

日期

107年4月8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)

Case conference

同新園會議室

時間: 0830

報告: 吳冠蓉

Supervisor: 許璉文

<Q&A>

Q (VS 許璉文): SOB & DRx

A (R. 吳冠蓉): Heart, lung, metabolic, infection

Q (VS 許璉文): shock & DRx

A (R. 鄭凱文): Hypovolemic, Cardiogenic, Septic, Anaphylactic.

Q (VS 許璉文): pulmonary embolism ECG finding

A (R. 劉邦元) ^{EBM} 最常見: sinus tachycardia
典型: S1Q3T3

Q (VS 許璉文): Pulmonary embolism gold standard

A (R. 劉邦元): Angiography

Q (VS 許璉文): Pulmonary embolism & risk factor

A (R. 吳冠蓉): Recent surgery, OCP, cancer, bedridden.
長途旅行

Q (VS 許璉文): Pulmonary embolism CXR finding

A (R. 施廣榮): Hampton's hump, Westermark sign

Q (VS 許璉文): Indirect sign of pulmonary embolism

A (R. 吳冠蓉): peripheral Duplex, Heart echo
LDV,
(RV:LV > 0.6:1)

內容摘要 (續):

(Q (VS 許璣文): Pulmonary embolism score

(A (R, 鄭凱文): Wells score, Geneva score

(Q (VS 許璣文): Pulmonary embolism detection

(A (R, 吳冠蓉): Massive: SBPC 90 mmHg for >15 minute, inotropic usage
Submassive: SBP >90 mmHg. RV dysfunction or myocardial necrosis

(Q (VS 許璣文): Pulmonary embolism Heparin dosage

(A (R, 鄭凱文): 80 ^{unit} /kg IV bolus + 18 unit/kg/hr

Conclusion (VS 許璣文): 當想到 pulmonary embolism 時, Risk factor (Cancer, Travel, Op, VCP) 要記得問

紀錄者: 吳劉邦凡

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