

日期

100年3月21日

內容摘要：

- (填寫說明：1. 如有附件請註明，如簡報檔、全文檔等
- 2. 需有問題與討論：請註明姓名並包含醫學倫理及EBM之應用
- 3. 需有總結，請註明做結論者【主持人】姓名
- 4. 請自行編排頁碼)

主題：Journal reading

地點：同心園會議室

時間：2011/3/20 08:30 - 09:30

主持人：王滄皓醫師

報告人：PGY 李卓泉

PGY 黃鴻育

紀錄：RI 許力云

Q and A:

1. Q. CR 李尚：Many patients with Dizziness/Vestigo had what prob.

A. RI 周光緒：May have vascular event.

2. Q. CR 李尚：Readmission pattern most?

A. RI 許力云：Mostly ischemic disease

3. Q. FI 王碩皓：Cerebral event vs Cardiac event

A. RI 游世寧：Cerebral > Cardiac

4. Q. CR 李尚：the percentage of vascular event?

A. RI 周光緒：1st month cerebral > cardiac
1st month vs later no difference

5. Q. CR 李尚：Dizziness common in male/female?

A. RI 游世寧：Female

6. Q. FI 王碩皓：The excess risk of early CVA.

A. RI 許力云：old age.

7. Q. CR 李尚：ABCD 2 score for TIA

A. RI 周光緒：
Age Blood pressure Clinical presentation
Duration diabetes

內容摘要 (續):

8. Q. CR 指數: ABCD₂ score related to

A. R 指數 = TIA 7 ischemia change risk

9. Q. 非至性眩暈: ABCD₂ score 4 really correlated to ischemic stroke

A. R 指數: not really related to the high risk ischemic stroke -

10. Q. 非至性眩暈: ABCD₂ score use to where

A. R 指數: The image study could not easily reach.

(EBM and ethic issue)

1. Q. The more CVA risk pose dizziness in 1st month
A. R 指數: The first one month

2. Q. The more dizziness refer to gender?
A. R 指數: Female

3. Q. ABCD₂ for what?
A. R 指數: for TIA risk evaluation

(Key point and US comment)

非至性眩暈:

1. The first month of dizziness went home is high risk for vascular event

2. The dizziness patient should not went home without risk evaluation

3. ABCD₂ score could use to evaluate TIA patients. at ER

紀錄: R 指數