#### 日期

## <u> 2012 年 07 月 09 日</u>

#### 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:2012/07/09 08:30~09:30

地點:同新園會議室

主題:Case conference 主持者:Fellow 趙劭倫

報告者:PGY 汪郁榮 紀錄:R3 許力云

{Q and A }:

Q1. CR 蘇鋕鋒: The main problem of this case?

A1.R2 羅志威: Central AVM

Q2.CR 蘇鋕鋒:What is AVM grading?

A2.R2 羅志威: By size location and venous drainage

Q3. CR 蘇鋕鋒: The goal of AVM treatment?

A3. R2 張政霆:To prevent further bleeding..

Q4.CR 蘇鋕鋒:Why the 12 patients died within 12 hours of hypothermia

A4.R3 周光緯: May be due to the expansion of hypothermia protocol to asystolic >15 min

Q5.CR 蘇鋕鋒: Outcomes related to the use of IATH

A5. R3 許力云: Mortality, Neurological status, Cardiac function ROSC rate

Q6.CR 蘇鋕鋒:Why decreased metabolism was noted in hypothermic patients

A6.R2 張政霆: Patient age and renal function were related to time to extubation

07.CR 蘇鋕鋒:in this case headache caused?

A7. R2 羅志威: AVM with intra-cranial bleeding.

Q8. CR 蘇鋕鋒: Previous headache history?

A8. R2 張政霆: Making sedation or anesthesia a contraindication

Q9.CR 蘇鋕鋒:The study did not evaluate the case with?

A9.R2 羅志威: This study did not evaluate the pneumonia (VAP or HAP) and APACHE II score

Q10.CR 蘇鋕鋒:The limitation of the study?

A10. R3 許哲彰: Patient denied any recent trauma or fever

## {EBM and ethics}:

- Q1. CR 蘇鋕鋒: Widened pre-vertebral soft tissue shadow?
- A1. R3 許哲彰:
- a. > 7 mm at C2 vertebra
- b. > 14 mm at C6 vertebra below 14 years
- c. > 22 mm at C6 vertebra above 14 years
- Q2. CR 蘇鋕鋒: What the guideline use for AVM?
- A2. R3 許哲彰: long-standing tobacco use, chronic alcohol consumption, prior head and neck radiation or chemotherapy for non-head and neck malignancy or for leukemia or lymphoma, and bone marrow transplant or organ transplant

## {Key points}:

- 1. Widened pre-vertebral soft tissue shadow
  - a. > 7 mm at C2 vertebra
  - b. > 14 mm at C6 vertebra below 14 years
  - c. > 22 mm at C6 vertebra above 14 years
- 2. Cooling to body temperature below 35°C by using non-invasive surface cooling is feasible and safe in healthy, conscious, mildly sedated volunteers.
- 3. AVM should be ddx in patient with headache

# {VS comment}:

Fellow 趙劭倫:Symptoms that cannot be fully explained by local findings require assessment to rule out CNS pathology

- Consult neurologist
- Brain CT
- MRI of the brain
- lumbar puncture

紀錄: R3 許力云