日期	2014年10月23日

內容摘要：Morbidity & Mortality.

（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
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六大核心能力
- ☑病人照護 ☐人際溝通技能
- ☐醫學知識 ☑從工作學習及成長
- ☐專業素養 ☐制度下之臨床工作

(QQA) 主持：Cr羅、VS陳國智　報告：R2鄭凱文、R1蔡可成

Q1 VS陳國智：How was thumper used during September?

R2鄭凱文：Thumper used 55% which was increased C/W last month (>50%). However, better ROSC rate and survival event was also noted by hand rather than ROSC.

Q2: 1st case　40F.

Q3 VS陳國智：What was the final cause of mortality in this case?

R1蔡可成：Thyroid storm.

Q3 VS蔡宇承：How accurate was thyroid function test?

R1蔡可成：Thyroid function values in TSH & Free-T4 is not directly related to the incidence or definition of thyroid storm.

Q4. Cr羅志威：What are the causes of thyroid storm.?

R1林哲葦：Acute stress causing catecholamine release → leading to increased sensitivity and increased thyroid hormone release.

Q5. Cr羅志威：What are the factors of Thyroid storm?

R1蔡宇承：Thyroid or non-thyroidal surgery; Trauma; infection, excess iodine load, Parturition

Q6. VS陳國智：What was important about the Dx of Thyroid storm.?

R2施膺泰：Thyroid storm is a clinical dx, not dependent on lab data.

Q7. VS陳國智：What was the point of tx of thyroid storm?

R2鄭凱文：Not only tx of thyroid storm, but identify & tx underlying acute stress is just as important.

Q9 Cr 羅: what other co-morbidities occured during
羅志成 this pt's prolonged hospital course?

R2 李: Multiple organ failure including AKI was noted.
李岱穎

Q9: ~~Cr~~ Cr 羅: How was such comorbidity related to
羅志成 certain in-hospital event in this case?

R2 鄭: whenever there was an ~~CPCR~~ CPCR stp
鄭凱文 ROSC, the longer the ischemic time, the poorer
outcome and increased comorbidity.

Q10 Cr 羅: was the patient successfully discharged without
羅志成 much ~~poor~~ sequale?

R2 李: The patient was discharged without neurological
李岱穎 outcome and improved neural function.

Q&A

VS 陳 陳國智
Q1. what were the major systems effected by thyroid storm?

Cr 羅: CV and GI systems with s/s such as tachycardia, CHF,
羅志成 hypotension; severe nausea, vomiting & diarrhea

Q2 VS 陳 陳國智 what was the mortality rate of pt with thyroid storm?

R1 蔡: mortality rate as high as 10 ~ 30 %.
蔡宇承

Q3 VS 陳: what were the choices of drug used for tx of
陳國智 thyroid storm?

R1 李: PTU, Methimazole, Inderal, Iodine (Potassium iodide), Hydrocortisone.
李岱穎

內容摘要（續）：

Key point

羅 (1) thyroid storm 為臨床診斷，看出症狀 keep in mind.

羅志威 (2) 不用等抽血出來就可治療

(3) Thyroid storm 要有一個 acute stress，所以不要去治療 thyroid storm，也要找出 stress 並治療.

VS command

Dr 陳 (1) stability 放；use multiple drugs for thyroid storm Tx.

陳國智 (2) Always keep the dx of thyroid storm in mind, especially in critical pt with multiple acute stress factors.

(3) Avoid & prevent complications and commorbidities in ~~code~~ critical pt for better outcome.

R1

紀錄者：

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