

日期	100 年 4 月 23 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)	
時間：100 年 4 月 23 日 08:30 ~ 09:30	
主題：Case conference	
主講者：R2 翁英洲	
主持人：楊毓錦 醫師	
地點：A111 室	
記錄：R1 許弘立	
Q and A	
1. Q-CR 曾理銘：What is your impression in this case.	
A. R1 許弘立：They have some occult infection	
2. Q-CR 曾理銘：What we did not do in the PE	
A. R1 許弘立：We should do muscle power test more accuracy.	
3. Q-CR 曾理銘：What cause this pt to have drowsiness?	
A. R1 許弘立：May due to Intra-cranial lesion or infection	
4. Q-CR 曾理銘：What we found in Brain-CT	
A. R1 許弘立：Hypo-dense lesion in occipital region	
5. Q-CR 曾理銘：How about Contrast-Enhancement CT.	
A. R1 許弘立：Look like abscess formation	
6. Q-CR 曾理銘：Brain abscess look like?	
A. R1 許弘立：Ring enhancement	
7. Q-CR 曾理銘：Brain tumor look like?	
A. R1 許弘立：May contain necrosis & central necrosis	
8. Q-VS 楊毓錦：Why did this pt not perform liver function	
A. R1 許弘立：May due to old age and clinical disease like	
9. Q-VS 楊毓錦：Why does this pt have liver ascites	
A. R1 計弘立：May due to prior procedure related	

內容摘要(續):

10. Q CR管理: How could we diagnosis of brain abscess?

A. Int 答案: My perform contrast-enhanced CT Scan (TBM and ethic issue)

1. Q CR管理: In old age pt. If we still sus of malignity

A. RI 請教: Should we do liver puncture?

2. Q CR管理: Brain abscess cause?

A. RI 請教: May from unknown origin

3. Q US 治療: What antibiotics we should choose?

A. RI 請教: It depends on the cause of brain abscess

(VS comment)

1. VS 治療: We should confirm the cause of brain abscess and choose right abx

2. VS 治療: Surgical intervention when infection could

3. VS 治療: Not fully control. (brain, encapsulated) Mostly preferred needle aspiration

29 錄: RI 39762