

日期 2012 年 11 月 19 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：2012/08/09 08:30~09:30

地點：同新園會議室

主題：Journal Meeting

報告者：Int 陳詩宇

主持者：VS 王瑞芳

紀錄：R3 許力云

Q and A：

- Q1. VS 王瑞芳：The main purpose of the first paper?  
A1. R3 許哲彰：Cardiopulmonary arrest VS Hyperfibrinolysis  
Q2. VS 王瑞芳：no pulse what should we do?  
A2. R3 周光緯：CPCR immediately  
Q3. VS 王瑞芳：The use of neck soft tissue x-ray in epiglottitis?  
A3. R1 陳穎玲：Severity of hyperfibrinolysis associated with the degree of shock and hypoperfusion  
Q4. VS 王瑞芳：When Hyperfibrinolysis?  
A4. R3 周光緯：Definition: maximum lysis of the clot of >20% within 60 min following initiation of rotational thromboelastometry in the EXTEM channel  
Q5. VS 王瑞芳：the use of bosmine frequency  
A5. R2 羅志威：q3 mins  
Q6. VS 王瑞芳：patient group?  
A6. R3 許哲彰：在平日白天的急診，40-74 歲有 ACS 症狀的患者。  
Q7. VS 王瑞芳：A significant part of OHCA patients?  
A7. R3 周光緯：develop hyperfibrinolysis, in particular in case of signs of hypoperfusion  
Q8. VS 王瑞芳：The patient in case 1 present of airway compromised what should we do?  
A8. R3 周光緯：ask the ENT doctor to visit the patient in ER?  
Q9. VS 王瑞芳：Body temperature, a confounding factor?  
A9. R3 周光緯：Degree of hyperfibrinolysis: how to determine.  
Q10. VS 王瑞芳：The use of solumedrol dosage in anphylaxis patient?  
A10. R2 羅志威：Hyperfibrinolysis vs mortality and morbidity.

內容摘要：

{EBM and ethics}

Q1.VS 王瑞芳：Etomidate is associated with mortality and adrenal insufficiency in sepsis: A meta-analysis?

A1.R3 許哲彰：Long term effects of etomidate not been evaluated yet?

Q2.VS 王瑞芳：The good use for TRM?

A2.R2 羅志威：to improve clinical care quality.

{Key points}

1. To evaluate the effects of single-dose etomidate on the adrenal axis and mortality in patients with severe sepsis and septic shock
2. reduce risk in ER
3. improve team atmosphere

{VS comment}

VS 王瑞芳：

Etomidate in pt with sepsis associated with higher mortality (1.2X) and AI Etomidate should be warranted when in use .

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