

量较小, cFO 界值 5% 也是参照文献设定, 还需进行更多研究单位参与的多中心、大样本研究以进一步予以论证。

[参 考 文 献]

- [1] Hassinger AB, Wald EL, Goodman DM. Early postoperative fluid overload precedes acute kidney injury and is associated with higher morbidity in pediatric cardiac surgery patients[J]. *Pediatr Crit Care Med*, 2014, 15(2): 131-138.
- [2] 郑俊波, 叶明, 于凯江, 等. 容量超负荷对心脏术后应用连续性肾脏替代治疗患儿预后的影响 [J]. *中国血液净化*, 2011, 10(8): 412-415.
- [3] Sethi SK, Kumar M, Sharma R, et al. Acute kidney injury in children after cardiopulmonary bypass: Risk factors and outcome[J]. *Indian Pediatr*, 2015, 52(3): 223-226.
- [4] Aydin SI, Seiden HS, Blaufox AD. Acute kidney injury after surgery for congenital heart disease[J]. *Ann Thorac Surg*, 2012, 94(5): 1589-1595.
- [5] Lex DJ, Tóth R, Czobor NR, et al. Fluid overload is associated with higher mortality and morbidity in pediatric patients undergoing cardiac surgery[J]. *Pediatr Crit Care Med*, 2016, 17(4): 307-314.
- [6] Thiagarajan RR, Laussen PC. Risk adjustment for congenital heart surgery-1 (RACHS-1) for evaluation of mortality in children undergoing cardiac surgery[M]// Barach PR, Jacobs JP, Lipshultz SE, et al. *Pediatric and congenital cardiac care*. London: Springer, 2015: 327-336.
- [7] 史珍英. 各类先天性心脏病监护和处理 [M]// 丁文祥, 苏肇伉, 史珍英. *小儿心脏外科重症监护手册*. 上海: 世界图书出版公司, 2009: 249-323.
- [8] Selewski DT, Cornell TT, Lombel RM, et al. Weight-based determination of fluid overload status and mortality in pediatric intensive care unit patients requiring continuous renal replacement therapy[J]. *Intensive Care Med*, 2011, 37(7): 1166-1173.
- [9] Khwaja A. KDIGO clinical practice guidelines for acute kidney injury[J]. *Nephron Clin Pract*, 2012, 120(4): c179-184.
- [10] Gaies MG, Gurney JG, Yen AH, et al. Vasoactive-inotropic score as a predictor of morbidity and mortality in infants after cardiopulmonary bypass[J]. *Pediatr Crit Care Med*, 2010, 11(2): 234-238.
- [11] Seguin J, Albright B, Vertullo L, et al. Extent, risk factors, and outcome of fluid overload after pediatric heart surgery[J]. *Crit Care Med*, 2014, 42(12): 2591-2599.
- [12] Hazle MA, Gajarski RJ, Yu S, et al. Fluid overload in infants following congenital heart surgery[J]. *Pediatr Crit Care Med*, 2013, 14(1): 44-49.
- [13] Hirleman E, Larson DF. Cardiopulmonary bypass and edema: physiology and pathophysiology[J]. *Perfusion*, 2008, 23(6): 311-322.
- [14] Beck R, Halberthal M, Zonis Z, et al. Abdominal compartment syndrome in children[J]. *Pediatr Crit Care Med*, 2001, 21(1): 51-56.
- [15] Paolillo S, Perrone Filardi P. Cardio-renal protection through renin-angiotensin-aldosterone system inhibition: current knowledge and new perspectives[J]. *Eur Heart J Cardiovasc Pharmacother*, 2015, 1(2): 132-133.
- [16] Arikan AA, Zappitelli M, Goldstein SL, et al. Fluid overload is associated with impaired oxygenation and morbidity in critically ill children[J]. *Pediatr Crit Care Med*, 2012, 13(3): 253-258.
- [17] Blinder JJ, Goldstein SL, Lee VV, et al. Congenital heart surgery in infants: Effects of acute kidney injury on outcomes[J]. *J Thorac Cardiovasc Surg*, 2012, 143(2): 368-374.

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· 消息 ·

2017 年全国新生儿颅脑超声诊断学习班通知

为提高对围产期脑损伤及其他中枢神经系统疾病的诊断水平, 充分利用已有的医疗资源, 推广颅脑超声检查诊断技术, 北京大学第一医院儿科按计划于 2017 年 8 月 22~26 日举办为期 5 天的新生儿颅脑超声诊断学习班。本班属国家级教育项目, 授课教师为本科及北京市著名专家教授。学习结束授予 10 学分。主要授课内容包括: 中枢神经系统解剖; 颅脑超声检查方法; 新生儿不同颅脑疾病超声诊断; 胎儿中枢神经系统的超声诊断; 鉴别诊断等。招收学员对象: 儿科新生儿专业医师, 超声专业医师及技师。学费: 1800 元。报名截止日期 2017 年 8 月 8 日(上课前 2 周)。2017 年 8 月 21 日(星期一)白天正式报到。

报名方法: 点击 <http://b1y8f04d.eventdove.com> 报名, 填写正确信息保存即可。或联系北京大学第一医院儿科颅脑超声室, 索要正式通知。

联系人: 王红梅, 刘黎黎。电话: 010-83573461 或 83573213。Email: bdy2002@163.com。邮编 100034。我们将在开班前 2 个月寄去正式通知。

北京大学第一医院儿科
2017 年 3 月 1 日