



臺北醫學大學附設醫院
TAIPEI MEDICAL UNIVERSITY HOSPITAL

與大師對話

2018/04/17

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台北醫學大學附設醫院影像醫學部 藍功堯 主任 / 江曄 住院醫師

規則

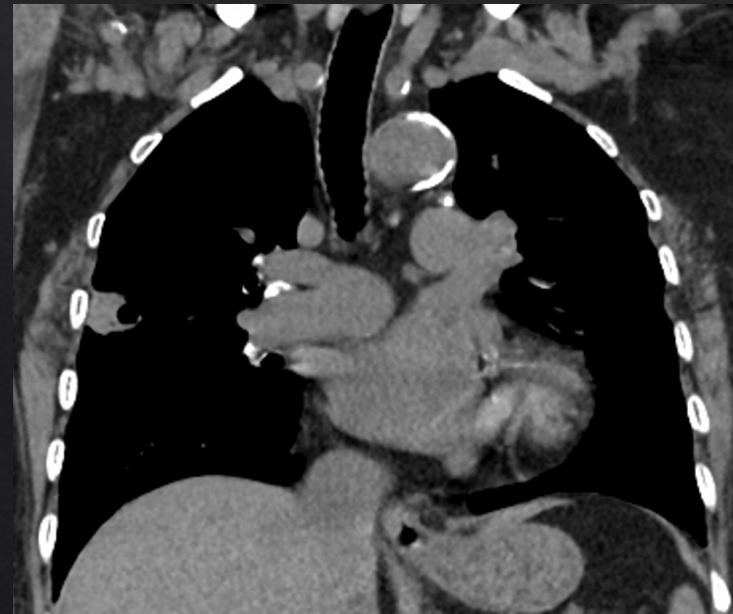
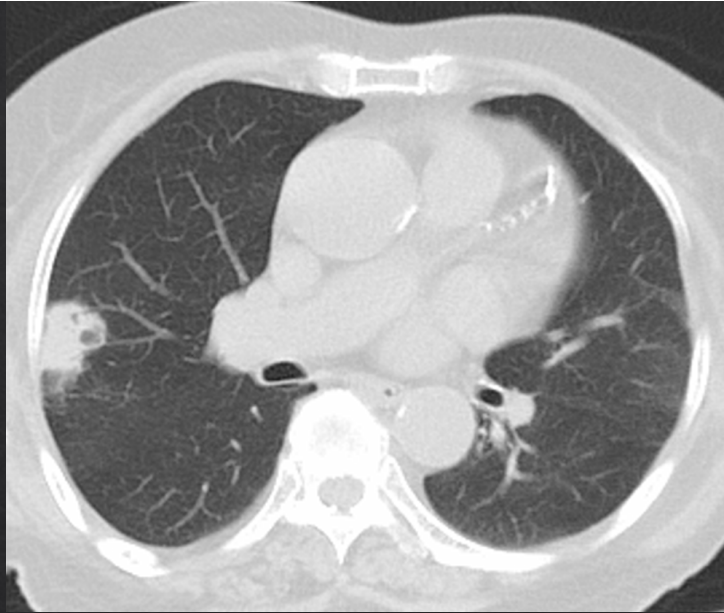
- ◆ 依照臨床時序，請大師模擬一線放射科醫師；於未知診斷，或者有限度臨床線索之情形下，進行閱片及解讀。
- ◆ 鑑別診斷為主要，確定診斷為次要。
- ◆ 目的在於學習大師之影像判讀邏輯思考。
- ◆ 針對胸腔影像判讀。
- ◆ 大師評論本院影像品質建議及改進。

Case 1

- ◇ 81 y/o, female
- ◇ Abnormal CXR on regular examination; asymptomatic
- ◇ Smoking (-)
- ◇ PHx:
 - ◇ Type 2 diabetes mellitus, poor control
 - ◇ Chronic kidney disease
 - ◇ HCV carrier
 - ◇ Rheumatoid arthritis
 - ◇ Gouty arthritis
 - ◇ Reflux esophagitis
- ◇ Lab:
 - ◇ WBC 5940 /uL
 - ◇ CEA 9.11 ng/mL
- ◇ Image:
 - ◇ 2017/05/03 Chest CT (No C)
 - ◇ 2017/08/03 Chest CT (No C +C)
 - ◇ 2018/01/06 Chest CT (No C +C)



2017/05/03



Pathology

- ◇ Diagnosis: Lung , upper lobe, right, CT-guided biopsy, cryptococcosis
- ◇ Report:
Microscopically, it shows a picture of granulomatous inflammation with round to oval, pale staining yeasts in clear spaces surrounded by histiocytes. Necrosis is also seen. PAS, mucin and GMS stains highlight the yeasts. According to aforementioned pictures, cryptococcosis is considered. No specific micro-organism is found by acid fast stain.
- ◇ Fluconazole (05/17 -)

2017/08/03

Poor appetite and body weight loss (10 kg) for 2 months



- ◇ Cryptococcus Ag (serum) (2018-08-01): Positive[1:64]
- ◇ Pleural effusion (2018-08-10): no aerobic/anaerobic bacterial growth
- ◇ Sputum (2018-08-15): *Serratia odorifera* (light)

- ◇ Fluconazole IVD (08/03-08/21)
- ◇ Cetazone IVD (08/07-08/10)
- ◇ Pipe/Tazo IVD (08/10-08/25)