

日期	_102_年_01_月_09_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>會議名稱：case conference 會議記點：同心園會議室 報告者：R1 陳穎玲 主持人：CR 林逸婷 /VS 楊毓錚</p> <p>Q1 CR 林逸婷：low abdominal pain in male? A1 R2 羅志威：must exclude ruptured AAA firstly Q2 CR 林逸婷：anemia and acute renal failure? A2 R1 林吉倡：renal function deterioration may induce but should also consider occult GI bleeding Q3 CR 林逸婷：possible cause of hypokalemia in this patient? A3 R3 周光緯：poor intake plus renal loss Q4 CR 林逸婷：first step in differentiation of hypokalemia? A4 Clerk 徐詩雯：decide acid-base status and random spot urine K/crea ratio Q5 CR 林逸婷：how to correlate between low back pain and UTI? A5 R1 林吉倡：psoas muscle abscess must be put into consideration Q6 CR 林逸婷：potential cause to decreased lower limbs muscle power in this patient? A6 R3 許力云：vertebral abscess caused neural injury Q7 CR 林逸婷：indication of image study in this patient? A7 R3 許哲彰：survey cause of low back pain and unexplained lower limbs muscle power decreased Q8 CR 林逸婷：most feared complication of hypokalemia? A8 R1 林吉倡：cardiac arrhythmia Q9 CR 林逸婷：how to manage para-vertebral abscess? A9 R2 羅志威：consult surgeon for surgical drainage Q10 CR 林逸婷：possible cause of death of this patient? A10 R3 許力云：sepsis induced multiple organ failure</p>	

內容摘要 (續):

<ethic topic>

1. poor family support and self care may precipitate the disease process of this patient
2. We often focused on the visible problem (amputation wound pain) rather than other potential but possible more life-threatening problem (psoas muscle and pre-vertebral abscess)
3. Is early surgical intervention will alter the prognosis of this patient or not?

<EBM review>

1. Vancomycin, fluoroquinolone or carbapenem may be choice of antibiotics treatment in psaos muscle abscess
2. Do not use sciatica routinely to explain low back pain complaint
3. K.pneumonia is important pathogen in DM patients in Taiwan

<VS comment>

1. The age of patient will determine thinking process in low back pain differential diagnosis
2. ED physician should decide the most adequate disposition for patient
3. hematogeneous spread may explain the concomitant pre-vertebral and psaos muscle abscess of this patient

<Key point>

1. remember to collect urine sample for hypokalemia survey BEFORE you starting to correct it
2. keep psaos muscle abscess in mind when unexplained low back pain and fever
3. Try to use a single disease process to explain the whole symptoms and sings in a patient

記錄 R4 徐英洲