

日期	101 年 02 月 11 日
<p>內容摘要：</p> <p>(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)</p> <p>時間:2012/02/11 08:30~09:30 地點:同新園會議室 主持:VS 吳柏衡 報告:R2 吳志華, Int 章忠謨 紀錄:R2 許力云</p> <p>【Q and A】</p> <p>Q1. CR 李 尚:What is the most rhythm noticed at cardiac arrest? A1. R2 許力云:PEA and asystole Q2. CR 李 尚:What is EE at OHCA A2. R1 羅志威:emergency echocardiography Q2. CR 李 尚:What should EE performed by? A2. R2 許哲彰:The cardiologist Q3. CR 李 尚:EE was performed during? A3. R2 游姿寧: a rhythm and pulse check Q4. CR 李 尚:How many percent cardiac arrest patient received EE? A4. R2 周光緯: 23.8% had cardiac movement on the first EE and 16.7% had cardiac movement on every EE Q5. CR 李 尚:EE is for detect? A5. R2 游姿寧: Sonographic evidence of cardiac kinetic activity as any detected motion of the myocardium Q6. CR 李 尚:What is the limitation of the study? A6. R2 許力云: No videotape the ultrasound scanely small sample size. Q7. CR 李 尚:how many percent has cardiac activity? A7. R1 羅志威: Ten patients (23.8%) had cardiac movement on the first EE and seven patients (16.7%) had cardiac movement on every EE Q8. CR 李 尚:What is the primary outcome of the second study? A8. R3 林逸婷: Primary outcome was in-hospital mortality Q9. CR 李 尚:What is the secondary outcome? A9. R3 許哲彰: Secondary outcomes were the rate of transfer or upgrade of patients to an ICU setting and total hospital LOS</p>	

內容摘要：

Q10.CR 李 尚:The conclusion of the paper?

A10.R2 游姿寧: Emergency department boarding was associated with higher inpatient mortality rates and longer hospital length of stay in this hospital.

【EBM and ethics】

Q1:CR 李 尚: The EE use in OHCA is for what?

A1:R2 周光緯: To improve the detection of the cardiac activity at CPR

Q2:CR 李 尚: We use the EE in OHCA to check pulse because?

A2:R1 羅志威: hand palpation is sometimes not precisely enough

【Key point】

- 1.EE use in CPR is a powerful tool
2. Employing an easy-to-use device as a highly reproducible predictor of survival in cardiac arrest patients would be of high value for the EP deciding whether to continue resuscitative efforts.
3. Emergency department boarding was associated with higher inpatient mortality rates and longer hospital length of stay in this hospital.

【VS comment】

VS 吳柏衡: Employing an easy-to-use device as a highly reproducible predictor of survival in cardiac arrest patients would be of high value for the EP deciding whether to continue resuscitative efforts. Such as EE is a good tool in CPR for cardiac activity detection.