciones y/o entrevistas, con documentos, informes, diagramas organizativos, análisis estadísticos de datos de la organización, etc. (Bonache, 1999; McCutcheon & Meredith, 1993; Voss et al., 2002). Todo ello debe realizarse con rigor metodológico para reducir los problemas de falta de transparencia, validez y fiabilidad en las medidas procesadas (Marin-Garcia, 2015; Marin-Garcia, 2021; Tight, 2017; Voss et al., 2002).

Los *case report papers* permiten informar con detalle del estudio realizado una única planta, departamento, persona o situación a lo largo del tiempo y analizar el efecto de una intervención. De este modo, otros profesionales pueden usar esa información para tomar decisiones en situaciones parecidas (Tight, 2017). En la mayoría de estas investigaciones, la muestra se compondrá de una sola unidad de análisis (una persona, un departamento o una organización) (Pacewicz, 2022; Small, 2009). Pero si se han informado con rigor y se etiquetan de forma adecuada para ser recuperados y combinados de manera sistemática, en el futuro pueden ser analizados junto con otras investigaciones similares y proporcionar la oportunidad de descubrir efectos beneficiosos o perjudiciales de las herramientas o programas utilizados por las organizaciones.

La investigación basada en *multiple cases reports*, integrado mediante una revisión sistemática de literatura, puede servir para (France et al., 2019; Gagnier et al., 2013; Heart Views, 2017; Tight, 2017): a) identificar qué acciones de gestión (herramientas, programas o iniciativas) pueden ayudar o perjudicar a determinadas organizaciones o unidades dentro de la organización y cuales son las condiciones en las que sucede una u otra cosa; b) valorar cuáles son los beneficios que se obtienen, qué problemas se alivian o

resuelven, qué recursos, inversiones o costes son necesarios, los efectos no deseados que pueden aparecer y como evoluciona todo esto a lo largo del tiempo; c) determinar a los factores externos a la intervención que afectan al proceso o son afectados por él (como la cultura de la organización, personalidad de las personas que intervienen, relaciones internas y externas, situación económica, etc.); y d) evaluar cómo perciben el proceso las personas participantes. Adicionalmente, pueden jugar un papel importante para reconocer nuevas prácticas o prácticas con uso muy poco extendido de momento.

Los *randomized controlled trials* pueden ser muy complicados de diseñar y de llevar a término en áreas como la de *Management* (*Operations Management*, *Human Resources Management* or *other sub-areas of Management*) porque el contexto en el cual se desarrolla la intervención es sumamente complejo (Booth et al., 2013; France et al., 2019; Guise et al., 2017; Lewin et al., 2015). En este sentido, las investigaciones con enfoque de *case study*, *action research* o *grounded theory* proporcionan un modo de estudiar esa complejidad y los *case report papers*, ofrecen un modo de informar de detalles que permiten describir y estandarizar experimentos futuros. Además, permiten difundir buenas practicas y proporcionar información para que sean aplicadas en otros contextos (Shani & Coghlan, 2021; Tight, 2017). En este sentido, este trabajo amplía el contexto en el que se pueden aplicar otras guidelines, como la de Marin-Garcia y Alfalla-Luque (2021) que se centraba exclusivamente en el ámbito de docencia y aprendizaje.

Este trabajo adaptará las *case reports* (CARE) *guidelines* (Gagnier et al., 2013; Riley et al., 2017), que se han desarrollado en el ámbito de Ciencias de la Salud, para que sean aplicables en el área científica de *Management* (especialmente en *Operations Management* y en *Human Resources Management*). Aprovecharemos los trabajos del grupo de expertos en Ciencias de la Salud y debatiremos la propuesta adaptada con un grupo de académicos y profesionales del área de Management.

El objetivo es proporcionar una guía de trabajo que facilite la precisión, transparencia y, sobre todo, utilidad para académicos y profesionales de los *case report papers* como tipología de artículo publicable en revistas de impacto. Analizaremos la prevalencia de este tipo de artículos en las publicaciones indexadas en Web Of Science (WOS) y Scopus. Por ultimo, explicaremos cómo hemos hecho la adaptación de las CARE *guidelines* y haremos pública la lista de criterios que empleará WPOM durante el proceso de revisión para facilitar la decisión editorial de aceptar trabajos para publicación. Consideramos, en línea con investigaciones precedentes (Gagnier et al., 2013; Hirst & Altman, 2012; Riley et al., 2017), que las guías de reporte (*reporting guidelines*) ayudan a mejorar la investigación realizada, a reducir el riesgo de sesgo, proporcionan información sobre las implantación de prácticas de gestión, favorecen la formación de profesionales en gestión y permiten tomar decisiones editoriales informadas a las personas que actúan como editoras de revistas o revisoras.

### **Los *case report papers* al servicio de la gestión basada en evidencias**

La gestión de empresas es una tarea compleja que requiere abordar problemas o situaciones difíciles. En algunos casos, la personas que ocupan puestos directivos están tentadas a introducir cambios o prácticas empresariales inspiradas por algún libro que han leído en los tiempos muertos en los viajes de negocios, o la información que han visto en algún blog de algún gurú empresarial, o intentando emular a empresas deslumbrantes que aparecen en los medios de comunicación, o simplemente imitando a empresas cercanas. Quizás este sea un terreno abonado para la incursión de las pseudociencias en el mundo de la

gestión (Callaghan, 2019; Dobusch & Heimstaedt, 2019; Grawitch & Ballard, 2019; Juandi & Tamur, 2021; Stroke, 1994; Sulkowski, 2019; Thaler & Shiffman, 2015).

Es fácil que haya personas interesadas en prometer algo altamente deseable, pero prácticamente imposible de conseguir (de Regt et al., 2020). Por ejemplo, reducir a cero los inventarios mediante el uso de la inteligencia artificial para que se alineen los plazos de entrega con los programas de producción y la recepción de materias primas y componentes. Es posible que, además, sea vendido como una implantación fácil y con éxito seguro. Aunque la realidad es que, normalmente, los problemas complejos no admiten soluciones sencillas o fáciles (Manchón, 2021).

En otras ocasiones, es probable que las organizaciones implanten métodos o prácticas que no dejan de ser un simple placebo, que viene avalado por unos resultados poco más rotundos que los fácilmente explicables por un efecto Hawthorne (Adair, 1984; Hubbard et al., 1998; Juandi & Tamur, 2021; Leonard & Masatu, 2010; Levitt & List, 2011). Quizás esta sea una de las razones por las que, normalmente, abundan los casos de éxito, pero es difícil encontrar casos descritos como fracasos. Existe un problema adicional y es que cuando una implantación no funciona como se esperaba, hay un incentivo perverso para enmascarar los resultados o los objetivos a posteriori, e intentar mostrarlo de modo que parezca que la implantación ha logrado, en parte, sus objetivos.

En algunos casos, se podría llegar a pensar que la función de la introducción de algunas prácticas de gestión no es tanto lograr una mejora real en los indicadores de la empresa, como el tranquilizar las conciencias de las personas con cargos directivos y evitar tomar ellas decisiones complicadas o, simplemente, tener un “chivo expiatorio” en el caso de que las decisiones no lleven a un buen resultado. También es posible que se usen las ideas externas como una palanca para movilizar el cambio, porque lo que viene de fuera parece que es más valorado en algunos contextos. Quizás en estos casos, estén ganando los circuitos de pensamiento rápido frente al pensamiento lento, aprovechando el atractivo de usar atajos que nos simplifiquen los problemas, aunque no sean los que nos pueden llevar a las mejores soluciones (Kahneman, 2011; Kahneman et al., 2016).

Frente a esta situación, contar con ejemplos ilustrativos de casos concretos, que muestren información precisa y transparente del proceso de implantación de prácticas y/o programas de gestión, podrían ayudar a diferentes colectivos:

- Personas directivas de empresas: revisando y comparando opciones de prácticas que podrían implantar
- Personas que se dedican a la investigación o implantación de prácticas de gestión: compartiendo y comparando sus experiencias con las de otros colegas
- Personas que se dedican a la formación en prácticas de gestión: disponiendo de casos reales que permitan acercarse a enfoques de docencia de gestión basada en evidencia o docencia basada en casos. En algunos contextos, los trabajos finales de titulación o *capstone projects* podrían elaborarse siguiendo las guías de *case report papers*

Los *case report papers* podrían jugar un papel en el acercamiento de los resultados de investigación a las personas con responsabilidades directivas en las organizaciones. No hemos encontrado excesiva información sobre lo que leen las personas de las organizaciones con responsabilidad en *Management* (Armstrong & Pagell, 2003; Bigelow & Arndt, 2003; Bootsma et al., 1997; Perea & Brady, 2017). Pero,

si tomamos el mundo de la salud como paradigma de la práctica profesional basada en evidencia, en ese contexto se asume que, en promedio, el personal sanitario dedica entre 3 y 4 horas a la semana a leer artículos científicos sobre Ciencias de la Salud (Nylenna, 1991; Saint et al., 2000; Tenopir et al., 2007). Obviamente estas cifras pueden depender de contextos (países, área médica, etc.) o haber evolucionado en tiempos recientes. En general, el personal sanitario prefiere leer artículos que se basan en resultados con pacientes reales o revisiones sistemáticas y no tanto investigación básica o resultados de experimentos en laboratorio o simulaciones (González de Dios et al., 2011; O'Connor, 2009; Ru et al., 2017; Thoms, 2014). No obstante, algunos trabajos indican que menos de la cuarta parte de los médicos leen artículos científicos para tomar decisiones basadas en evidencias (Baig et al., 2016). Entre otras razones, porque existen algunas barreras para ello identificadas en medicina (Grimshaw et al., 2002). El reto sería poder identificar cómo y donde se informa el personal directivo de las organizaciones y que debería hacerse para mejorar el papel que pueden jugar los *case report papers* como fuente para la gestión basada en evidencia.

Por último, convendría recordar que los *case report papers* no son un método de recogida de datos (como podría ser, por ejemplo, la observación participante, el análisis de contenidos, las encuestas o las entrevistas), ni una metodología de investigación (como podrían ser los *case study*, las *action research*, o la *grounded theory*) (Bonache, 1999). Los *case report papers* son una manera de informar científicamente de los resultados de una investigación. Este formato se adapta especialmente bien a investigaciones enfocadas con una metodología relacionada con la etnografía (especialmente *case studies* y *action research*).

En el área de *Management* existen algunas *guidelines* publicadas relacionadas con *case study* y *action research* (Bleijenbergh et al., 2021; Bonache, 1999; De Massis & Kotlar, 2014; Elg et al., 2020; Elsahn et al., 2020; Erro-Garcés & Alfaro-Tanco, 2020; Ketokivi & Choi, 2014; Marin-Garcia & Alfalla-Luque, 2021; Oliva, 2019; Raelin, 2020; Shani & Coghlan, 2021; Swanepoel, 2019; Voss et al., 2002). Todas ellas, salvo (Marin-Garcia & Alfalla-Luque, 2021), se centran en los aspectos epistemológicos (fundamentos y metodología) de cómo realizar la investigación. Además, la mayoría de esas publicaciones se centran en recomendaciones para trabajos empíricos focalizados en construir teorías o modelos. Sin embargo, dicen muy poco sobre cómo informar de la investigación realizada y, salvo excepciones (Voss et al., 2002), se enfocan a investigaciones que pretendan analizar ejemplos o contraejemplos del funcionamiento de las teorías o modelos, o que pueden ayudar a confirmar esos modelos en diferentes contextos o para desvelar lagunas en los modelos o teorías.

Sin embargo, no hemos localizado ninguna *reporting guideline* específica de *case report papers* en el área de *Management*. Consideramos que las (CARE) *guidelines* (Gagnier et al., 2013; Riley et al., 2017) específicas de las Ciencias de la Salud, precisan de una adaptación para ser útil en el área de *Management*.

### **Los *case report papers* en el área de *Business or Management research***

Como hemos comentado, los *case report papers* proporcionan evidencia de la efectividad de las prácticas o programas de gestión que se implantan en organizaciones reales, mientras que los artículos que muestran los resultados de experimentos proporcionan evidencias en contextos controlados (con situaciones manipuladas por las personas investigadoras). Por ello, ambas aportaciones se complementan

y son necesarias. En este sentido, los estudios de casos o investigación en acción, informadas a través de *case report papers*, permiten analizar implantaciones novedosas o poco frecuentes.

Los *case report papers* apenas son relevantes en la investigación del área científica de *Business/Management*, o rara vez son etiquetados como tales, lo que hace extremadamente difícil su localización y reutilización. Las estrategias de búsqueda sin una palabra clave (*keyword*) específica da lugar a muchos falsos positivos y muchos falsos negativos como veremos a continuación.

Una búsqueda realizada en Scopus a mediados de julio de 2021 con la expresión "case report" en título, resumen y palabras clave, dio como resultado más de dos millones y medio de artículos (Figure 1). Si filtramos subject areas Business, Management and Accounting, proporcionó 439 resultados (Figure 2). La mayoría de esos resultados son sobre experiencias de Ciencias de la Salud o Gestión Sanitaria. La mayoría de las publicaciones son posteriores a 2014 y se publican unos 40 artículos de este tipo al año.

Si nos centramos en lo que se publica en revistas clasificadas sólo en el área de *Business, Management and Accounting*, excluyendo las demás áreas, el resultado son 49 en todos los años indexados en Scopus (de los cuales, sólo uno publicado en los últimos cuatro años):

- TITLE-ABS-KEY("case report") AND ( EXCLUDE ( SUBJAREA,"MEDI" ) OR EXCLUDE ( SUBJAREA,"BIOC" ) OR EXCLUDE ( SUBJAREA,"NEUR" ) OR EXCLUDE ( SUBJAREA,"IMMU" ) OR EXCLUDE ( SUBJAREA,"DENT" ) OR EXCLUDE ( SUBJAREA,"HEAL" ) OR EXCLUDE ( SUBJAREA,"NURS" ) OR EXCLUDE ( SUBJAREA,"VETE" ) OR EXCLUDE ( SUBJAREA,"PSYC" ) OR EXCLUDE ( SUBJAREA,"ARTS" ) OR EXCLUDE ( SUBJAREA,"SOCI" ) OR EXCLUDE ( SUBJAREA,"AGRI" ) OR EXCLUDE ( SUBJAREA,"ENVI" ) OR EXCLUDE ( SUBJAREA,"ENGI" ) OR EXCLUDE ( SUBJAREA,"CENG" ) OR EXCLUDE ( SUBJAREA,"MULT" ) OR EXCLUDE ( SUBJAREA,"PHYS" ) OR EXCLUDE ( SUBJAREA,"CHEM" ) OR EXCLUDE ( SUBJAREA,"COMP" ) OR EXCLUDE ( SUBJAREA,"MATE" ) OR EXCLUDE ( SUBJAREA,"MATH" ) OR EXCLUDE ( SUBJAREA,"EART" ) OR EXCLUDE ( SUBJAREA,"ENER" ) OR EXCLUDE ( SUBJAREA,"ECON" ) OR EXCLUDE ( SUBJAREA,"Undefined" ) ) AND ( EXCLUDE ( SUBJAREA,"PHAR" ) ) AND ( EXCLUDE ( SUBJAREA,"DECI" ) )

Esta cifra contrasta con la popularidad de los *case reports* en medicina (casi dos millones y medio de resultados) o enfermería (más de 45.000 resultados) (Figure 3). Aunque es posible que muchos de estos resultados no encajen con las características de un *case report* que expondremos en este artículo. Ese sesgo de falsos positivos probablemente también existirá, y seguramente ampliado, en los exiguos 49 resultados del área de *Business, Management and Accounting*.

Si repetimos la búsqueda en WOS el panorama es muy similar. El área de *Business and Economics* presenta 626 resultados (unos 30 artículos por año en los años recientes). En esa cifra, realmente tenemos muchas publicaciones de ciencias de la salud, economía de la salud o gestión sanitaria. Si filtramos los resultados publicados en revistas que sólo estén clasificadas en el área de *Business and Economics*, la cifra se queda en 9 artículos en todos los años de cobertura de WOS. En cambio, en cualquiera de las subáreas de medicina que contempla WOS es fácil encontrar más de 30.000 resultados con esta búsqueda.

Si aprovechamos que WOS tiene una etiqueta específica de “case report” para *Document Type*, se puede observar que se trata de un tipo de documento con cientos de miles de resultados en cada una de las áreas de Ciencias de la Salud (Figure 4 y Figure 5). Estos resultados son publicados en revistas de Ciencias de la Salud (Figure 6).

Ninguno de los resultados está etiquetado como del área de *Management* y los 117 que están etiquetado en el área de *Operations Management* son todos falso positivo, en realidad son trabajos específicos de otras áreas (Figure 7).

## Métodos

Hemos seguido un proceso de cuatro fases para lograr un consenso sobre la guía adaptada. En la primera fase hemos buscado guías o recomendaciones sobre como escribir *case report papers* para extraer sus ítems. Tras la búsqueda hemos considerado que las *CARE guidelines* (Gagnier et al., 2013; Heart Views, 2017; Riley et al., 2017) constituían el mejor modelo disponible actualmente y el que goza de mayor consenso y reutilización en la comunidad científica (anexo A).

En la segunda fase, el primer autor de este artículo ha adaptado los ítems de las *CARE guidelines* para que tuvieran sentido en el contexto de investigaciones sobre *Management* (anexo B).

En la tercera fase, se consultó con personas expertas para refinar las *guidelines* adaptadas y proponer unas *case report papers guidelines*. Para esta tercera fase hemos contactado con personas que cumplían, al menos, uno de estos criterios: a) investigadores/as del área de *Operations Management* o *Human Resources Management* que hayan publicado artículos o informes profesionales relacionados con estudios de casos o investigación en acción; b) profesionales de organizaciones que hayan intervenido en una *action research* publicada en revistas o congresos científicos.

El contacto con las 29 personas participantes se realizó por medio de *email* donde se les explicaba el propósito de la investigación (generar recomendaciones específicas para el *case reporting*), se les daba instrucciones de participación y se les solicitaba su participación. 11 personas aceptaron colaborar y recibieron un documento con la definición de un *case report paper* y la *checklist* adaptada al campo de *Management*. Se les preguntó:

- 1) si, en su opinión, sobra o falta información relevante a incluir en un *case report paper*
- 2) las justificaciones para sus opiniones del punto 1
- 3) opcionalmente, su opinión sobre la iniciativa de fomentar el uso de *case reports paper*

Los autores del artículo agruparon las recomendaciones, las integraron y refinaron las recomendaciones valorando los motivos aducidos por las personas participantes en la fase 3. La versión refinada fue utilizada en la cuarta fase, que consistió en la comprobación del consenso sobre la versión refinada de la tercera fase. Para la cuarta fase hemos vuelto a contactar con las personas participantes de la tercera fase y también hemos aprovechado eventos académicos durante 2022 (“II Jornadas de Experiencias Docentes en Dirección de Operaciones”, vinculadas al entorno ADINGOR y “XIII Workshop de la Sección de Dirección de Operaciones y Tecnología de ACEDE (ACEDEDOT)”, congreso ACEDE) para presentar el borrador refinado de las *guidelines* y recoger las opiniones y propuestas de un colectivo amplio de personas que investigan en el contexto de Dirección de Operaciones y Gestión de Recursos Humanos. Las recomendaciones definitivas que presentaremos en la sección de resultados incorporan los comentarios recibidos.



## Resultados

Después de haber completado las cuatro fases, presentamos la propuesta refinada (Table 1).

Las principales recomendaciones realizadas han sido: la modificación de algunos términos o empleo de sinónimos (en especial pensando en evitar *false friend words* para personas no nativas inglesas); un mejor etiquetado de los títulos de los apartados para que representen mejor los contenidos; reubicación de algunos bloques de información en otras secciones o la creación de secciones específicas; mayor incidencia en la vinculación con la literatura científica publicada. Se puede comparar la versión original (Anexo A) o la primera versión adaptada (Anexo B) con la propuesta refinada (Table 1).

Las personas participantes consideran que haber reflexionado sobre este tema les ha resultado muy interesante.

En general, las personas participantes creen adecuado que el formato de *case report paper* sea una narrativa que ponga en contexto, y cuente la historia, del proceso seguido por la unidad analizada (persona, grupo, departamento u organización). Además, debe incluir las razones y motivos, tanto para las decisiones tomadas en la unidad de análisis como para las conclusiones académicas o profesionales que del case report se derivan (*take-away lessons*). Esto es relevante si se trata de un informe de un case study, pero mucho más si se trata de una acción reserach (en cuyo caso, se podrían incorporar bloques de información adicional específica de alguno de los 8 pasos de la metodología de action research (Alfarotanco et al., 2021; Marin-Garcia et al., 2018; Marin-Garcia et al., 2020)).

Es recomendable que el título sea breve, conciso y descriptivo. En este sentido, convendría que el título describa cual es el programa o fenómeno que centra el interés del *paper* (problemas, diagnóstico, intervenciones y/o resultados) e incluyera las palabras “*case report*”. Para facilitar la recuperación de estos trabajos en el futuro se debería incluir, además, como palabra clave “*case report paper*”

Los *case report papers*, desde el punto de vista profesional, se pueden considerar como informes de lecciones aprendidas a los que se añade una parte de contribución académica. En la sección de introducción se debería explicar con claridad por qué es importante leer el *case report paper*.

Es recomendable, en línea con (Gagnier et al., 2013) que se adjunte una “línea de tiempo” (o diagrama de Gantt), en forma de tabla o figura, donde se resalten cronológicamente y con detalle los principales hitos relacionados con el caso mostrado.

El nivel de detalle debe ser elevado para que sea informativo, pero esto debe equilibrarse con que la longitud del *case report paper* no sea excesiva, para que sea rápido y cómodo de leer. Se aconseja centrar los detalles en los aspectos mas relevantes del contexto y la intervención: historia reciente de la organización relacionada con el tema principal del *case report*, principales características de la organización (tamaño, sector, cultura, metodologías de gestión, *organizational constraints*, etc.), herramientas de diagnóstico empleadas y la justificación de su selección, los resultados del diagnóstico, las intervenciones y eventos principales en el seguimiento tras la intervención, etc. Se puede organizar la información adicional (detalles, diario de la intervención, tablas o figuras) en anexos o material suplementario para mantener el equilibrio entre información detallada (que permita la replicación paso a paso) y lectura ágil del documento.

Parece esencial que no solo se describa qué intervenciones se han realizado, sino también cómo se han realizado dichas intervenciones (duración, frecuencia, recursos invertidos y calendarización de los mismos, personas que han intervenido, roles, imprevistos y cómo se ha reaccionado a ellos, interrupciones, discontinuidades en el proceso de implantación, adherencia a los protocolos, cómo se ha medido esa adherencia, ...). Los resultados, tanto los previstos como los imprevistos deberían estar bien documentados.

En la parte introductoria se debería justificar el interés del caso para los potenciales lectores, la relevancia de los temas que se van a tratar o la frecuencia (prevalencia) de situaciones similares o el impacto para personas u organizaciones de los aspectos tratados.

El marco teórico se debería centrar en las soluciones que se han propuesto para situaciones como la planteada en la organización y su viabilidad o resultados esperados. Así como referencia a los trabajos previos relacionados con las decisiones que se tienen que tomar en la organización. Las limitaciones del conocimiento o investigaciones disponibles también deben ser puestas de manifiesto.

En el análisis del caso sería interesante describir como ha emergido la necesidad, o se ha comprobado la presencia o gravedad del problema, en la unidad de análisis; qué circunstancias han promovido o facilitado la situación; cómo se ha vivido la situación dentro de la organización; qué aspectos han ido influenciando las decisiones que se han ido tomando en la organización, etc.

Siempre que sea posible, se debe aportar datos de seguimiento durante un periodo de tiempo suficiente para poder valorar los resultados (o efectos no deseados) de las decisiones implantadas. La fijación de ese periodo no siempre es evidente y se debería aportar información que justifique la ventana de tiempo elegida.

Un aspecto importante y no siempre fácil de resolver, o equilibrar con la transparencia, es el anonimato o evitar la identificación de las empresas o participantes reales en el estudio si ellas lo desean así. Los aspectos de confidencialidad o evitar la difusión de acciones estratégicas de las organizaciones también pueden ser un aspecto complicado de resolver en algunos casos.

Es especialmente importante cuidar la terminología empleada. Es posible que las organizaciones utilicen una jerga o acrónimos propios (no siempre de uso común o generalizado fuera de la organización), o que empleen términos acuñados y conocidos, pero con una interpretación o significado diferente al que puedan darle en otras organizaciones o en la academia. Conviene incorporar un glosario con una definición concisa (breve y precisa) de los términos usados para identificar programas, prácticas o intervenciones.

En el apartado *time line* se debe comentar tanto las intervenciones o acciones del pasado, relacionadas con el asunto a tratar en el *case report paper*, como las acciones relacionadas con la intervención que se muestra en el *case report*.

El apartado de *diagnostic assessment* incluye aspectos de metodología (cómo se ha captado la información) y la interpretación (diagnóstico y pronóstico) que se hace con dicha información.

En principio, un case report paper siempre incluye una intervención, no solo un diagnóstico y un plan de acción. Sin intervención, estaríamos más cerca de un protocol paper (Marin-Garcia, 2021). Precisamente, describir la intervención y sus resultados es una parte esencial del case report. Sin embargo, es posible

que la “intervención” sobre la que se quiere informar sea acerca de cómo hacer el diagnóstico e identificar el problema. Siempre hay varias alternativas para hacer el diagnóstico y se puede analizar si otras opciones han fracasado en el pasado, o si nunca se había intentado. Por ejemplo, se puede analizar como intervención el hacer un diagnóstico con una *action research* (con investigadores implicados en el proceso) en lugar de hacerlo solo con personal de la organización o con personas que son consultoras pero no son investigadoras. Un *case report paper* siempre cuenta una manera de resolver un problema y como les ha ido. Tanto si ese problema es cómo hacer un diagnóstico o un plan de acción o las acciones derivadas del plan.

En la parte de discusión se puede describir los mecanismos que se cree que han actuado para lograr los resultados mostrados en el caso y si, en caso de haber recomendaciones de implantación para las prácticas, ha sido necesario hacer alguna excepción o adaptación de las recomendaciones.

También ha habido recomendaciones acerca de iniciativas que se podrían poner en marcha para fomentar la difusión de los *case report papers*. Por un lado, sería interesante mostrar un caso de ejemplo que se ajuste al máximo posible a estas recomendaciones (este caso también serviría como ejercicio para mejorar las recomendaciones si fuese necesario). Además, se podría plantear un taller de formación sobre como escribir un *case report paper* y complementarlo con recursos de auto-formación. Alternativamente a la formación se podría realizar algún evento o charla en foros específicos (como ADINGOR o ACEDEDOT) y en especial difundiendo su potencial como herramienta de aprendizaje para profesionales. Otra opción es proponer un *special issue* que sirva como evento de lanzamiento y ayude a consensuar criterios en un conjunto de artículos (que luego podrían servir como ejemplo, tal como se solicitaba en la primera sugerencia). También sería interesante hacer protocolos de los *case report*. En ellos, se explicaría cómo va a recoger los datos e incluso qué datos va a recoger y tener información comparable (Marin-Garcia, 2021) en colecciones de *case report papers* que compartan el mismo protocolo y permitirían integrar y construir conocimiento más fácilmente.

## Conclusiones

Los *case report papers* parecen tener un papel relevante en la investigación de Ciencias de la Salud desde hace tiempo. Este tipo de artículos constituyen una fuente de información para la identificación de nuevas ideas o de situaciones donde la realidad observada se comporta de manera diferente a los modelos establecidos (con resultados más positivos, o más negativos, de lo esperado). Pero, sobre todo, son un elemento importante para descubrir y difundir qué programas o prácticas funcionan y en qué circunstancias funcionan.

El proceso a partir del cual hemos generado nuestra propuesta presenta algunas limitaciones. La propuesta presentada representa el consenso logrado en un grupo concreto de personas participantes. Aunque hemos intentado tener diversidad en el panel (gente de academia y gente de empresa, especialistas en gestión de operaciones y especialistas en gestión de recursos humanos; personas senior y junior; perfil de administración de empresas y perfil de ingeniería), no están representadas todas las posibles variantes, ni podemos garantizar que sus opiniones sean representativas del colectivo al que pertenecen.

Tampoco podemos garantizar que, aún cumpliendo las recomendaciones mostradas en este trabajo, la investigación que se adhiera a estas *guidelines* aporte evidencias de causalidad. El objetivo de estas

*guidelines* es aumentar la calidad de *reporting* de la información de las investigaciones realizadas con métodos vinculados a la etnografía, independientemente de que eso pueda justificar, o no, la relación causa-efecto entre las intervenciones y los resultados.

Este trabajo se considera un primer paso que nos ha permitido destapar aspectos que pueden extenderse en investigación futura. En este sentido, sería interesante contar con ejemplos (y contraejemplos) detallados de aplicación de cada uno de los puntos de la *guideline* proporcionada. Tampoco conocemos actualmente cuáles son los hábitos de lectura científica de las personas responsables de gestión en las organizaciones y si el modelo de *case report papers* que aquí hemos mostrado serviría par satisfacer sus necesidades y acortar la brecha entre investigación y práctica profesional. Una posible línea de investigación futura podría ir por esta vía. Por último, podría ser de interés el analizar la adherencia a nuestras *guidelines* de una muestra de trabajos de etnografía (*case study* o *action research*) aplicada en el área de *Management*. Por ejemplo podríamos analizar artículos como (Claudio et al., 2021; Hamlin, 2002; Nino et al., 2020) (Suárez-Barraza & Miguel-Davila, 2020).

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