

本週值班 VS :
8/22-26 楊省三醫師
8/27-28 劉威廷醫師

Weekly Schedule of NCKUH Dermatology Department (2022.08.22~2022.08.28)

製表 : R4陳萱/ VS楊朝鈞

| 星期 | 日期 | 時間 | 活動 | Case of the week |
|----|-------|--|--|--|
| 一 | 08/22 | 8:00-9:00 | | |
| 二 | 08/23 | 08:00-09:00 | ※ 臨床病例討論會: 1. Antiseptic related ichthyosiform irritant contact dermatitis 2. Lupus erythematosus panniculitis-induced facial atrophy, effectively treated with hyaluronic acid fillers ※ 出院病例討論會 | R1曾怡倫(視訊會議)【全科人員】 VS 李玉雲 VS 許釗凱 R1賴奕慈(視訊會議)【全科人員】 |
| 三 | 08/24 | 08:10-09:00 12:00-13:00 13:00-15:00 15:00-17:00 | ※ 住診教學 VS 廖怡貞 (11B討論室) 【Clerks, PGYs, Rs】 ※R1 orientation: 皮膚科常見的外科手術 VS何英右 ※ 臨床病理討論會 (括弧內為討論重點) 1. Skin, gluteal fold, left; excision: Consistent with fibroepithelioma of Pinkus, ulcerated (Clinicopathology of fibroepithelioma of Pinkus) 2. Skin, lower lip; biopsy and DIF: Vacuolar interface dermatitis with thickened basement membrane zone, compatible with lupus erythematosus. (Clinicopathology of lupus erythematosus over lip) 3. Skin, abdomen, right; biopsy: Psoriasiform dermatitis with subcorneal pustules. (Clinicopathology of pustular psoriasis) 4. Skin, calf, right; biopsy: Compatible with pyoderma gangrenosum. (Clinicopathology of pyoderma gangrenosum) 5. DIF study reveals IgG(2+) and C3(1-2+) linear staining along the dermo-epidermal junction, and all negative findings for IgA and IgM. (A case of bullous pemphigoid with eosinophils line up at the dermoepidermal junction) 6. Skin, left dorsal hand, biopsy: Compact knuckle pad (Cinicopathology of knuckle pad) | VS趙曉秋 VS杜威廷 VS李兆甯 VS杜威廷 VS廖怡貞 R陳萱 R2 葉芮彤 / VS 李玉雲 (視訊會議)【全科人員】 |
| 四 | 08/25 | 08:00-09:00 | ※ NP衛教: 一般傷口及術後傷口護理 NP鳳吟/R3黃信奮/VS 廖怡貞 (視訊會議)【全科人員】 ※ PGY seminar: 1. Mosaicism in skin disease: A curse or a blessing 2. Effect of DPP4i and SGLTi on patient with psoriasis and Type 2 DM - A systemic review | PGY2侯秉宸/VS廖怡貞(視訊會議)【全科人員】 PGY1鄭宇宸/VS 李兆甯(視訊會議)【全科人員】 |
| 五 | 08/26 | 08:00-09:00 | ※ 住院醫師讀書會: Fitzpatrick 9e Ch.140, 142, 146 | R4陳麒亘 / R4陳萱(3F門診討論室)【Rs】 |
| 六 | 08/27 | | ※ 值班主治醫師查房 | |
| 日 | 08/28 | | | ※ Answer for the last week's case: subcutaneous sarcoidosis |