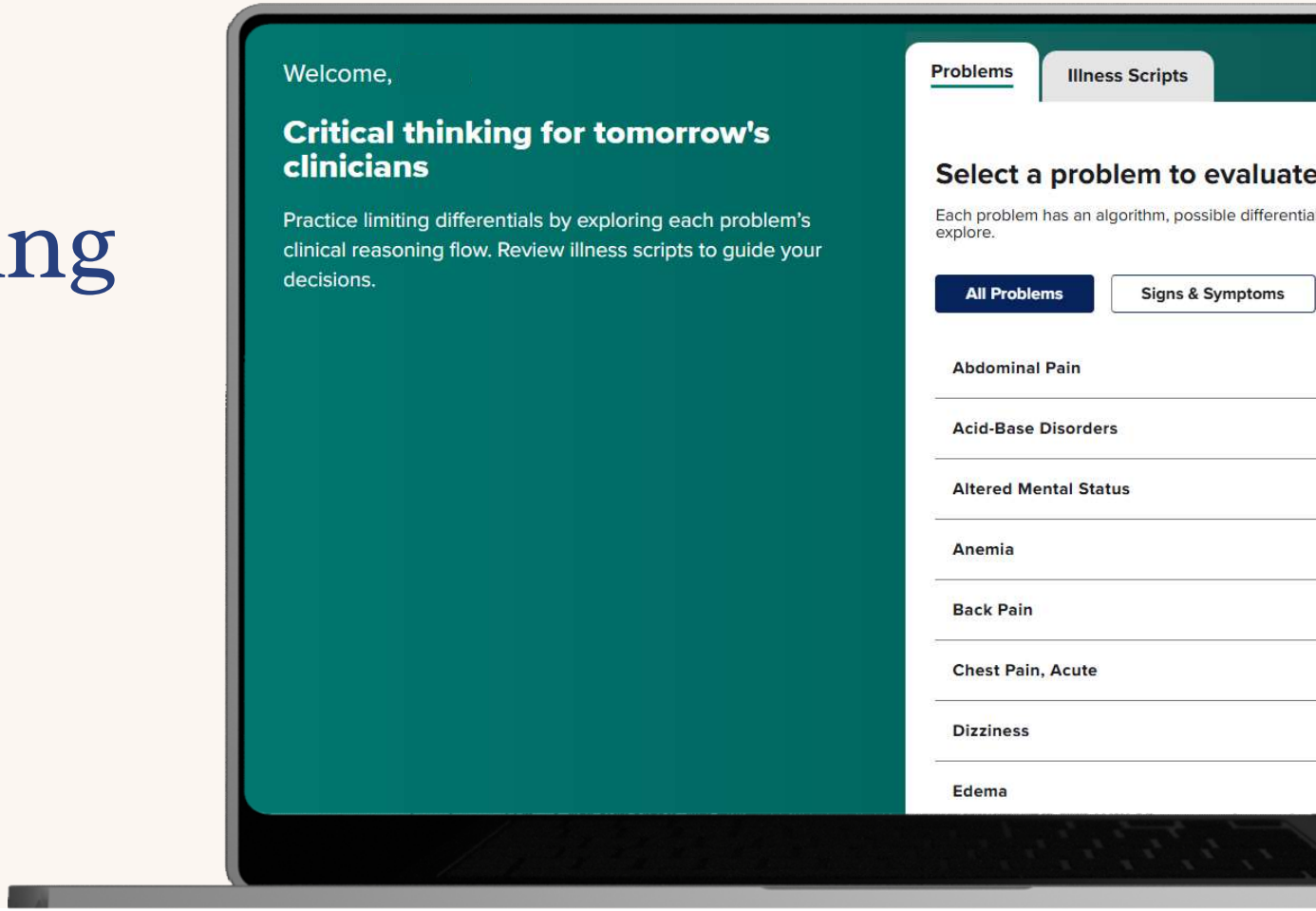
Get in Touch

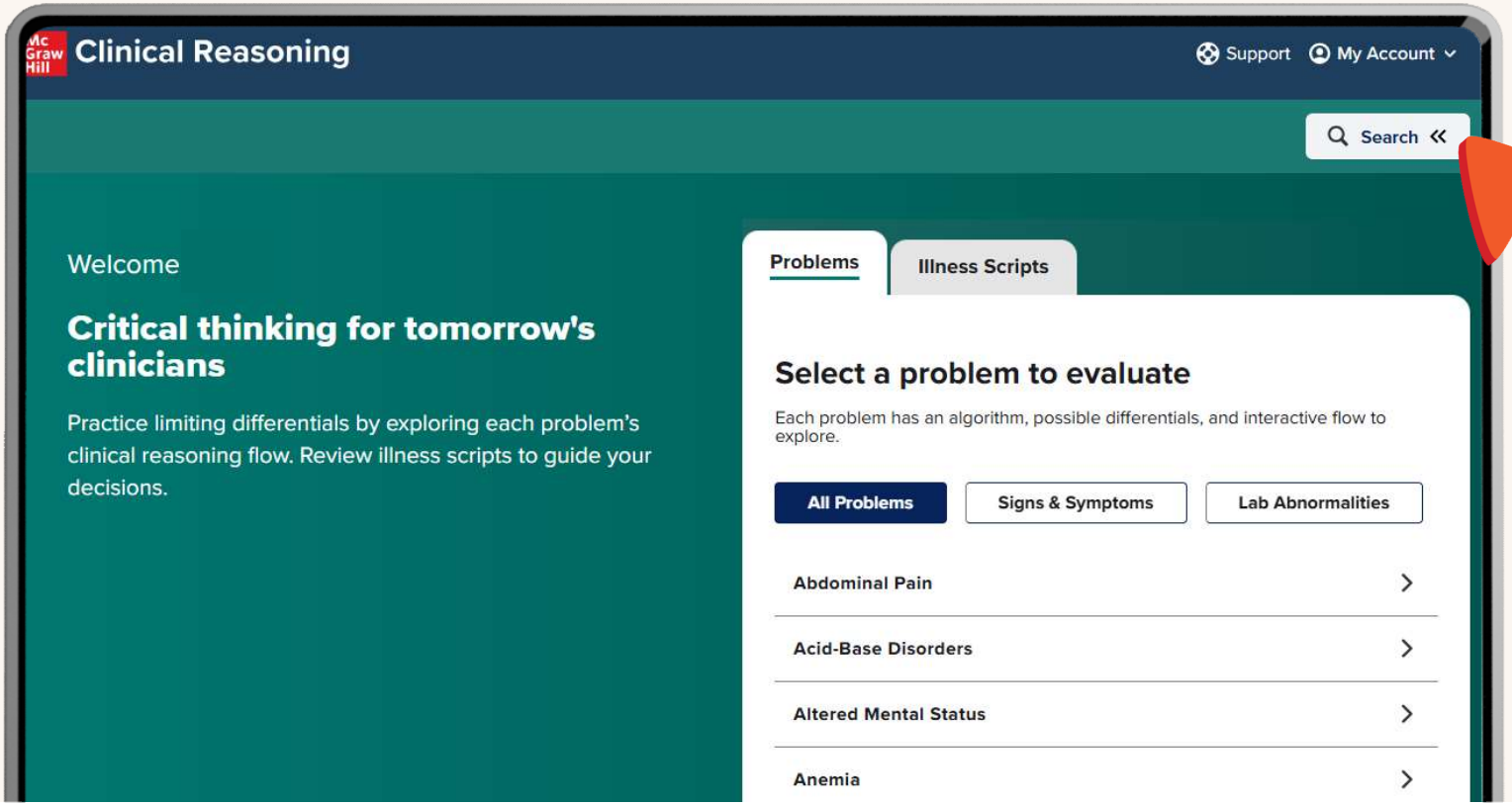
Clinical Reasoning

QUICK-REFERENCE-GUIDE



Problem Modules
問題導向模組

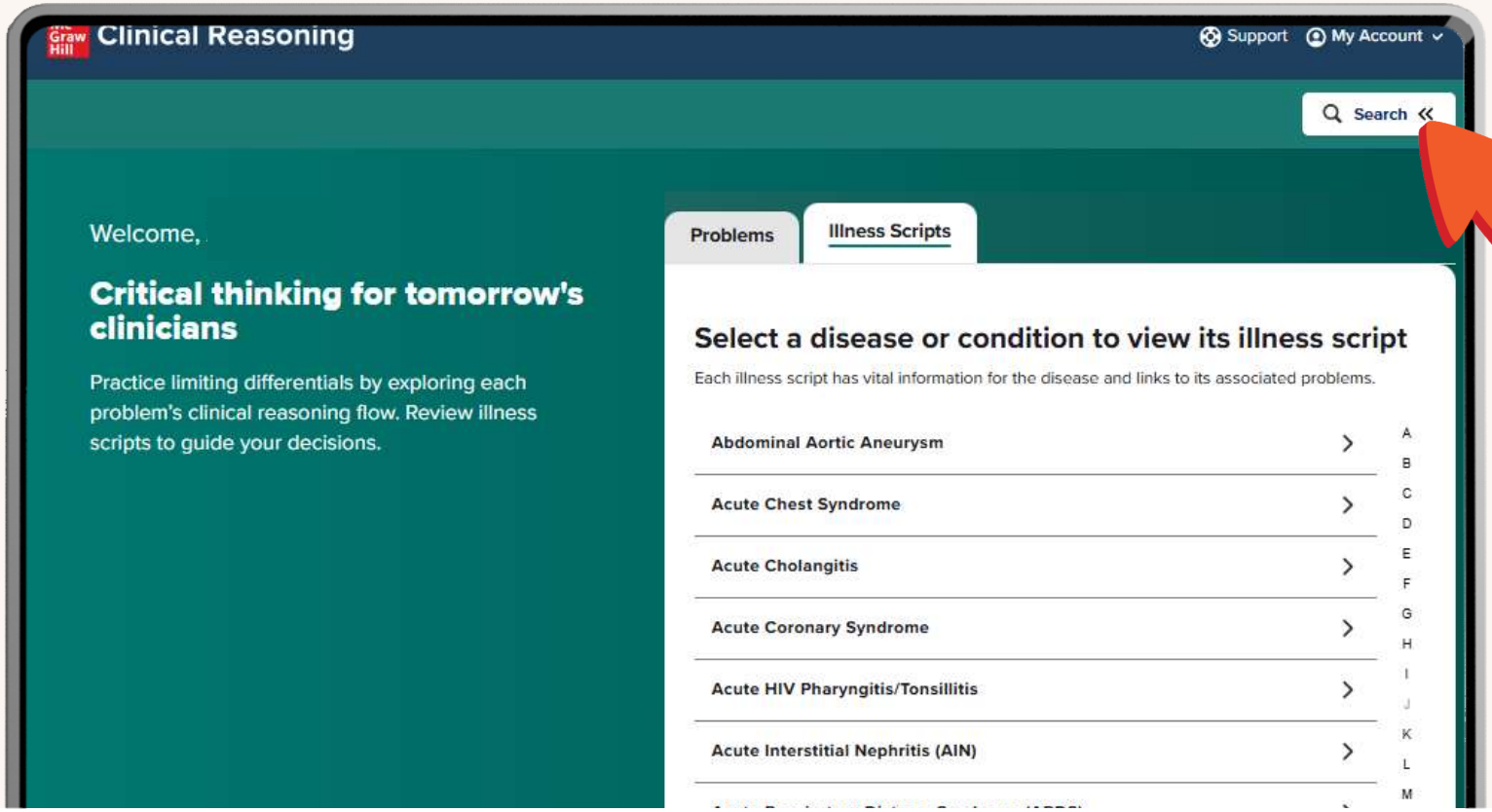
選擇一個主訴病例出發，通過探索其臨床推理流程，練習如何遂步縮小監別診斷范圍。可依All Problems 、Signs & Symptoms 或 Lab Abnormalities進行篩選主訴。



使用 **Search（搜尋）**按鈕，快速找到特定問題模組或疾病腳本。

Illness Scripts
疾病腳本

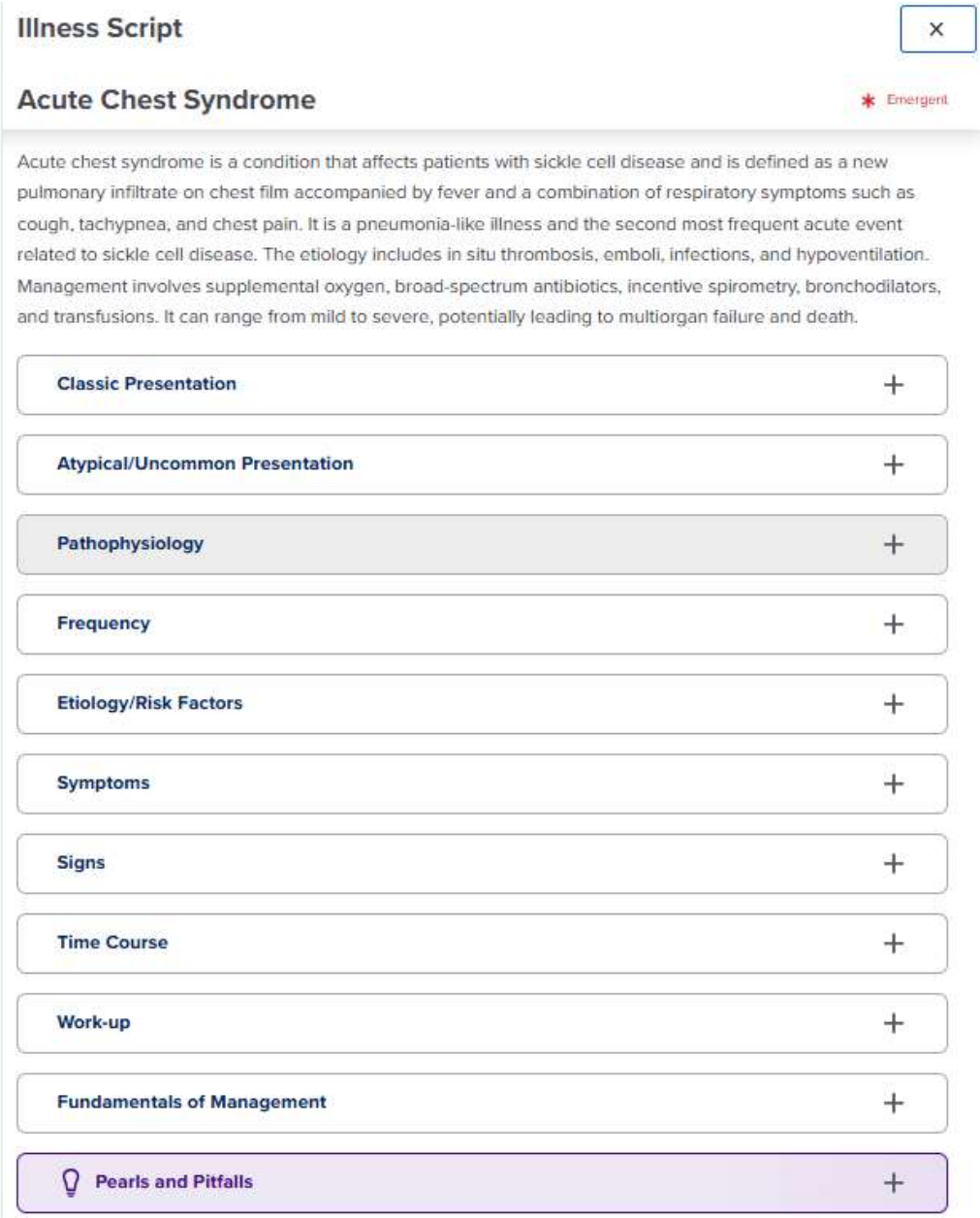
探索與問題模組對應的 500+ 份詳細疾病資料庫。每一份腳本都整理了臨床醫師判斷時會用到的關鍵線索，從典型表現到危險警訊，協助你精準完善鑑別診斷。



使用 **Search（搜尋）**按鈕，快速找到特定問題模組或疾病腳本。

Illness Scripts
疾病腳本

每份 **Illness Script** 都提供完整的疾病輪廓，包括：常見與非典型表現、重要病史與理學檢查重點、病理生理、危險警訊、病程時間軸，以及其他能引導診斷推理的重要臨床洞見。





Problem Overview-概覽頁

選擇一個主訴問題，探索其臨床推理流程，開始練習如何逐步縮小鑑別診斷範圍。

1 緊急及不容錯過的診斷

查看可能由主訴引起的緊急及不容錯過的疾病

✱ Emergent ⚠ Must Not Miss

2 診斷差異

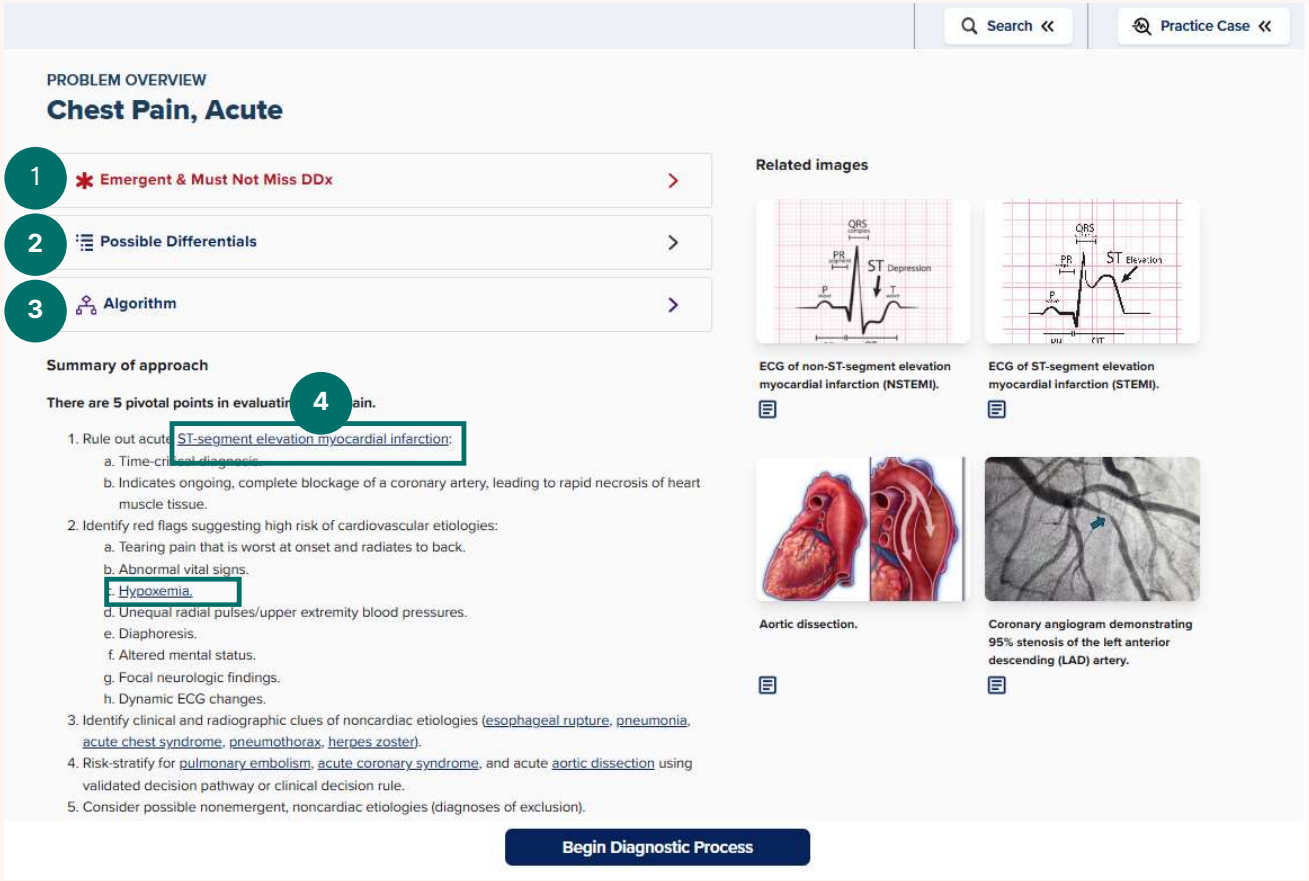
查看由主訴引起的疾病之間的差異

3 決策樹

查看診斷流程之樹狀圖，，幫助你把該問題可能的鑑別診斷逐步收斂，更接近最終診斷。

4 連結之其疾病腳本

點擊自動連至其疾病腳本閱讀典型/非典型表現、症狀與徵象基本處置與治療、臨床重點與陷阱等內容。





Problem Overview-概覽頁

5 檢索

6 [相關圖片]

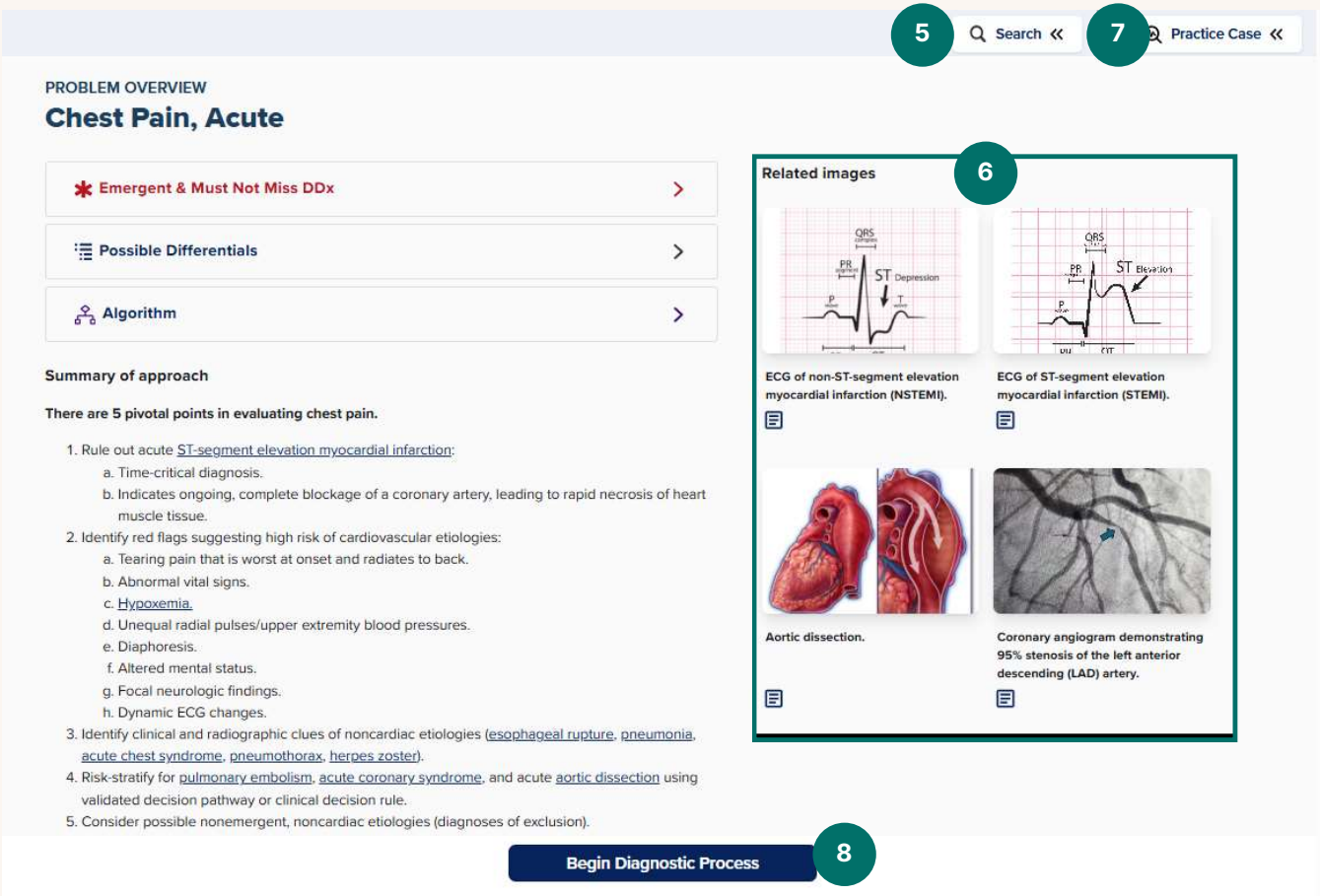
點擊放大圖片觀看

7 [AI病患模擬]

以語音/輸入文字與真實的AI病患進行問診、檢查及診斷。

8 [開始診斷流程]

當你蒐集完臨床決策所需資訊與可能的鑑別診斷線索後，就可以開始正式的診斷流程。

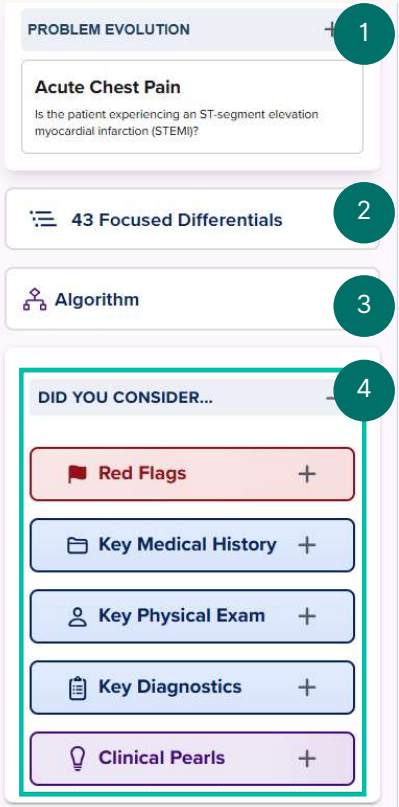


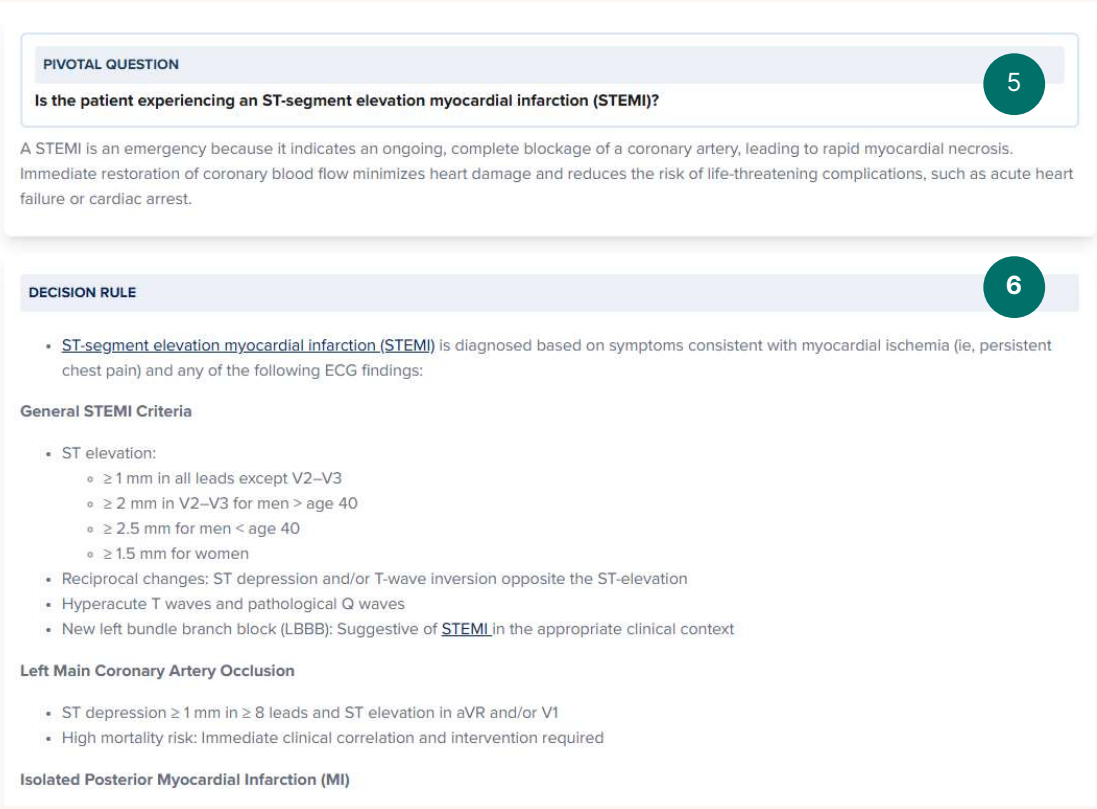
開始診斷流程

跟隨著專家設計的路徑，一步一步系統的學習如何進行診斷推理。

STEPBYSTEP

1. **Problem Evolution**
   追蹤診斷思路進度
2. **Focused Differentials**
   隨著診斷流程，將逐漸縮小範圍
3. **Algorithm**
   清晰呈現鑑別診斷流程
4. **診斷時關鍵考量因素**
   涵蓋危險訊號、關鍵病史、關鍵體格檢查、關鍵診斷、臨床要點
5. **關鍵問題**
   查看當前關鍵問題
6. **決策規則**
   同一主訴下辨別不同子類型時，需要用來推論與做判斷的提示點。



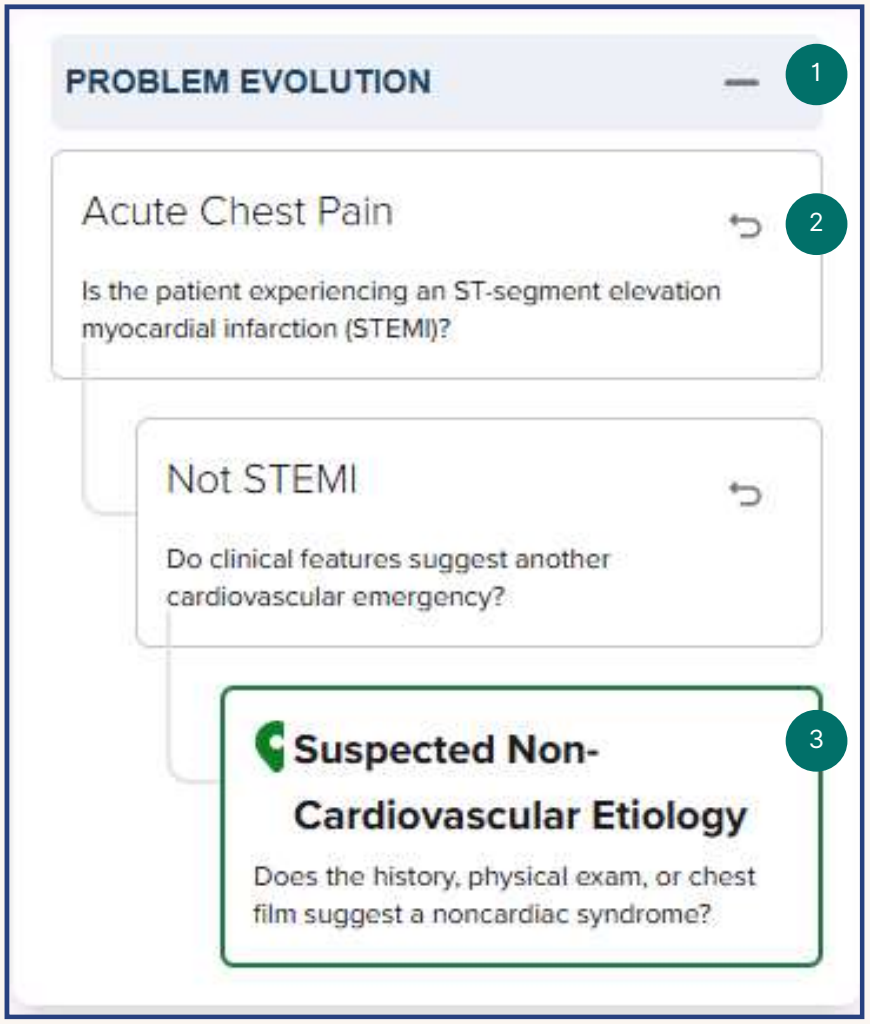


STEP BY STEP

開始診斷流程

關鍵決策

1. 展開查看問題演變的過重程，追蹤診斷思路進度
2. 使用「⮌」可以回到上一個決策點
3. 顯示當前你的診斷在哪一步、此前做了什麼決策





STEP BY STEP

開始診斷流程

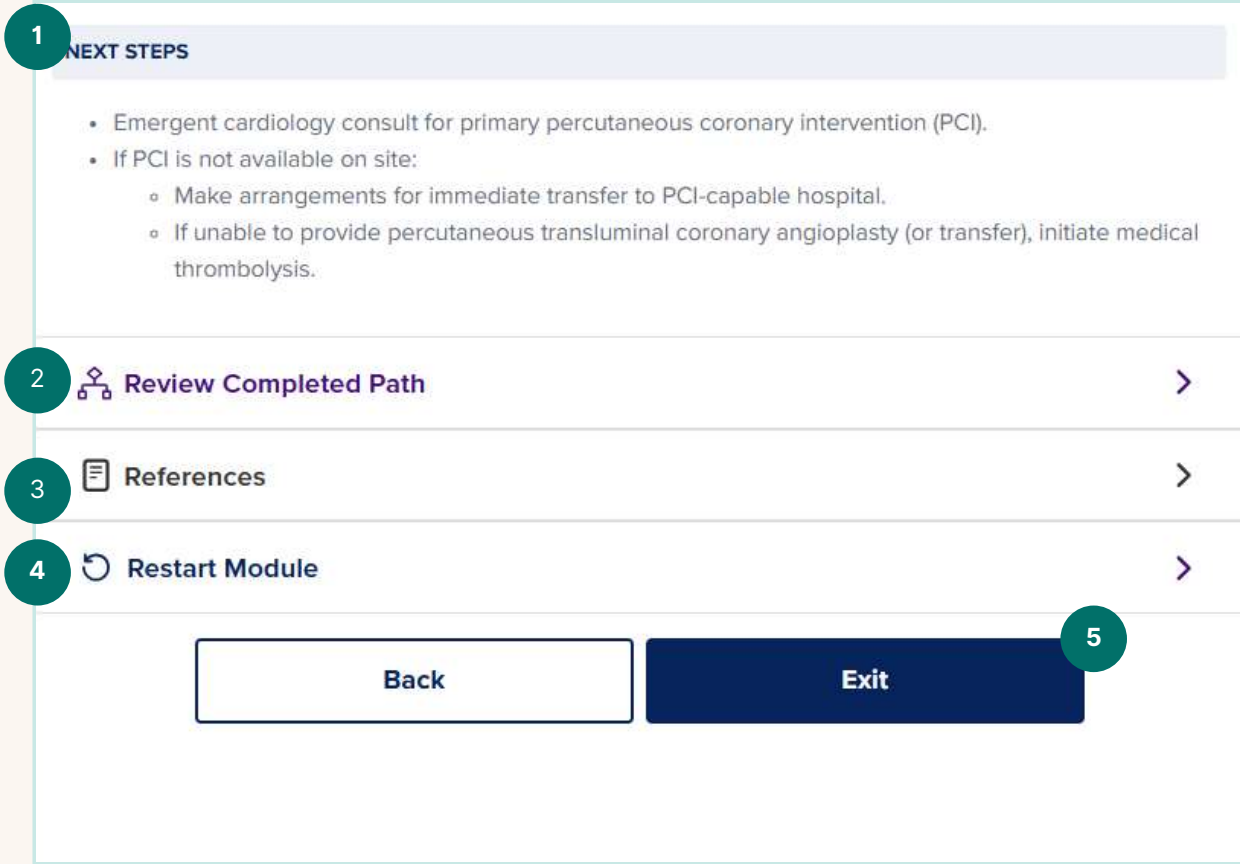
可能的診斷清單：釐清的細微差異



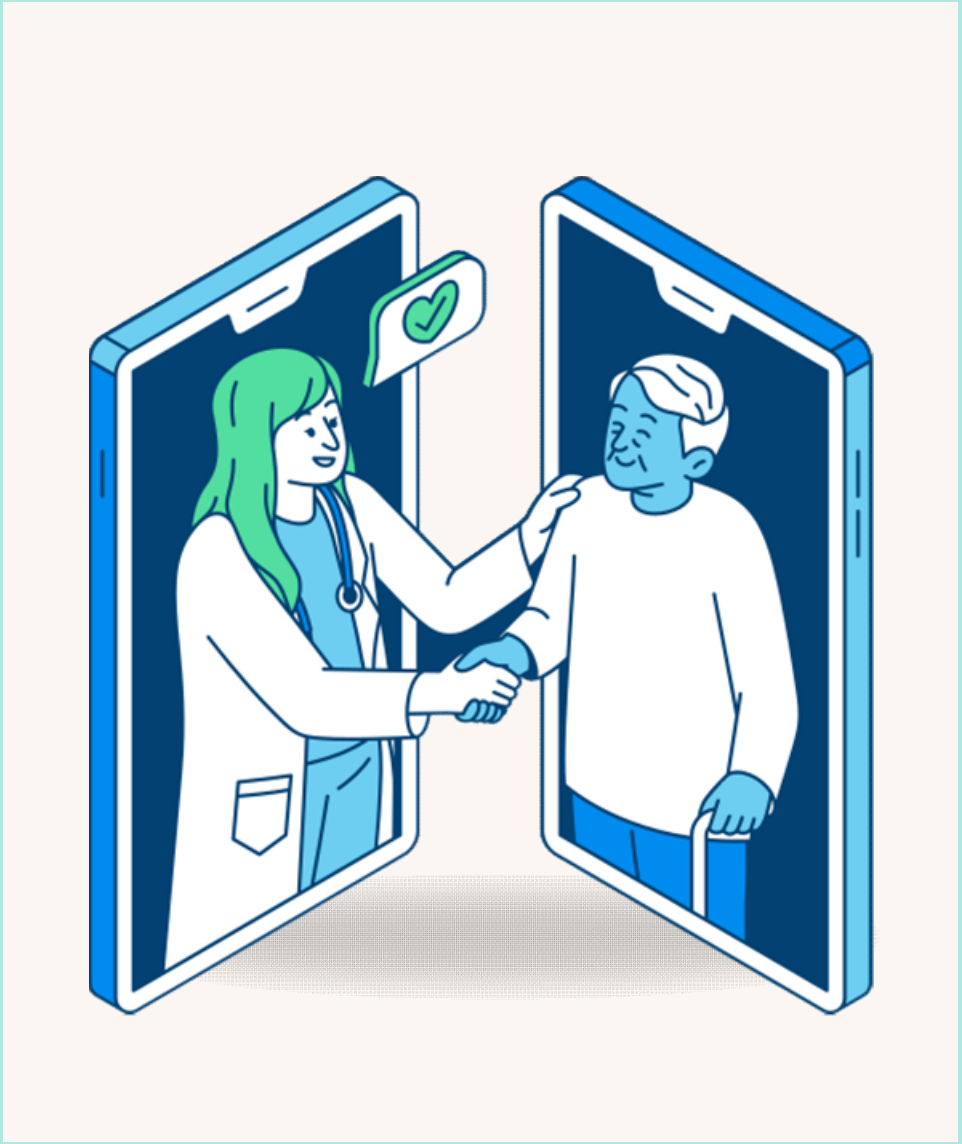
回顧主訴病例



1. 診療方案
2. 回顧決策樹
3. 參考來源
4. 重新開始該模組
5. 回到首頁



PRACTICE CASE
AI 病患問診



[產品連結]

PRACTICE CASE
AI 病患問診

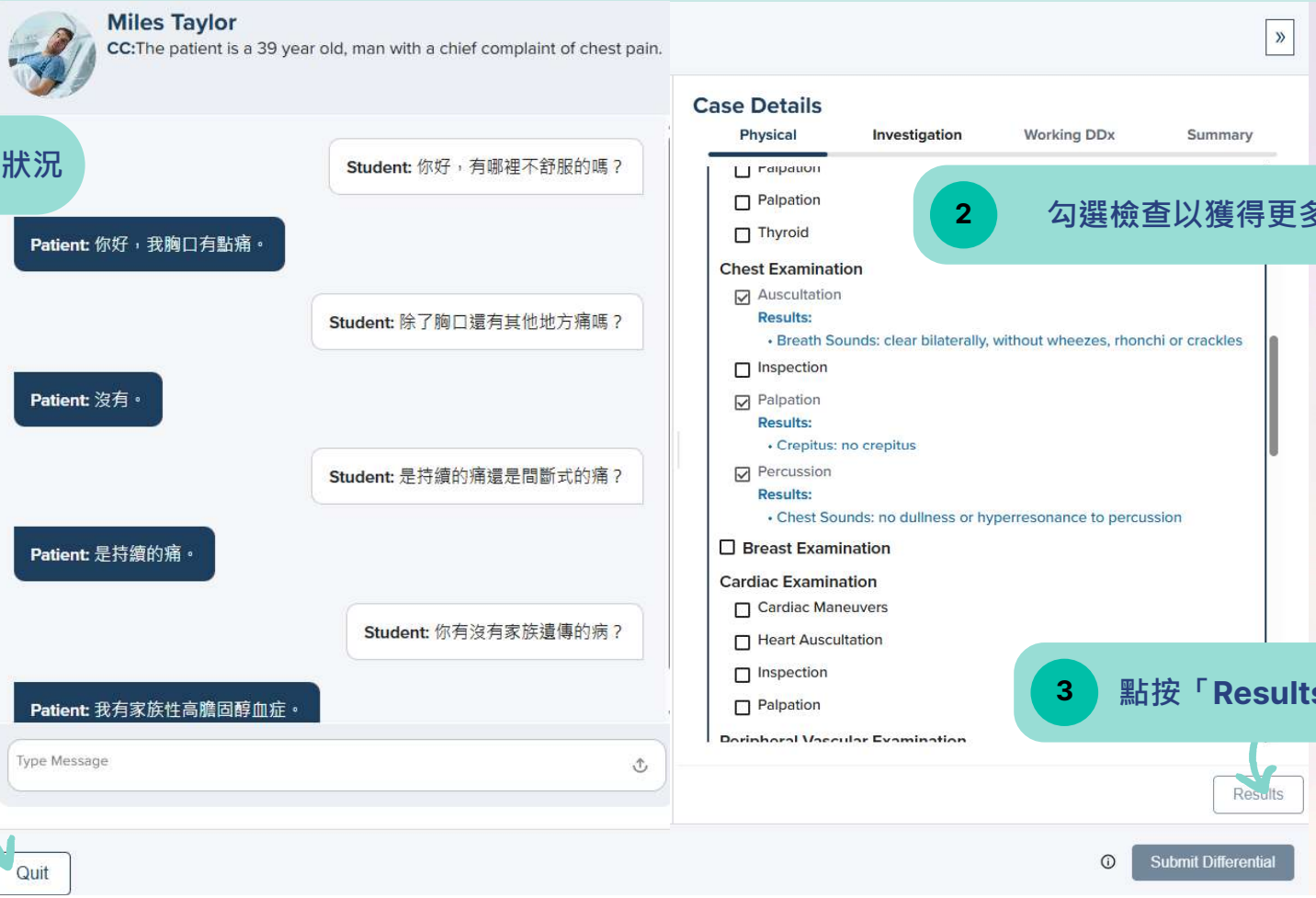
- **擬真互動：**
  - 使用者可透過「語音」或「文字」與 AI 病人對話，練習病史採集。
- **完整流程：**
  - 涵蓋病史詢問、檢查、實驗室數據判讀到影像檢查。
- **即時回饋：**
  - 收集使用者的操作，包括初步鑑別診斷和最終診斷，以及診斷依據和信賴水準，生成一份回饋報告，從而對使用者的臨床技能進行全面評估。





PRACTICE CASE
AI 病患問診 - 初步評估





PRACTICE CASE
AI 病患問診 - 初步評估



4 一覽病患的狀況



Miles Taylor

CC: The patient is a 39 year old, man with a chief complaint of chest pain.

Student: 你好，有哪裡不舒服的嗎？

Patient: 你好，我胸口有點痛。

Student: 除了胸口還有其他地方痛嗎？

Patient: 沒有。

Student: 是持續的痛還是間斷式的痛？

Patient: 是持續的痛。

Student: 你有沒有家族遺傳的病？

Patient: 我有家族性高膽固醇血症。

Type Message

Quit

Case Details

Physical | Investigation | Working DDx | Summary

Working DDx

Acute Chest Syndrome

Physical

General Appearance

General Appearance:

Results:

- Overall Physical Condition: Well-developed, well-nourished, no apparent distress

Chest Examination

Auscultation:

Results:

- Breath Sounds: clear bilaterally, without wheezes, rhonchi or crackles

Inspection:

Results:

- Symmetry: symmetric
- Retractions: no retractions

Percussion:

Results:

- Chest Sounds: no dullness or hyperresonance to percussion

Cardiac Examination

Cardiac Maneuvers:

Results:

- Squat to Stand Maneuver: no change in murmur
- Passive Leg Elevation: no change in murmur

Heart Auscultation:

Results:

- Heart Rate and Rhythm: regular rate and rhythm

Submit Differential

PRACTICE CASE
AI 病患問診 - 初步評估





Miles Taylor

CC: The patient is a 39 year old, man with a chief complaint of chest pain.

Student: 你好，有哪裡不舒服的嗎？

Patient: 你好，我胸口有點痛。

Student: 除了胸口還有其他地方痛嗎？

Patient: 沒有。

Student: 是持續的痛還是間斷式的痛？

Patient: 是持續的痛。

Student: 你有沒有家族遺傳的病？

Patient: 我有家族性高膽固醇血症。

Type Message

Quit

5 勾選初步鑑別診斷

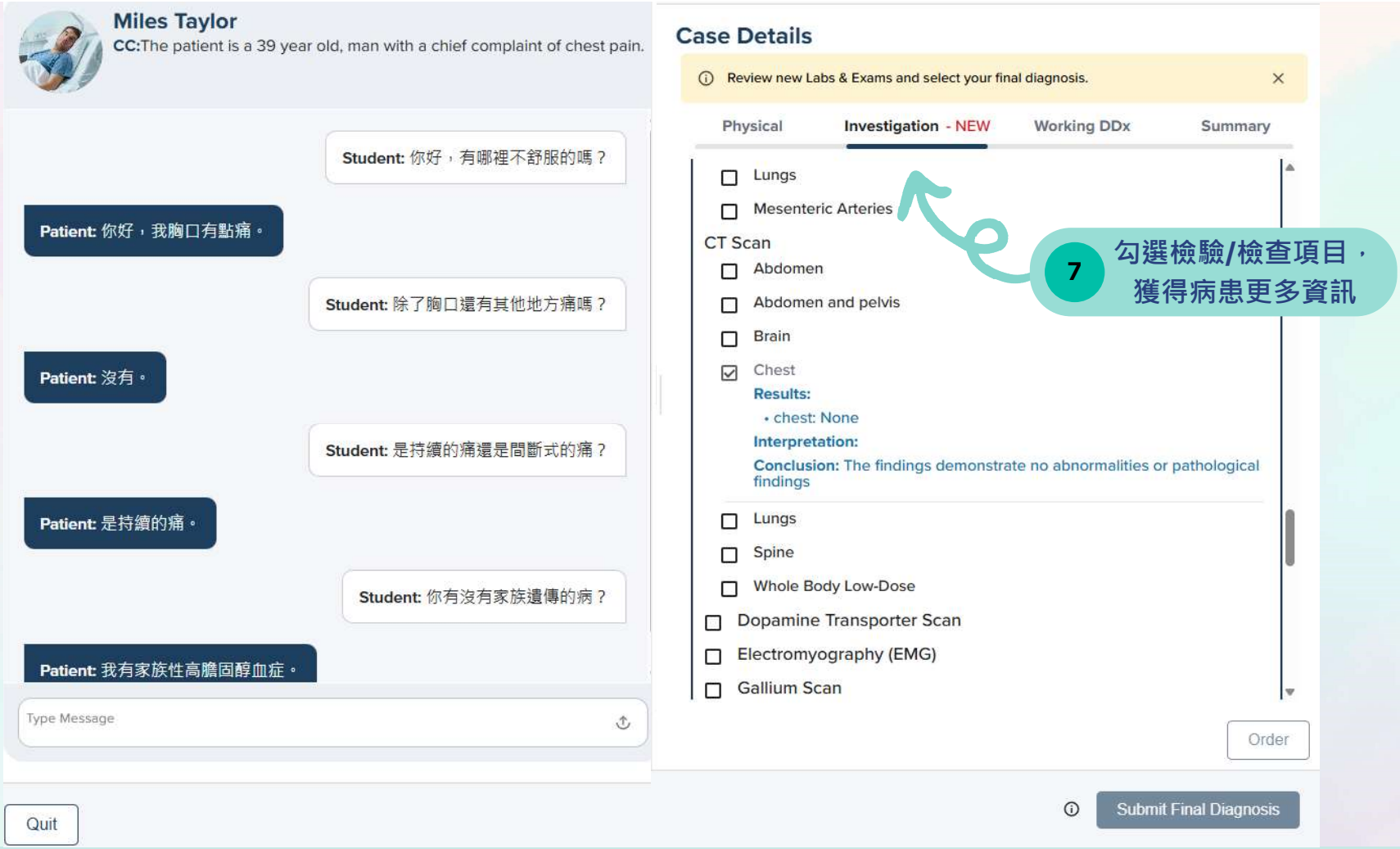
Case Details

Physical | Investigation | Working DDx | Summary

- [x] Acute Chest Syndrome
- [ ] Aortic dissection
- [ ] Aortic Stenosis
- [ ] Asthma
- [ ] Chronic obstructive pulmonary disease (COPD)
- [ ] Costochondritis
- [ ] Esophageal Rupture (Boerhaave Syndrome)
- [ ] Esophageal Spasm
- [ ] Fibromyalgia
- [ ] Gastroesophageal Reflux Disease
- [ ] Herpes Zoster
- [ ] Lung Abscess
- [ ] Mastitis
- [ ] Myocarditis
- [ ] Non–ST-Segment Elevation Myocardial Infarction (NSTEM
- [ ] Panic attack
- [ ] Pericarditis
- [ ] Pleurisy
- [ ] Pneumonia

Submit Differential

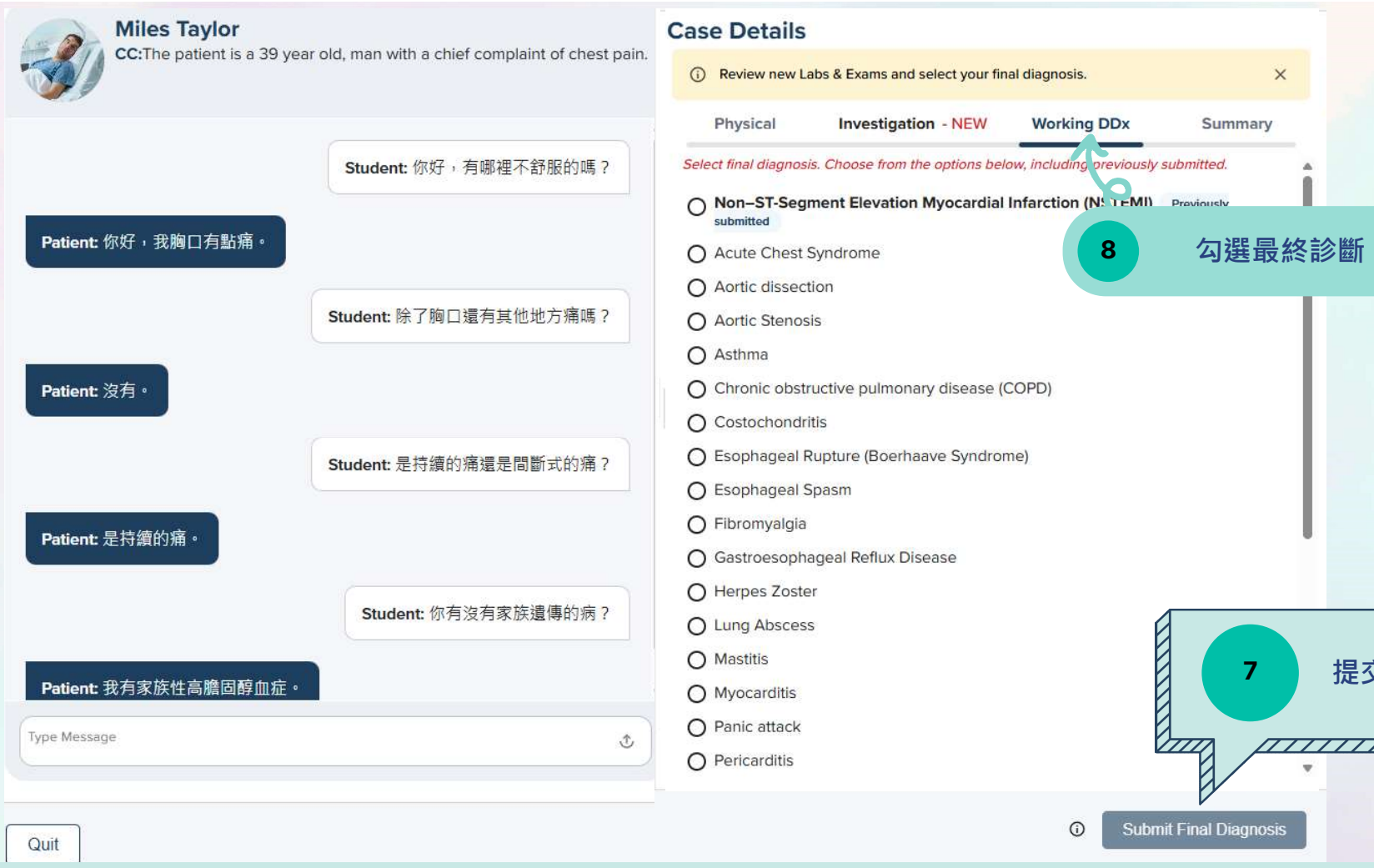
6 提交鑑別診斷，以解鎖檢驗/檢查項目，並進行最終診斷



PRACTICE CASE

AI 病患問診 - 進階評估





PRACTICE CASE

AI 病患問診 - 最終診斷



PRACTICE CASE
AI 病患問診 - 撰寫診斷推理





Raj Singh

CC: The patient is a 71 year old man with a chief complaint of chest pain.

10 描述您的診斷推理依據

Final Diagnosis - Acute Chest Syndrome

*Describe your reasoning:

Could you briefly explain the reasoning and process behind your diagnosis?

Positive D-Dimer
Relatively normal and healthy otherwise
Estrogen
CT angio showing embolism

*Confidence Level

Low | **Medium** | High

11 選擇信心水平

12 生成回饋報告

Quit

Finalize and Get Report

回饋報告

評估報告會將您的診斷決策與專家的推理思路進行對比，提煉影響最終診斷的關鍵臨床發現，並為您提供提升未來問診能力的指導建議。



Case

Past Cases

Patient	Chief Complaint	Submission Date	Report
Betsy Welch	The patient is a 82 year old woman with a chief complaint of chest pain.	2026年1月21日 上午11:24	View Report ›

Final Diagnosis

Correct Diagnosis:

The diagnosis for this case was ✓ Mechanical Low Back Pain

Your Diagnosis

The diagnosis you submitted was ✗ Cauda Equina Syndrome

CASE FEEDBACK

Brief case synopsis

In summary this is a 45 year old man with acute non-radiating low back pain with no symptoms, signs or risk factors for serious diseases. Specifically, he has no neurological complaints or findings to suggest cord compression or cauda equina and no signs or symptoms of infection nor cancer history. His pain is not radiating and thus the most likely diagnosis is mechanical back pain. Imaging is not indicated.

Use of Pivotal Clues

Focused Differential Diagnosis

Working Differential Diagnosis

Comparing Differential Diagnosis

The following table outlines your differential diagnosis for this case:

✱ Emergent ⚠ Must Not Miss ⓘ Not included on your list

Appropriate	Disease	Emergent/Must Not Miss
✓	Herniated Lumbar Disk	
ⓘ	Lumbar Spinal Stenosis	
ⓘ	Mechanical Low Back Pain	

Working Differential Diagnosis

Comparing Differential Diagnosis

✱ Emergent ⚠ Must Not Miss

✓ **1 Correct**

Non–ST-Segment Elevation Myocardial Infarction (NSTEMI) ✱

✗ **0 Incorrect** (Not Indicated in Expert DDx)

⊖ **6 Missed** (Indicated in Expert DDx)

Type II Myocardial Infarction ✱

Unstable Angina (UA) ✱

Myocarditis ⚠

Pulmonary Embolism (PE) ✱

Prinzmetal Angina

Aortic Dissection ✱

Transcript

Student Doctor	Jan 21, 2026, 11:24 AM	你有哪裡不舒服的嗎?
Patient	Jan 21, 2026, 11:24 AM	我的胸口有點不舒服。
Student Doctor	Jan 21, 2026, 11:25 AM	會痛嗎
Patient	Jan 21, 2026, 11:25 AM	不算是痛，比較像是不舒服的感覺。
Student Doctor	Jan 21, 2026, 11:25 AM	悶悶的?
Patient	Jan 21, 2026, 11:25 AM	對，有點悶悶的感覺。
Student Doctor	Jan 21, 2026, 11:25 AM	還有嗎
Patient	Jan 21, 2026, 11:25 AM	嗯，走路的時候感覺會更明顯。
Student Doctor	Jan 21, 2026, 11:26 AM	除了胸口還有什麼地方不舒服嗎

Mc Graw Hill

THANK YOU VERY MUCH!

