

# 起手式



STEP 1

題目發想



STEP 2

熟悉主題



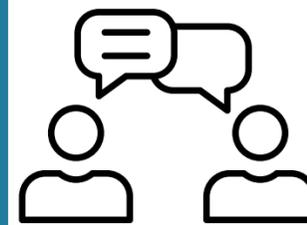
STEP 3

資料整合



STEP 4

論文寫作

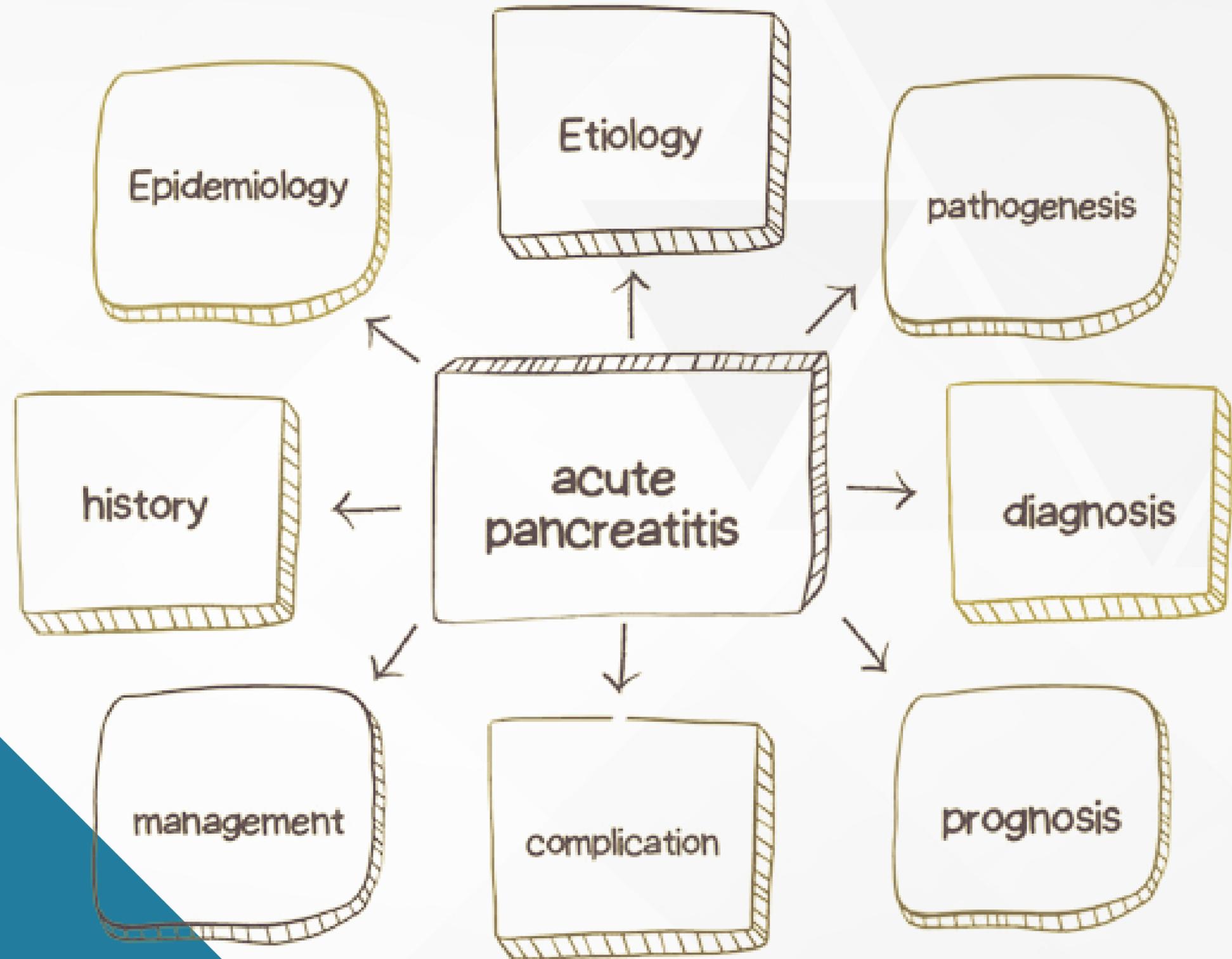


STEP 5

回覆Reviewer

# 熟悉主題

對於疾病的所有面向都應該了解



# 熟悉主題

對於疾病的所有面向都應該了解



Acute Pancreatitis in Adults > Hospitalist Focused Content

Overview and Recommendations	>
Algorithms	
<b>Hospitalist Focused Content</b>	▼
Admission Checklists	>
Treatment Setting	
Consultation and Referral	
Discharge Planning	
Discharge Checklist	>
Background Information	>
History and Physical	>
Diagnosis	>
Management	>
Complications and Prognosis	>
Prevention and Screening	>
Guidelines and Resources	>

## Hospitalist Focused Content

This content is supported by a combination of the best available evidence and expert opinion put forth by members of our [Hospitalist Panel](#).

### Admission Checklists

#### General Admission Checklist

- Determine code status
- Establish IV access
- Determine appropriate treatment setting
- Diet should be nothing per mouth (NPO) on admission
- Consider deep vein thrombosis (DVT) prophylaxis if indicated ([Chest 2012 Feb;141\(2 Suppl\):e195S](#))
- Communicate with the outpatient primary care clinician to obtain:
  - Outpatient advanced directives
  - Problem list
  - Reconciled medication list
  - Medical and surgical history
  - List of other healthcare clinicians involved
- Engage in collaborative care management with the primary care clinician during hospital stay

Find In Topic Enter term ^ v x

條列式整理

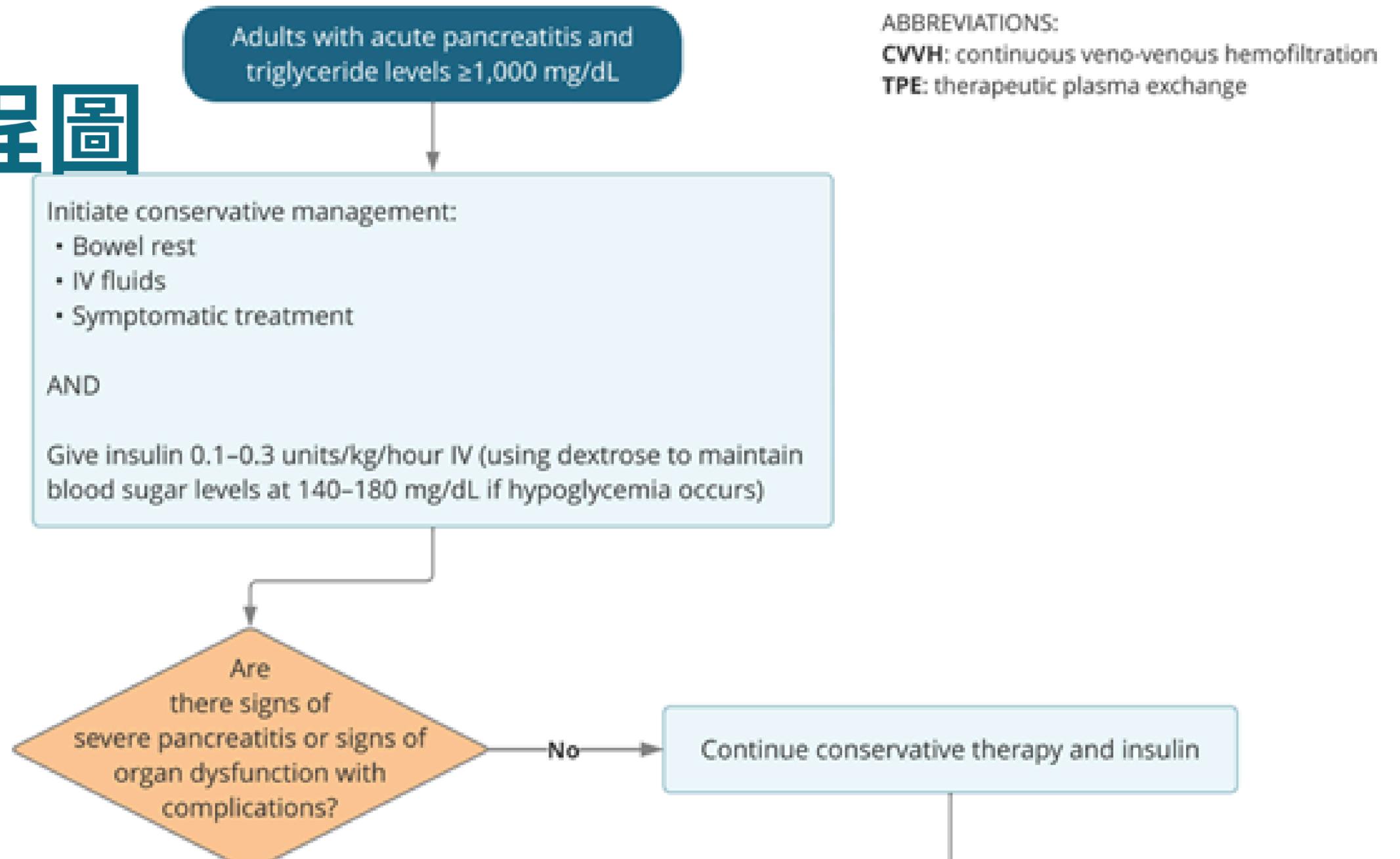
從頭到尾念完，不需要花太多時間

# 預立醫療流程圖

疾病、症狀、技術  
(Dynamic Health) 三個面向均涵蓋



## Acute Hypertriglyceridemic Pancreatitis in Adults - Management



圖型設計與衛福部規定相同，學習 DynaMed 版本來製作



資料整合 DynaMed®

與夥伴分工合作開始在  
其他數據庫找尋相關性  
的文章，並做整理

此作者與研究夥伴共找到九  
篇相關性較高的文章

# 資料整合 - Secondary Outcome

≡ DynaMed

RW

Acute Pancreatitis in Adults > Complications and Prognosis > Prognosis

- Overview and Recommendations
- Algorithms
- Hospitalist Focused Content
- Background Information
- History and Physical
- Diagnosis
- Management
- Complications and Prognosis
  - Complications
  - Prognosis
  - General Prognosis
  - Prognostic Scoring Systems
  - Other Prognostic Factors
- Prevention and Screening

## Prognosis

### General Prognosis

- mild acute pancreatitis typically resolves in a few days<sup>6</sup>
- 15%-20% develop complications<sup>3</sup>
- clinical factors that appear associated with more severe course include
  - age > 55 years
  - obesity (BMI > 30 kg/m<sup>2</sup>)
  - altered mental status
  - comorbid disease
  - systemic inflammatory response syndrome (SIRS)
  - > 2 of the following - pulse > 90 beats/minute, respirations > 20/minute or PaCO<sub>2</sub> > 45 mm Hg, temperature > 38 °C or < 36 °C, WBC count > 12,000 cells/mm<sup>3</sup> or < 4,000 cells/mm<sup>3</sup>, or > 10% immature neutrophils (bands)
  - blood urea nitrogen (BUN) > 20 mg/dL
  - rising BUN
  - hematocrit > 44%
  - rising HCT
  - elevated creatinine
  - x-ray findings of pleural effusions, pulmonary infiltrates, or multiple or extensive extrapancreatic collections

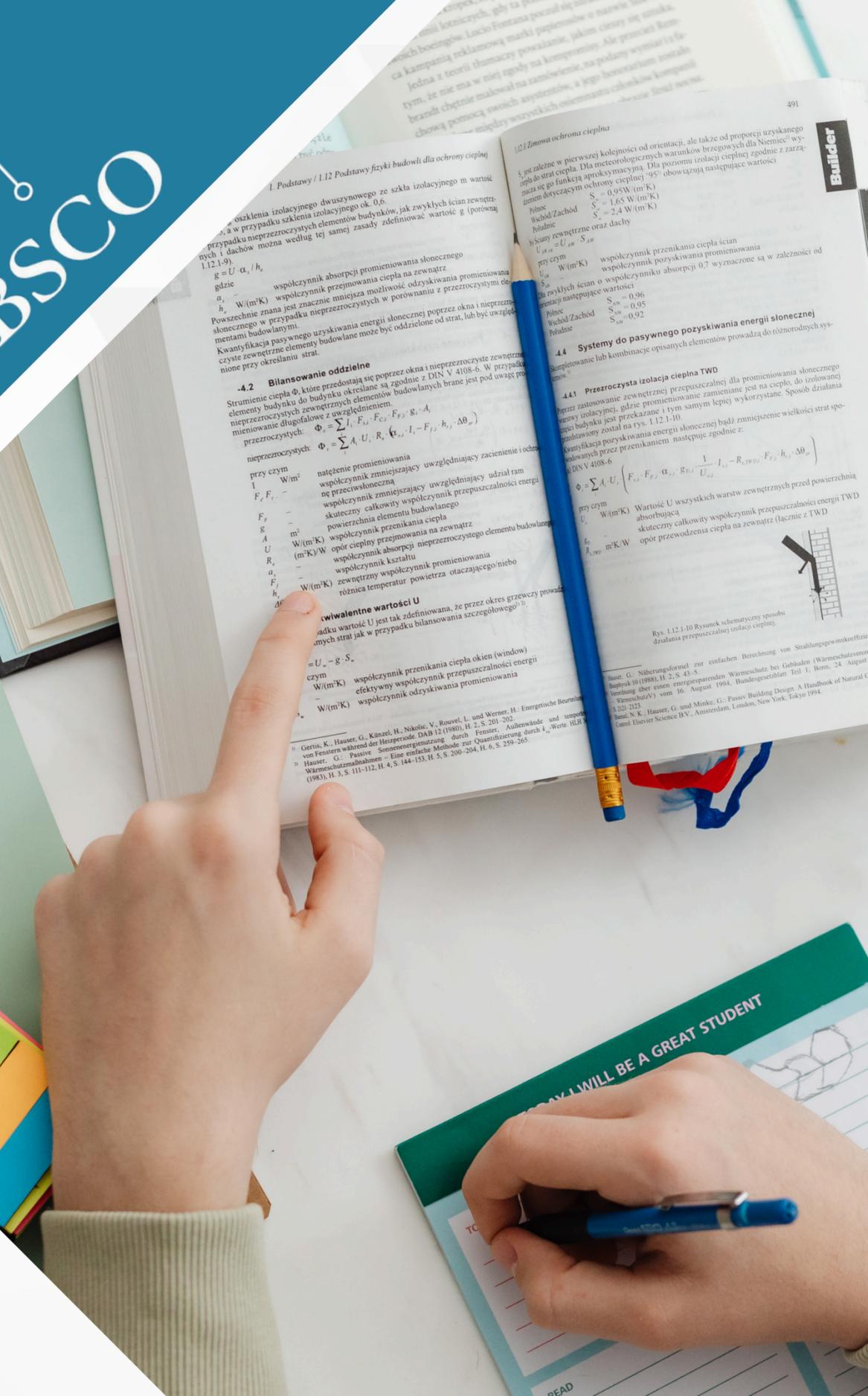
BUN、rising BUN 均為 Prognosis Factors 可用來作為預測病人是否會進入 more severe course的狀態 作者用這一點來做為 Secondary Outcome，來豐富研究的架構及確認數據的重要性

# 論文寫作

## 最簡單的一步

- 起、承、轉、合
- 請教科內的學長、姊、老師
- 詳細列出reference、更容易讓人相信這是客觀的觀點，並非出自於個人意見
- 在DynaMed中，可輕易找到很多寫作素材跟可用的Reference

DynaMed®  
EBSCO



# 回覆Reviewer

Reviewer質疑

利用APACHE II 來做連續性的比較變項，似乎並不適合？是否利用SOFA或是MODS比較適合？



# 回覆 Reviewer - APACHE II

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RW

CME 57

Acute Pancreatitis in Adults > Complications and Prognosis > Prognosis > Prognostic Scoring Systems

- Overview and Recommendations
- Related Topics
- Hospitalist Focused Content
- Background Information
- Epidemiology
- Etiology and Pathogenesis
- History and Physical
- Diagnosis
- Management
- Complications and Prognosis**
  - Complications
  - Prognosis
    - General Prognosis
    - Prognostic Scoring Systems**
    - Other Prognostic Factors

## Prognostic Scoring Systems

- several prognostic scoring systems have been developed to assess prognosis in acute pancreatitis, however, in clinical situations, their utility may be limited<sup>1</sup>
- World Congress of Emergency Surgery consensus guidelines on acute pancreatitis recommend bedside index of severity in acute pancreatitis

organ failure, as well as APACHE-II score (more complex), although no evidence of any prognostic score superior (World Emergency Surgery 2019;14:27)

### STUDY SUMMARY

insufficient evidence to determine superior predictive abilities between Pancreatitis Outcome Prediction (POP), Sequential Organ Failure Assessment (SOFA), bedside index of severity in acute pancreatitis (BISAP), Ranson criteria, Acute Physiology and Chronic Health Evaluation II (APACHE II) score and other clinical severity scores in adults with acute pancreatitis

SYSTEMATIC REVIEW: Ann Intern Med 2016 Oct 4;165(7):482

[Details](#)



Table 1. Common Prognostic Scoring Systems for Patients With Acute Pancreatitis

- Ranson score (see DynaMed calculator for [Ranson Criteria](#))

Ranson score is derived from 11 clinical and laboratory criteria with different cut-

在 DynaMed 直接搜尋 APACHE II，就可找到許多相關性資料

若在 Acute Pancreatitis 主題內搜尋 APACHE II，在 Prognostic Scoring Systems 中，可看到已經有研究者用過 APACHE II Score 來做評估



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## 結論

DynaMed是好幫手，強大實證基礎，學習使用DynaMed，快速理解，"效率"才是重點。

利用DynaMed找靈感，不用很厲害才能開始，而是一邊做一邊變強。

專為回答臨床問題所設計的臨床實證工具，24/7不斷更新。

預立醫療流程圖輕鬆完成。

Dyna AI 輕鬆好上手