

其他人工肝脏ppt课 件

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01

引言





目的和背景

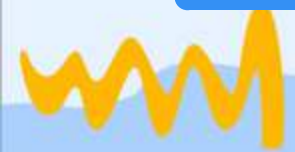


目的

介绍人工肝脏的基本概念、原理、应用及发展前景，提高听众对人工肝脏的认识和理解。

背景

随着医学科技的不断发展，人工肝脏作为一种新兴的医疗技术，已经在临床治疗中得到了广泛应用。通过了解人工肝脏的研究背景和发展历程，可以更好地理解其重要性和应用前景。





人工肝脏概述

01

定义

人工肝脏是一种能够模拟人体肝脏功能的体外循环装置，通过血液净化、解毒和补充有益成分等手段，代替肝脏执行部分功能，帮助患者度过危险期或过渡到肝移植。

02

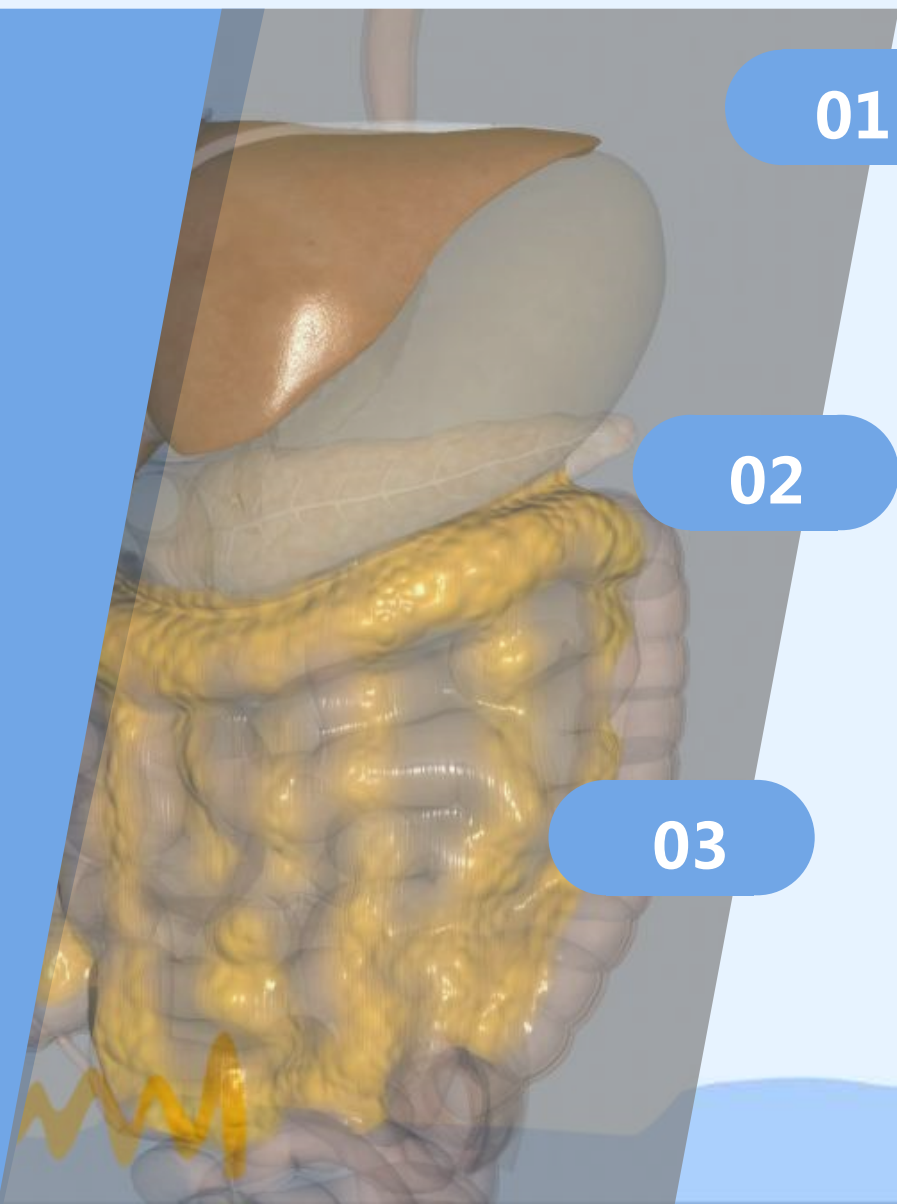
原理

人工肝脏基于人体肝脏的生理和病理特点设计而成，通过体外循环装置将患者血液引出体外，经过滤器、吸附剂等处理后再回输给患者，以达到净化血液、解毒和补充有益成分的目的。

03

应用

人工肝脏适用于各种原因引起的急性肝衰竭、慢性重症肝炎、药物性肝损害等疾病的治疗，可帮助患者度过危险期、促进肝功能恢复或过渡到肝移植。



以下附赠各项管理制度英文版（不需要可删）

急救药品、器材管理制度：

1. Rescue drugs and equipment should be "five fixed" (fixed quantity and variety, designated placement, designated person storage, regular disinfection and sterilization, regular inspection and maintenance) and "two timely" (timely inspection and maintenance, timely receipt and supplementation). The item is clearly marked and cannot be used arbitrarily.

2. The necessary rescue equipment is complete, in good performance, and in standby condition.

3. The rescue drugs are complete, with clear drug labels and no discoloration, deterioration, expiration, or damage. They should be placed and used in the order of drug expiration dates (from right to left).

4. Emergency drugs and items for each department's rescue vehicle shall be uniformly equipped according to requirements. Specialized emergency drugs and items must be reviewed and approved by the department director to determine the type, quantity, specifications, and dosage to be equipped. Rescue vehicles must be placed in designated locations and managed by designated personnel to ensure safety and ease of use.

5. After using rescue drugs and equipment, they should be fully replenished within 24 hours. If they cannot be replenished due to special reasons, they should be noted on the handover registration form and reported to the head nurse for coordination and resolution to ensure timely use during patient rescue.

6. There is a registration book for the provision of drugs and equipment. Ensure consistency between accounts and materials, and handover between shifts.

7. Management of sealed rescue vehicles: Before sealing, the head nurse (or nurse in charge) and another nurse shall count the drugs and equipment according to the registration book of drug and equipment, verify their accuracy, and seal them with a seal. Two people shall sign and fill in the sealing time. Nurses check the condition of the seals once per shift and complete the handover. The responsible nurses check once a week, and the head nurse and responsible nurses open the seals and inspect the drugs and equipment in the ambulance once a month, with records kept.

8. Non sealed rescue vehicle management: Each shift shall count the drugs and equipment according to the registration book and complete the handover. The responsible nurse shall inspect once a week, and the head nurse shall inspect once every two weeks and keep records, ensuring that the accounts match the materials.

护理文书书写制度：

1. Nursing staff strictly follow the latest requirements when writing nursing medical records.
2. The content of nursing records should be objective, truthful, accurate, timely, complete, and standardized.
3. All nursing documents should be written with a blue black or carbon ink pen.
4. All nursing documents should be written in Arabic numerals for date and time, with dates in years, months, and days, using a 24-hour system, specific to minutes. 5. Writing should use Chinese, medical terminology, and commonly used foreign language abbreviations; Complete record items; The text is neat, the handwriting is clear, and the layout is clean; Accurate expression, fluent sentences, simple and concise: correct format and punctuation, no typos.
6. When errors occur during the writing process, double line them on the wrong words, keep the original record clear and distinguishable, sign the modifier, indicate the modification time, continue to write the correct content, and do not use scraping, sticking, painting or other methods to cover up or remove the original handwriting. Each page should be modified no more than two times, otherwise the original recorder will promptly copy again (except for modifications made by superiors).
7. Nursing records written by intern nurses, probationary nurses, or unregistered nurses should be reviewed and signed by nurses with legal professional qualifications in this medical institution.
8. Further training nurses can only write nursing documents after being recognized by the medical institution receiving the training for their work ability.
9. Superior nursing staff have the responsibility to review and modify the written records of subordinate nursing staff. When making modifications, red double lines should be used to mark errors, write the modified content, sign and indicate the modification time.
10. Temperature records, medical orders, patient care records, and surgical inventory records should be archived on time.



课件内容和结构

内容

本课件将详细介绍人工肝脏的基本概念、原理、临床应用及发展前景，包括人工肝脏的组成、操作流程、注意事项、并发症处理等方面的知识。

结构

本课件按照由浅入深、由表及里的原则进行编排，先介绍人工肝脏的基本概念和原理，再阐述其临床应用和治疗效果，最后探讨其发展前景和未来研究方向。通过逻辑清晰、条理分明的结构安排，使听众能够更好地理解和掌握人工肝脏的相关知识。

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人工肝脏技术基础

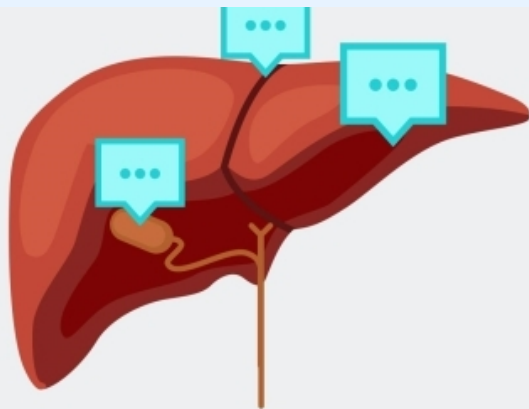




人工肝脏原理

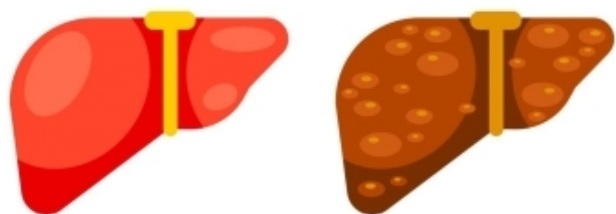
替代或辅助肝功能

人工肝脏通过体外机械、化学或生物反应装置，清除体内有害物质，补充必需物质，改善内环境，从而暂时或长期替代肝脏功能。



生物人工肝

将肝细胞培养在体外生物反应器中，通过肝细胞的代谢和解毒功能，模拟肝脏的生物转化功能。



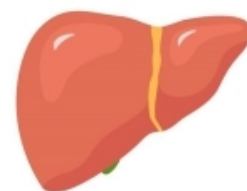
血液净化技术

利用血液灌流、血液透析、血液滤过等原理，清除血液中的有害物质。

HEPATOMEGALY



HEALTHY



ENLARGED



人工肝脏分类



01



非生物型人工肝



以血液净化技术为主，包括血液透析、血液滤过、血液灌流、血浆置换等。

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生物型人工肝



利用体外培养的肝细胞或肝组织片，模拟肝脏的生物合成、生物转化及解毒功能。

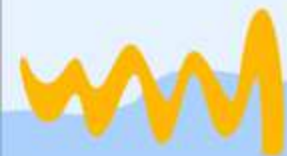
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混合型人工肝

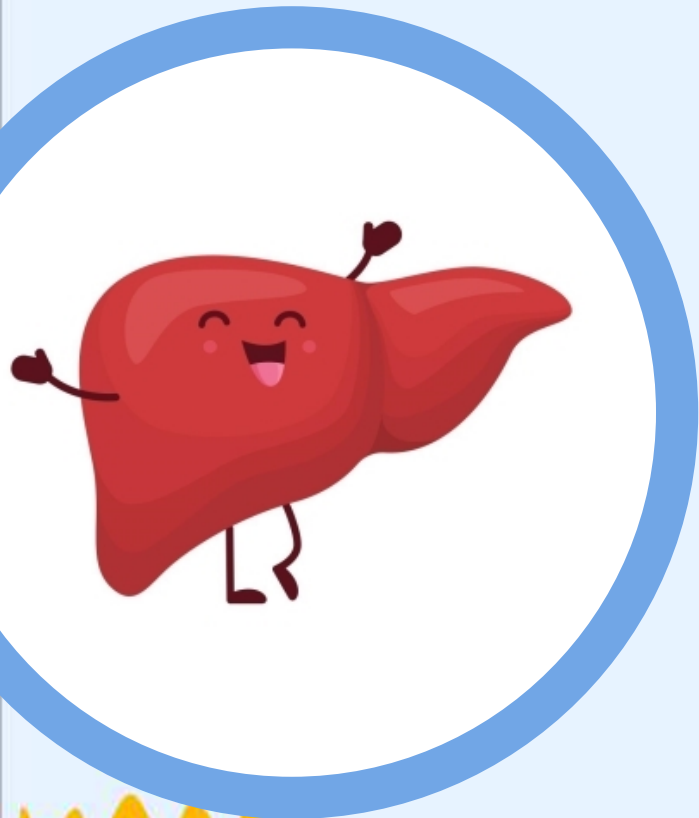


将非生物型与生物型人工肝技术相结合，以发挥各自优势，提高疗效。





人工肝脏技术发展历程



初级阶段

20世纪50年代，以血液透析为主的非生物型人工肝开始应用于临床。

发展阶段

70年代至80年代，随着血液净化技术的不断发展，出现了血液滤过、血液灌流等多种非生物型人工肝技术。

深入研究阶段

90年代至今，生物型人工肝及混合型人工肝成为研究热点，并取得了一定的临床疗效。同时，随着材料科学、细胞生物学、生物工程学等学科的进步，人工肝脏技术不断得到完善和发展。

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其他人工肝脏技术介绍

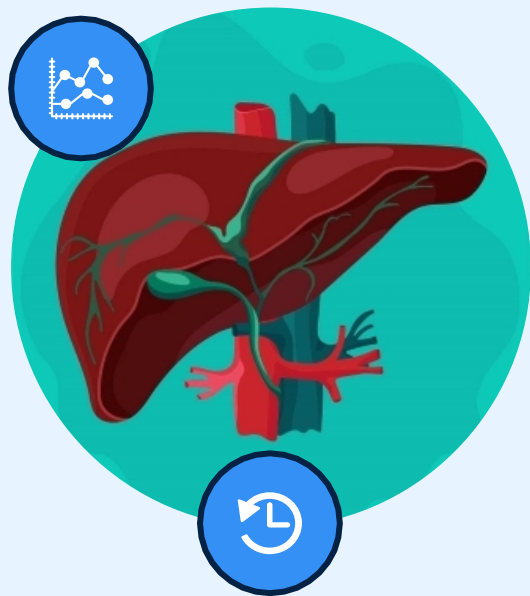




生物人工肝脏

原理

利用生物反应器培养肝细胞，模拟肝脏的代谢和解毒功能。

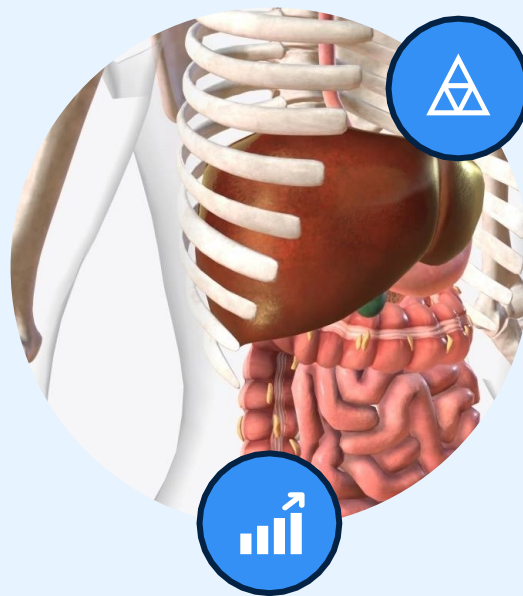


优点

具有较好的生物相容性和代谢能力，能够提供更接近人体生理环境的支持。

缺点

肝细胞来源有限，培养条件苛刻，且存在免疫排斥和感染风险。



应用领域

主要用于肝功能衰竭患者的短期支持治疗。

以上内容仅为本文档的试下载部分，为可阅读页数的一半内容。如要下载或阅读全文，请访问：
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