私立臺北醫學院_____學年度第_____學期 期中/期末 考試 命(試)題紙

系級	科目	授課教師	考試日期	學號	姓名
二	論文寫作	張	91年1月3日第____節		

※①請注意本試題共_____張。如發現頁數不足及空白頁或缺印，應當場請求補齊，否則缺少部份概以零分計。
②每張試題卷務必填寫(學號)、(姓名)。

RESEARCH PAPER WRITING, FALL, 2001
FINAL EXAM

1 High school (student[a], students[b]) who choose to participate in sports place (himself[c], themselves[d]) at risk for a (sports-relating[e], sports-related[f]) injury.

2 An important area for concern is injury that may result from a rotational or linear (force[a] , forces[b]) applied to the head and brain from a direct impact or indirect force. (These[c] , This[d]) forces may result in a minimal injury to the brain or (may[e], maybe[f]) cause permanent disability or death.

3 The term concussion previously (was[a] , were[b]) defined as a clinical syndrome (characterizing[c], characterized[d]) by immediate and transient posttraumatic impairment of neural function, such (as[e], like[f]) alteration of consciousness and disturbance of vision or equilibrium due to brain-stem involvement.

4 In recent literature, concussion (have[a], has[b]) been defined as a trauma-induced (alteration[c], alterations[d]) in mental status that may or may not (involved[e], involve[f]) a loss of consciousness.

5 Recently, the (term[a], terms[b]) mild head injury, traumatic brain injury, or mild traumatic brain injury (MTBI) have been used to describe brain injuries. The (definition[c], definitions[d]) of these terms include a review of the signs and symptoms and the (lost[e], loss[f]) of consciousness and amnesia.

6 Prior to (beginning[a], the beginning[b]) of the study, the operational definitions and reporting requirements were included in (a user's manual[c], user's manual[d]) and distributed to all athletic (trainer[e], trainers[f]).

7 Data (was[a], were[b]) recorded by the athletic trainers (use[c], using[d]) a customized version of the Sports Injury Monitoring System and (was[e], were[f]) transferred to the central database using manual or electronic procedures.

8 Of the reported (injury[a], injuries[b]), 1219 (5.5%) were MTBIs. The median time loss for reported MTBIs (was[c] , were[d]) 3 days. In 89% of the cases, (injured[e], the injured[f]) player was removed from the session and 54.8% of the players were referred to a physician, medical clinic, or hospital for additional evaluation.

9 There (was[a], were[b]) 4 cases of subdural hematoma and 2 cases of intracerebral bleeding reported in the 3 seasons of football and (no[c], none[d]) in any of the other sports. There were no (death[e], deaths[f]).

10 Given the close association of MTBI with a variety of different (type[a], types[b]) of collisions, prevention strategies are most successful when interventions are (aimed[c], aiming[d]) at (control[e], controlling[f]) the participation environment.

11 Modifications in player (skill[a], skills[b]), teaching techniques, and (play[c], playing[d]) rules may be required to reduce the potential risk from different types of collisions

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in sports. In addition, sports medicine professionals should focus (to[e], on[f]) accurate identification of MTBIs and consistent management throughout the recovery period.

12 Players and coaches must be encouraged to report all (suspecting[a], suspected[b]) head injuries to athletic trainers and team physicians. We categorized these as (following[c], follows[d]): T-wave abnormality without ST-segment depression was present in 599 patients; ST-segment depression (fewer[e], less[f]) than 1 mm in 289 patients; and ST-segment depression of 1 mm or more in 19 patients.

13 The (result[a], results[b]) of this study support (nation[c], national[d]) guidelines that recommend standard exercise treadmill testing with use of the Duke treadmill score for risk stratification (by[e], in[f]) patients with normal findings on resting ECG or mild ST-T abnormalities.

14 There were significant differences (in[a], at[b]) event-free survival rates for all end points when the treadmill score was treated as a continuous (variables[c], variable[d]) and the study population was divided into low-, intermediate-, and high-risk (group[e], groups[f]) using previously published cutoff values for the treadmill score.

15 The low-risk group had an annual cardiac mortality (rate[a], rates[b]) of 0.4%, comparable to that of the low-risk cohort (reported[c], reporting[d]) by Mark et al. Our data demonstrate that the Duke treadmill score is capable of (predicted[e], predicting[f]) not only cardiac death but also total cardiac events.

16 Nonspecific resting ST-T abnormalities (is[a], are[b]) common in patients undergoing evaluation of suspected CAD. However, there (has[c], have[d]) been concern that ST-segment analysis with exercise testing may not be reliable in patients (has[e], with[f]) resting ST-T abnormalities.

17 In contrast, the small group of high-risk patients merit early cardiac catheterization to define (his[a], their[b]) potential for revascularization. The value of a test to effectively risk-stratify a population depends on the (percent[c], percentage[d]) of the population that can be categorized as either low risk or high risk, since management of patients classified as intermediate risk remains problematic.

ANSWER SHEET						
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