
Ovid x VisualDX 功能導覽

逐步診斷與臨床決策支援，盡在 VisualDX



VisualDx 鑑別診斷工具

VisualDx 是一款基於網頁的臨床決策支援系統，經證實可提升診斷準確性、輔助治療決策，並增強患者安全性。

使用 VisualDx 可以：

- 獲取專科級醫學專業知識
- 識別疾病變異
- 辨識藥物不良反應
- 強化患者教育
- 促進資訊透明、快速且準確臨床決策

- VisualDx 提供簡單明瞭且經同行審查的內容，專為臨床現場設計。
- 所有醫學內容均由專科專家撰寫，並經醫學圖書館員與編輯審核，以確保資訊的準確性與時效性。
- 擁有超過 5,000 種疾病與 42,000 張醫學影像，打造最全面的疾病、症狀與醫學影像資料庫，展現疾病變異，提供具挑戰性案例的解決方案。

開啟VisualDx 首頁

VISUALDX

- > Start Over
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- Diagnosis List

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Version: release-26.1850.1733927338 (build 96c22e8c5)

visualDx. 🔗 🌐 🔊 👤 Allan.Finn@wolterskluwer.com

visualDx.

Clinical Tools

- 1 Diagnosis Lookup
- 2 Build a Differential

My VisualDx

- Recent Activity
- Saved Items
- CME

What's the Diagnosis?

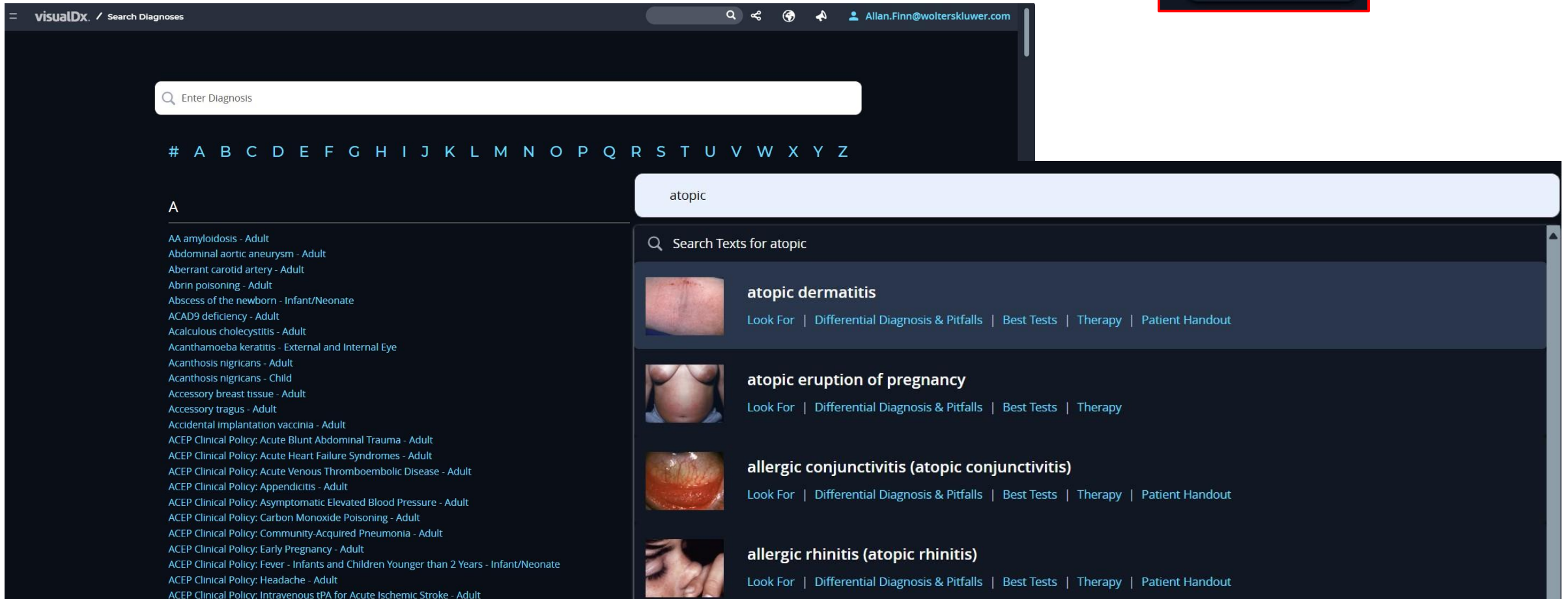
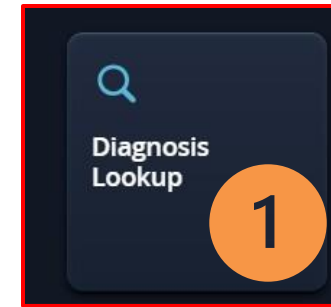
A 62-year-old man visited his doctor about rough, scaly spots on his chest, arms, and hands. The spots had been present for some months but lately they had become more red and inflamed.

[Read more](#)






visualDx.

1. 診斷查詢 Diagnosis Lookup

在現有的診斷資料庫中查找特定疾病資訊。

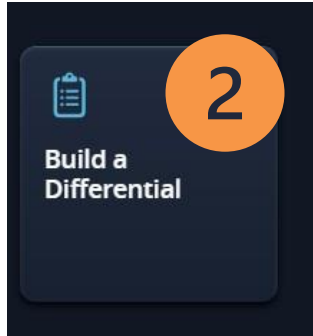


The screenshot shows the visualDx website interface. At the top, there is a search bar with the text "Enter Diagnosis". Below the search bar, there is a navigation menu with letters A through Z. The search results for "atopic" are displayed in a list format. Each result includes a small image, the condition name, and a set of links: "Look For", "Differential Diagnosis & Pitfalls", "Best Tests", "Therapy", and "Patient Handout".

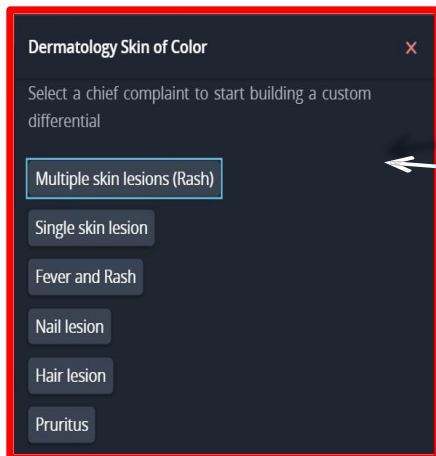
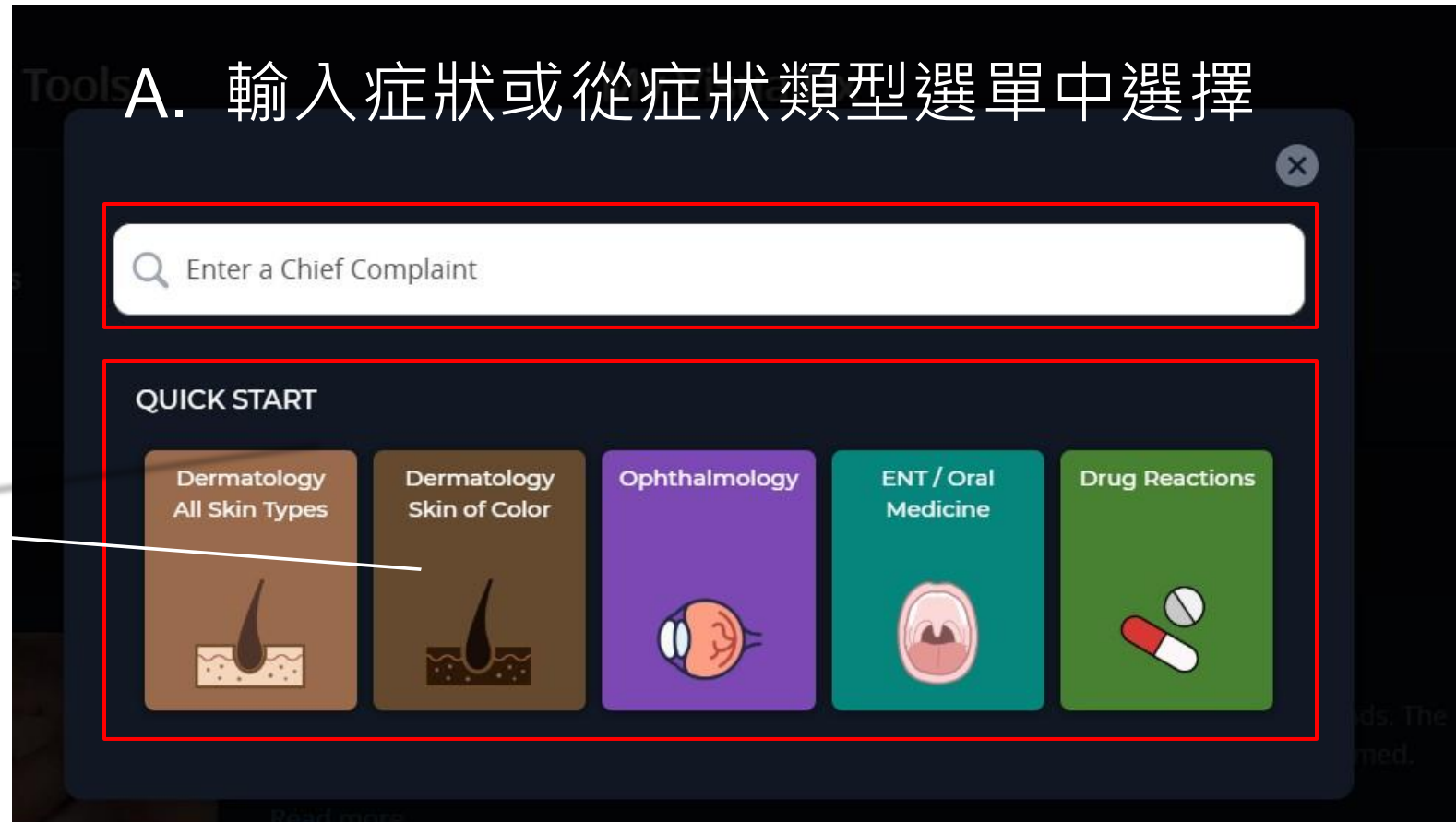
Image	Condition Name	Links
	atopic dermatitis	Look For Differential Diagnosis & Pitfalls Best Tests Therapy Patient Handout
	atopic eruption of pregnancy	Look For Differential Diagnosis & Pitfalls Best Tests Therapy
	allergic conjunctivitis (atopic conjunctivitis)	Look For Differential Diagnosis & Pitfalls Best Tests Therapy Patient Handout
	allergic rhinitis (atopic rhinitis)	Look For Differential Diagnosis & Pitfalls Best Tests Therapy Patient Handout
	juvenile plantar dermatosis (atopic winter feet)	Look For Differential Diagnosis & Pitfalls Best Tests Therapy Patient Handout

2. 建立鑑別診斷 Build Differential

以逐步的方式，輸入症狀、病史或臨床特徵，系統將提供鑑別診斷結果。



A. 輸入症狀或從症狀類型選單中選擇



B. 患者症狀篩選畫面

Workup for Fever

[View this Differential](#)

Enter additional findings and/or use the workup questions below

- Appearance of patient
- Onset of findings
- Symptoms
- Relevant medical history
- Risk factors
- Physical exam
- Skin findings
- Laboratory
- Negative findings
- Travel history
- Additional Findings

- General ▾
- HEENT ▾
 - Dysphagia ⓘ
 - Hearing loss
 - Hoarseness ⓘ
 - Mouth pain
 - Nasal congestion
 - No sore throat
 - Ocular pain
 - Otagia ⓘ
 - Rhinorrhea ⓘ
 - Sore throat
 - Tinnitus ⓘ
- Cardiovascular ▾
- Respiratory ▾
- Digestive/abdominal ▾
- Genitourinary ▾
- Musculoskeletal ▾
- Neurologic ▾

PATIENT AGE

50-59 year old ▾

ASSIGNED SEX AT BIRTH ?

Female ▾

FINDINGS

Fever × Patient appears ill ×

Developed acutely ×

Toggle the to make the finding required ?

實例：依序輸入患者的主訴，以及患者的病史與臨床徵狀

1. 患者主訴

- 1) Fever 發燒
- 2) Short of Breath 呼吸急促
- 3) Fast Heart Rate 心跳加快
- 4) Chest Pain 胸痛
- 5) 我們可以詢問那些問題？

2. 臨床所見

- 1) 病史：患者正在戒菸
- 2) 臨床徵狀：患者因手臂和腿部疼痛而必須坐下

The screenshot shows a medical workup interface titled "Workup for Fever". The interface is dark-themed and includes a sidebar on the left with categories like "Appearance of patient", "Onset of findings", "Symptoms", "Relevant medical history", "Risk factors", "Physical exam", "Skin findings", "Laboratory", "Negative findings", "Travel history", and "Additional Findings". The main area is divided into sections: "General", "HEENT", "Cardiovascular", "Respiratory", "Digestive/abdominal", "Genitourinary", "Musculoskeletal", and "Neurologic". A green circle with the number "1" is overlaid on the "Digestive/abdominal" section, which contains a list of symptoms: Abdominal pain, Constipation, Diarrhea, Nausea, and Vomiting. The "Additional Findings" section at the top right has a green circle with the number "2" overlaid on it. The "FINDINGS" section on the right lists "Fever" and "Patient appears ill" as active findings, along with "Developed acutely", "Dyspnea", "Heart palpitations", and "Chest pain". A "View this Differential" button is located in the top right corner.

1. 患者主訴：依照患者主訴和身體狀態顯示可能的鑑別診斷結果

Search Results

Fever, Patient appears ill, Developed acutely, Dyspnea, Heart palpitations, Chest pain, 50-59 year old Female

23 CONSIDER 1st37 UNCOMMON23 EMERGENCIES32 INFECTIOUS27 DRUG INDUCED60 VIEW ALL

All Skin Types Skin of ColorEdit FindingsDEFAULT VIEW

Hypertensive emergency ▲

Renal

↑ Markedly elevated BP

5

Pulmonary embolism ▲

RR ↑

☑ Prolonged immobility ☑ Oral contraceptives

19

Multisystem inflammatory syndro...

↓ Fever > 24 hrs

☑ Extrapulmonary organ dysfunction
☑ Increased inflammatory markers ☑ COVID-19

1

COVID-19

Severe Disease

↓ Fever may be absent

Bilateral patchy shadows, Ground glass opacities

48

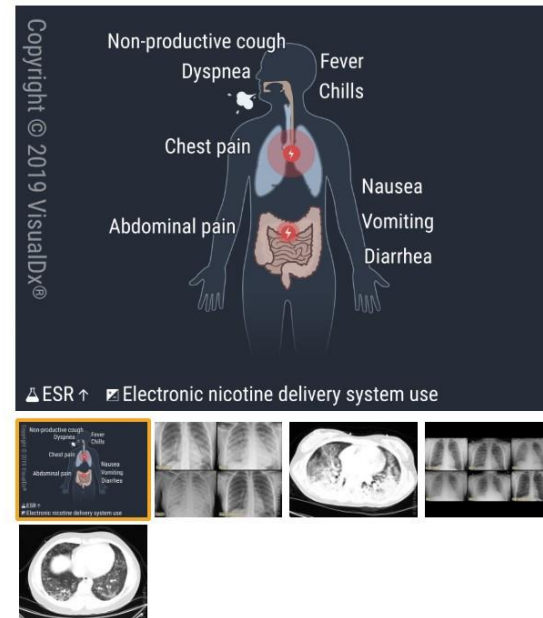
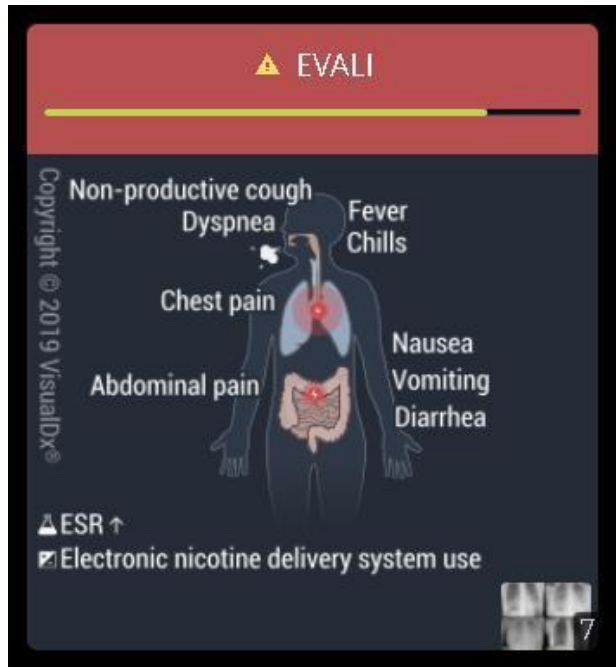
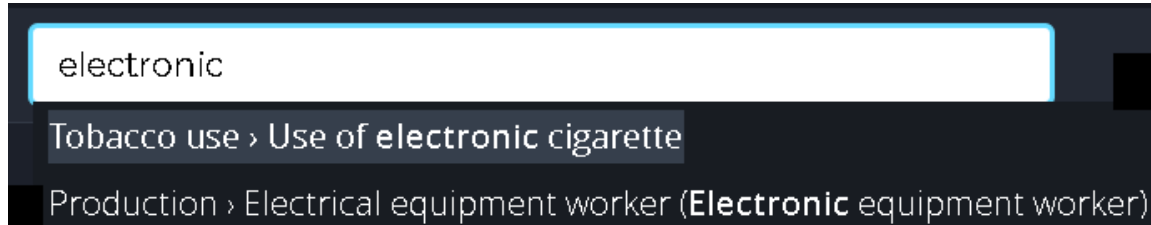
Legionellosis ▲

↓ Fever

14

2. 臨床所見 (Additional Finding)

在更多條件中輸入電子菸



EVALI [↗](#)

▲ POTENTIALLY LIFE-THREATENING EMERGENCY

E-cigarette or vaping product use-associated lung injury (EVALI) is the name given by the Centers for Disease Control and Prevention to the vaping-related condition that has sickened people nationwide. It is characterized by a wide range of clinical symptoms that mimic many acute pulmonary diseases, with 95% of patients reporting more of the following: cough, shortness of breath, chest pain, dyspnea, or tachypnea. Gastrointestinal symptoms are reported in 77% of patients, including abdominal pain, nausea, or vomiting, and up to 85% of patients report symptoms of fatigue, fevers, chills, weight loss, or malaise. Many reported THC use in e-cigarette devices. More e-cigarette or vaping product use-associated lung injury cases were reported. [More](#)

[See Full Article](#)

Other Resources:

[UpToDate](#) [PubMed](#)

Matches 6 of 7 findings: [Edit findings](#)

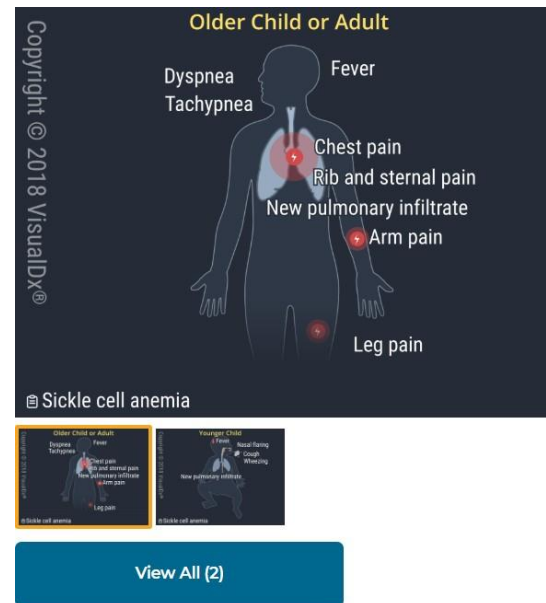
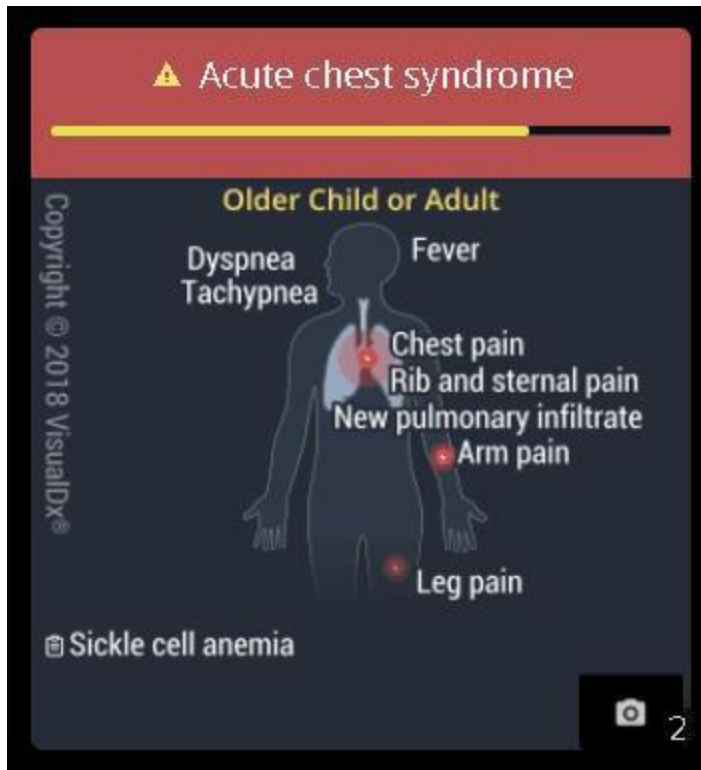
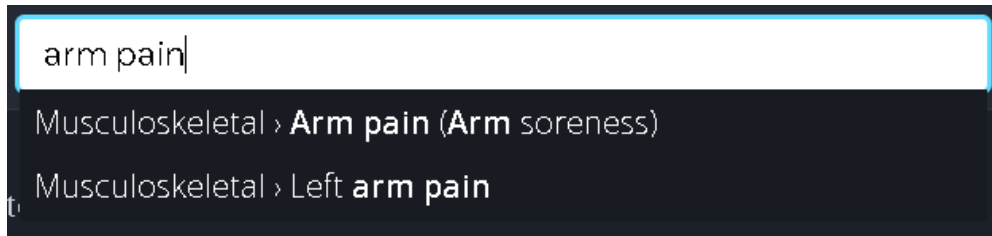
Fever Patient appears ill Developed acutely (days to weeks) Dyspnea Heart palpitations

Matches 5 of 7 findings

Fever
Patient appears ill
Developed acutely (days to weeks)
Dyspnea
Heart palpitations
Chest pain
Use of electronic cigarette

2. 臨床所見 (Additional Finding)

在更多條件中輸入手臂和腿部疼痛



Acute chest syndrome [↗](#)

▲ POTENTIALLY LIFE-THREATENING EMERGENCY

A potentially life-threatening complication of sickle cell disease characterized by lung infiltrates, fever, and respiratory symptoms. Management in children and adults is similar, although the disease is often more severe in adults and associated with bone marrow and fat emboli. It can be triggered by an underlying infection or vaso-occlusive crisis, although in the majority of cases, an identifiable trigger is not determined. Sickle cell disease is the primary risk factor. Within this population, additional risk factors include young age, low fetal hemoglobin, leukocytosis, certain genotypes, asthma, tobacco exposure, recent surgery, or 3 or more severe vaso-occlusive crises in the past year. Management requires hospitalization. [More](#)

[See Full Article](#)

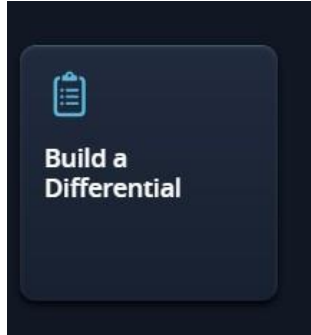
Other Resources:

[UpToDate](#) [PubMed](#)

Matches 6 of 7 findings: [Edit findings](#)

- Fever ✓
- Patient appears ill ✓
- Developed acutely (days to weeks) ✓
- Dyspnea ✓
- Heart palpitations
- Chest pain ✓
- Arm pain ✓

VisualDX使用步驟1：輸入症狀或診斷，系統會依此提供適合的條件供篩選



hyperpig

Search Texts for "hyperpig"

Build a differential diagnosis

- hyperpigmented patch
- hyperpigmented macule
- gingival-alveolar hyperpigmentation

Diagnoses

- post-inflammatory hyperpigmentation

1

Workup for Hyperpigmented patch View this Differential

Enter additional findings and/or use the workup questions below

Additional Findings

- Skin lesion type
- Number of skin lesions
- Distribution of skin findings
- Location of skin finding
- Symptoms/signs
- Onset of findings
- Appearance of patient
- Medical history
- Negative findings
- Additional Findings

- Scalp
 - Scalp
 - Frontal scalp
 - Occipital scalp
 - Parietal scalp
 - Post auricular scalp
 - Temporal scalp
 - Vertex scalp
- Face
- Neck
- Arm
- Hands
- Trunk
- Anogenital
- Leg - skin of
- Foot or toes

PATIENT AGE

30-39 year old

ASSIGNED SEX AT BIRTH

Female

FINDINGS

- Hyperpigmented patch
- Occipital scalp

Toggle the ● to make the finding **required**

VisualDX使用步驟2：依左邊選單項目依序進行徵狀篩選

visualDx / Patient Findings

Workup for Hyperpigmented patch

View this Differential

2

Enter additional findings and/or use the workup questions below

Additional Findings

Distribution Body Location

Scattered Few Scattered Many Widespread Intertriginous Symmetric Extremities

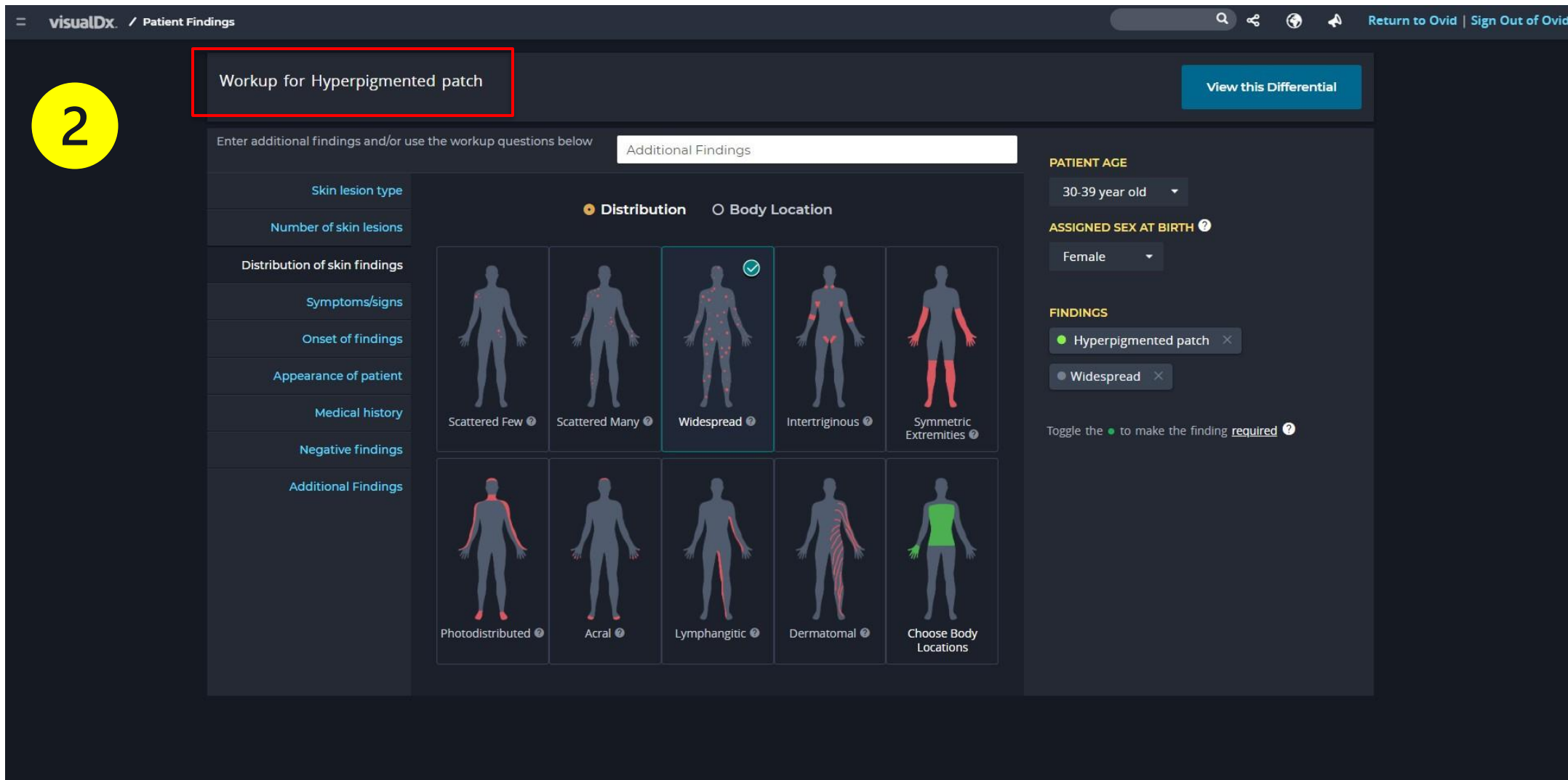
Photodistributed Acral Lymphangitic Dermatomal Choose Body Locations

PATIENT AGE
30-39 year old

ASSIGNED SEX AT BIRTH
Female

FINDINGS
 Hyperpigmented patch Widespread

Toggle the to make the finding required



VisualDX使用步驟2：可就膚色進行篩選

visualDx / Patient Findings

Workup for Hyperpigmented patch View this Differential

Enter additional findings and/or use the workup questions below

SKIN LESION TYPE

Number of skin lesions

Distribution of skin findings

Symptoms/signs

Onset of findings

Appearance of patient

Medical history

Negative findings

Additional Findings

PATIENT AGE
30-39 year old

ASSIGNED SEX AT BIRTH
Female

FINDINGS
● Hyperpigmented patch
● Widespread

Light Skin Dark Skin

Smooth Papule / Plaque
Scaly Papule / Plaque
Eschar

Erythema / Erythroderma
Purpura / Petechiae
Flat / Macular

Vesicular / Pustular
Erosion / Ulcer / Atrophy
Gangrene

Refine Lesion type

Erythema / Erythroderma

Blanching Macule
Blanching Patch
Erythroderma
Telangiectasia

VisualDX使用步驟2：可以排除臨床上沒有發現的徵狀

The screenshot shows the VisualDX Patient Findings interface for a "Workup for Hyperpigmented patch". The interface is dark-themed and includes a top navigation bar with the VisualDX logo, "Patient Findings", and utility icons (search, share, globe, bell). A "Return to Ovid" and "Sign Out of Ovid" link is also present.

The main content area is titled "Workup for Hyperpigmented patch" and includes a "View this Differential" button. Below the title, there is a text input field for "Additional Findings" and a list of workup questions with checkboxes:

- No neurologic findings
- No HEENT findings
- No respiratory findings
- No cardiovascular findings
- No gastrointestinal findings
- No musculoskeletal findings
- No dysmorphic/malformation features
- No medication use (prescription or OTC)

On the left side, there is a vertical menu with the following categories:

- Skin lesion type
- Number of skin lesions
- Distribution of skin findings
- Symptoms/signs
- Onset of findings
- Appearance of patient
- Medical history
- Negative findings
- Additional Findings

On the right side, there are several sections:

- PATIENT AGE**: 30-39 year old (dropdown)
- ASSIGNED SEX AT BIRTH**: Female (dropdown)
- FINDINGS**: A list of findings with toggle buttons:
 - Hyperpigmented patch (checked)
 - Widespread distribution
 - Smooth papule/plaque
 - Rash or multiple lesions
 - Pruritus
 - Fever
 - Developed chronically (months to years)

At the bottom right, there is a toggle instruction: "Toggle the ● to make the finding **required**".

VisualDX使用步驟3：顯示可能結果，可選擇圖示顯示方式

The screenshot displays the VisualDX Search Results interface. At the top, the breadcrumb navigation shows "visualDx / Patient Findings / Search Results". The main title is "Search Results" with a subtitle: "Hyperpigmented patch, Widespread distribution, Rash or multiple lesions, Pruritus, Fever, Developed chronically, 30-39 year old Female". A yellow circle with the number "3" is overlaid on the top left. Below the title, there are filter tabs: "CONSIDER 1st" (17), "CONSIDER 2nd" (43), "EMERGENCIES" (2), "INFECTIOUS" (3), "DRUG INDUCED" (21), and "VIEW ALL" (60). A button labeled "Edit Findings" is visible. The main content area shows a grid of medical images with labels such as "Urticaria pigmentosa", "Cutaneous Rosai-Dorfman disease", "Cutaneous T-cell lymphoma", "Arsenic poisoning", "Ashy dermatosis", "Epidermolysis", "Alopecia mucinosa", "Lichen planus pigmentosus", "Tinea nigra", "Addison disease", "Nephrogenic systemic fibrosis", and "Hemochromatosis". A settings menu is open on the right side, showing options: "PHOTOS", "DEFAULT VIEW", "PHOTOS" (checked), "SYMPTICONS", "LIST", and "IMAGE SIZE: MEDIUM". A red box highlights the settings menu and a portion of the image grid at the bottom, which includes "Atopic dermatitis", "Drug-induced pigmentation", and "Lichen planus".

VisualDX使用步驟4：瀏覽結果，若有年齡差異，會顯示不同年齡層結果

visualDX / Atopic dermatitis

Atopic dermatitis in Adult **4**

See also in: [Cellulitis DDx](#), [External and Internal Eye](#)

[Print](#) [Patient Handout](#) [Save Diagnosis](#) [Images \(115\)](#)

Contributors: [Azeen Sadeghian MD](#), [Ryan Fan BA](#), [Jeffrey M. Cohen MD](#), [Susan Burgin MD](#)

Synopsis

Atopic dermatitis (eczema) is a chronic, relapsing, pruritic condition that is often associated with allergic rhinitis and/or asthma. Infants and children are most often affected, with 85% of cases appearing in the first year of life and 95% of cases appearing by 5 years. Uncommonly, the condition may persist into, or even arise in, adulthood. Less than 1% of adults are affected by atopic dermatitis. With increased understanding of immunosenescence, atopic dermatitis is increasingly being recognized in the older adult population.

In infants, the disease involves primarily the face, scalp, torso, and extensor aspects of extremities. In children and adults, the disease usually involves chiefly the flexural aspects of extremities, but it may be more generalized. In adults, flexural skin may be clear and disease may be focal or widespread. Follicular patterns of atopic dermatitis (ie, follicular eczema) are more common in persons with darker skin colors.

Atopic dermatitis may be categorized as follows:

- Acute – erythema, vesicles, bullae, weeping, crusting
- Subacute – scaly plaques, papules, round erosions, crusts
- Chronic eczema – lichenification, scaling, hyper- and hypopigmentation

The cause of atopic dermatitis is unknown. Genetic and environmental predisposing factors exist. Multiple loci have been associated with atopic dermatitis. A family history of atopic dermatitis is common.

All Skin Types

Atopic dermatitis in Infant/Neonate

See also in: [Cellulitis DDx](#), [External and Internal Eye](#)

[Print](#) [Patient Handout](#) [Save Diagnosis](#) [Images \(115\)](#)

Child
Adult

Older Children and Adolescents

Hyperkeratosis of neck
Hyperpigmentation of neck

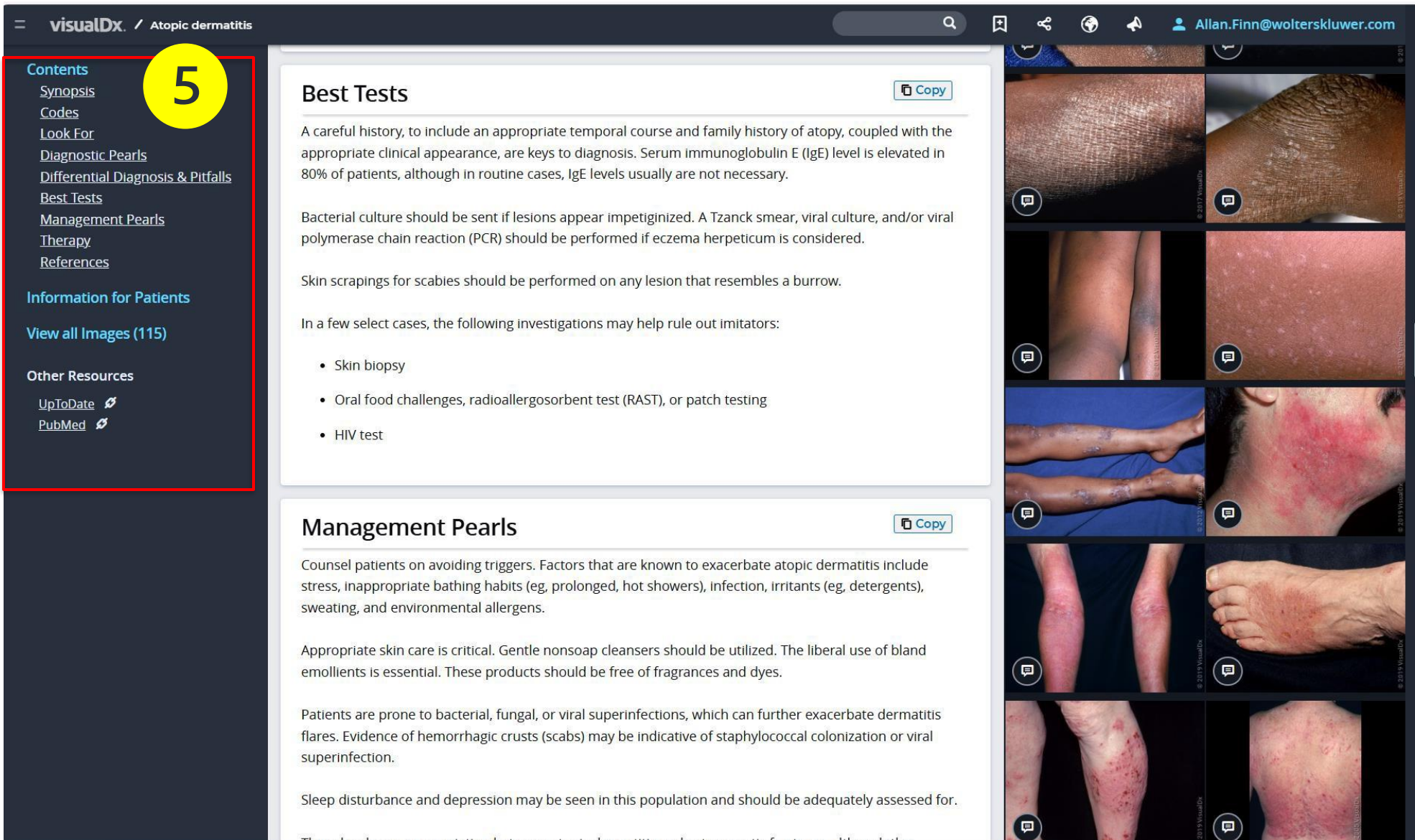
Erythema
Pruritus
Hyperlinear palms

Lichenified plaques
Dry skin

Flexural distribution Antecubital fossa
Popliteal fossa Face Neck Extremities
Extensor distribution Face Scalp Arms
Legs Atopy Seborrheic dermatitis

Flexural distribution Antecubital fossa
Popliteal fossa Wrists Ankles Neck
Keratosis pilaris Atopy

VisualDX使用步驟5：依左邊選單瀏覽所需文字內容



visualDX / Atopic dermatitis

5

Contents

- Synopsis
- Codes
- Look For
- Diagnostic Pearls
- Differential Diagnosis & Pitfalls
- Best Tests**
- Management Pearls
- Therapy
- References

Information for Patients

[View all Images \(115\)](#)

Other Resources

- [UpToDate](#)
- [PubMed](#)

Best Tests

A careful history, to include an appropriate temporal course and family history of atopy, coupled with the appropriate clinical appearance, are keys to diagnosis. Serum immunoglobulin E (IgE) level is elevated in 80% of patients, although in routine cases, IgE levels usually are not necessary.

Bacterial culture should be sent if lesions appear impetiginized. A Tzanck smear, viral culture, and/or viral polymerase chain reaction (PCR) should be performed if eczema herpeticum is considered.

Skin scrapings for scabies should be performed on any lesion that resembles a burrow.

In a few select cases, the following investigations may help rule out imitators:

- Skin biopsy
- Oral food challenges, radioallergosorbent test (RAST), or patch testing
- HIV test

Management Pearls


Counsel patients on avoiding triggers. Factors that are known to exacerbate atopic dermatitis include stress, inappropriate bathing habits (eg, prolonged, hot showers), infection, irritants (eg, detergents), sweating, and environmental allergens.

Appropriate skin care is critical. Gentle nonsoap cleansers should be utilized. The liberal use of bland emollients is essential. These products should be free of fragrances and dyes.

Patients are prone to bacterial, fungal, or viral superinfections, which can further exacerbate dermatitis flares. Evidence of hemorrhagic crusts (scabs) may be indicative of staphylococcal colonization or viral superinfection.

Sleep disturbance and depression may be seen in this population and should be adequately assessed for.

There has been an association between atopic dermatitis and osteoporotic fractures, although the



VisualDX使用步驟6：右邊選單瀏覽收錄的所有臨床圖像

visualDX / Atopic dermatitis

Atopic dermatitis in Adult

See also in: [Cellulitis DDX](#), [External and Internal Eye](#)

Print Patient Handout Save Diagnosis Images (115)

Contributors: Azeen Sadeghian MD, Ryan Fan BA, Jeffrey M. Cohen MD, Susan Burgin MD

Synopsis

Atopic dermatitis (eczema) is a chronic, relapsing, pruritic condition that is often associated with allergic rhinitis and/or asthma. Infants and children are most often affected, with 85% of cases appearing in the first year of life and 95% of cases appearing by 5 years. Uncommonly, the condition may persist into adulthood. Less than 1% of adults are affected by atopic dermatitis. With increasing understanding of immunosenescence, atopic dermatitis is increasingly being recognized in the adult population.

In infants, the disease involves primarily the face, scalp, torso, and extensor aspects of extremities. In children and adults, the disease usually involves chiefly the flexural aspects of extremities, but may be more generalized. In adults, flexural skin may be clear and disease may be focal or widespread. Patterns of atopic dermatitis (ie, follicular eczema) are more common in persons with darker skin.

Atopic dermatitis may be categorized as follows:

- Acute – erythema, vesicles, bullae, weeping, crusting
- Subacute – scaly plaques, papules, round erosions, crusts
- Chronic eczema – lichenification, scaling, hyper- and hypopigmentation

The cause of atopic dermatitis is unknown. Genetic and environmental predisposing factors and environmental triggers have been associated with atopic dermatitis. A family history of atopic dermatitis is common.

All Skin Types Skin of Color View all Images (115)

Infants and Young Children Alopecia Pruritus Dry skin Vesicles Lichenified plaques Crusted plaques Erythematous scale

Older Children and Adolescents Hyperkeratosis of neck Hyperpigmentation of neck Erythema Pruritus Hyperlinear palms Dry skin

Flexural distribution Antecubital fossa Popliteal fossa Face Neck Extremities Atopy Extensor distribution Face Scalp Arms Legs Atopy Seborrheic dermatitis

Atopic dermatitis in Adult

See also in: [Cellulitis DDX](#), [External and Internal Eye](#)

All Skin Types Skin of Color Filter Images Print Captions

Adult Scaly, erythematous papules and plaques Dry skin Pruritus Lichenified plaques Excoriated skin lesions

Infants and Young Children Alopecia Pruritus Dry skin Vesicles Lichenified plaques Crusted plaques Erythematous scale

Older Children and Adolescents Hyperkeratosis of neck Hyperpigmentation of neck Erythema Pruritus Hyperlinear palms Dry skin

Flexural distribution Antecubital fossa Popliteal fossa Face Neck Extremities Atopy Extensor distribution Face Scalp Arms Legs Atopy Seborrheic dermatitis

VisualDX使用步驟7：連結外部資源

The image shows a composite screenshot of two medical websites. On the left is the VisualDX interface for 'Atopic dermatitis in Adult'. It features a sidebar with navigation links like 'Synopsis', 'Codes', and 'Look For'. The main content area displays the title 'Atopic dermatitis in Adult' and a 'Synopsis' section. The synopsis describes atopic dermatitis as a chronic, relapsing, pruritic condition often associated with allergic rhinitis and/or asthma. It notes that 85% of cases appear in the first year of life and 95% by 5 years, with less than 1% of adults affected. The text also discusses clinical manifestations in infants and adults, and categorization of the disease. On the right is the UpToDate website, showing search results for 'Atopic dermatitis'. The search results include sections for 'Treatment of atopic dermatitis (eczema)', 'Atopic dermatitis (eczema): Pathogenesis, clinical manifestations, and diagnosis', 'Overview of dermatitis (eczematous dermatoses)', and 'Management of severe, refractory atopic dermatitis (eczema) in children'. A red box highlights the 'Other Resources' section in the VisualDX sidebar, which contains links to 'UpToDate' and 'PubMed'. A large yellow circle with the number '7' is overlaid on this section.

VisualDX Interface:

- Header: visualDX / Atopic dermatitis
- Page Title: Atopic dermatitis in Adult
- See also in: Cellulitis DDX, External and Internal Eye
- Actions: Print, Patient Handout, Save Diagnosis, Images (115)
- Contributors: Azeen Sadeghian MD, Ryan Fan BA, Jeffrey M. Cohen MD, Susan Burgin MD
- Section: Synopsis
- Text: Atopic dermatitis (eczema) is a chronic, relapsing, pruritic condition that is often associated with allergic rhinitis and/or asthma. Infants and children are most often affected, with 85% of cases appearing in the first year of life and 95% of cases appearing by 5 years. Uncommonly, the condition may persist into, or even arise in, adulthood. Less than 1% of adults are affected by atopic dermatitis. With increased understanding of immunosenescence, atopic dermatitis is increasingly being recognized in the older adult population.
- Text: In infants, the disease involves primarily the face, scalp, torso, and extensor aspects of extremities. In children and adults, the disease usually involves chiefly the flexural aspects of extremities, but it may be more generalized. In adults, flexural skin may be clear and disease may be focal or widespread. Follicular patterns of atopic dermatitis (ie, follicular eczema) are more common in persons with darker skin colors.
- Text: Atopic dermatitis may be categorized as follows:
 - Acute – erythema, vesicles, bullae, weeping, crusting
 - Subacute – scaly plaques, papules, round erosions, crusts
 - Chronic eczema – lichenification, scaling, hyper- and hypopigmentation
- Text: The cause of atopic dermatitis is unknown. Genetic and environmental predisposing factors exist. Multiple loci have been associated with atopic dermatitis. A family history of atopic dermatitis is common.

UpToDate Interface:

- Search: Atopic dermatitis
- Results: Showing results for Atopic dermatitis
- Search instead: Eczema herpeticum, Acute palmoplantar eczema, Nummular dermatitis
- Section: Treatment of atopic dermatitis (eczema)
- Section: Atopic dermatitis (eczema): Pathogenesis, clinical manifestations, and diagnosis
- Section: Overview of dermatitis (eczematous dermatoses)
- Section: Management of severe, refractory atopic dermatitis (eczema) in children

7

VisualDX使用步驟8：提供患者衛教資訊

visualDX / Atopic dermatitis

Contents

- Synopsis
- Codes
- Look For
- Diagnostic Pearls
- Differential Diagnosis & Pitfalls
- Best Tests
- Management Pearls
- Therapy
- References

Information for Patients

View all Images (115)

Other Resources

- UpToDate
- PubMed

Patient Information for Atopic dermatitis in Adult

Print E-Mail English

8 Images (115)

Contributors: Medical staff writer

Overview

Eczema (atopic dermatitis) is a common, chronic skin condition associated with dry skin that begins with itching or irritation that is further aggravated by scratching followed by a red, flaky rash. This condition often runs in families and frequently occurs with other allergic-related conditions such as asthma, hives (urticaria), food allergies, skin sensitivity, and hay fever (allergic rhinitis). Eczema commonly waxes and wanes in response to various environmental factors. Skin infections, excessive heat, winter (or cold, dry climates), fragrances, detergents / soaps, abrasive clothing (eg, scratchy wools), chemicals, smoke, and stress may trigger eczema to flare up or worsen. Scratching increases the chances of developing an infection because it increases breaks in the skin. While these environmental triggers may worsen eczema, they are not the cause of the skin condition.

The primary cause of eczema is an overactive immune system that results in skin inflammation, changes in the normal skin bacteria, and breaks (fissures) in the skin barrier that make individuals more susceptible to bacterial, viral, and fungal infections. The redness, scaling, and thickening of the skin in eczema is a direct result of the increased inflammation in these individuals.

Who's At Risk

Infants and children are most frequently affected by eczema, although this condition may present for the first time in adulthood. Approximately one-third of children with eczema may have disease that persists into their adult years, and their skin lesions in adulthood may be different than what they experienced in childhood. There is no cure for eczema, and it is not contagious.

All Skin Types Skin of Color View all Images (115)

Adult

- Scaly, erythematous papules and plaques
- Dry skin
- Pruritus
- Lichenified plaques
- Excoriated skin lesions

Flexural distribution Antecubital fossa Popliteal fossa Face Neck Extremities Atopy

Infants and Young Children

- Alopecia
- Dry skin
- Vesicles
- Erythematous scale
- Pruritus
- Lichenified plaques
- Crusted plaques

Extensor distribution Face Scalp Arms Legs Atopy Seborrheic dermatitis

Older Children and Adolescents

- Hyperkeratosis of neck
- Hyperpigmentation of neck
- Erythema
- Pruritus
- Hyperlinear palms
- Lichenified plaques
- Dry skin

Flexural distribution Antecubital fossa Popliteal fossa Wrists Ankles Neck Keratosis pilaris Atopy

VisualDX特色內容：常見藥物不良反應


visualDx / Text Search - "ibuprofen" Search Sign Out

38 results for "ibuprofen"

[Start Over](#) Results 1 - 10 of 38

Fixed Drug Eruption

Matching Findings: **ibuprofen**
... and other sulfonamides), naproxen, **ibuprofen**, tetracyclines, other ... [Read more](#)



visualDx / Fixed drug eruption Search Allan.Finn@wolterskluwer.com

Fixed drug eruption in Infant/Neonate

See also in: [Cellulitis DDx](#), [Anogenital, O...](#)

[Print](#) [Patient Handout](#) [Save Diagnosis](#) [Images \(147\)](#)

Child
Adult


Contributors: Rajini Murthy MD, Elizabeth B. Wallace MD, Belinda Tan MD, PhD, Susan Burgin MD

Synopsis

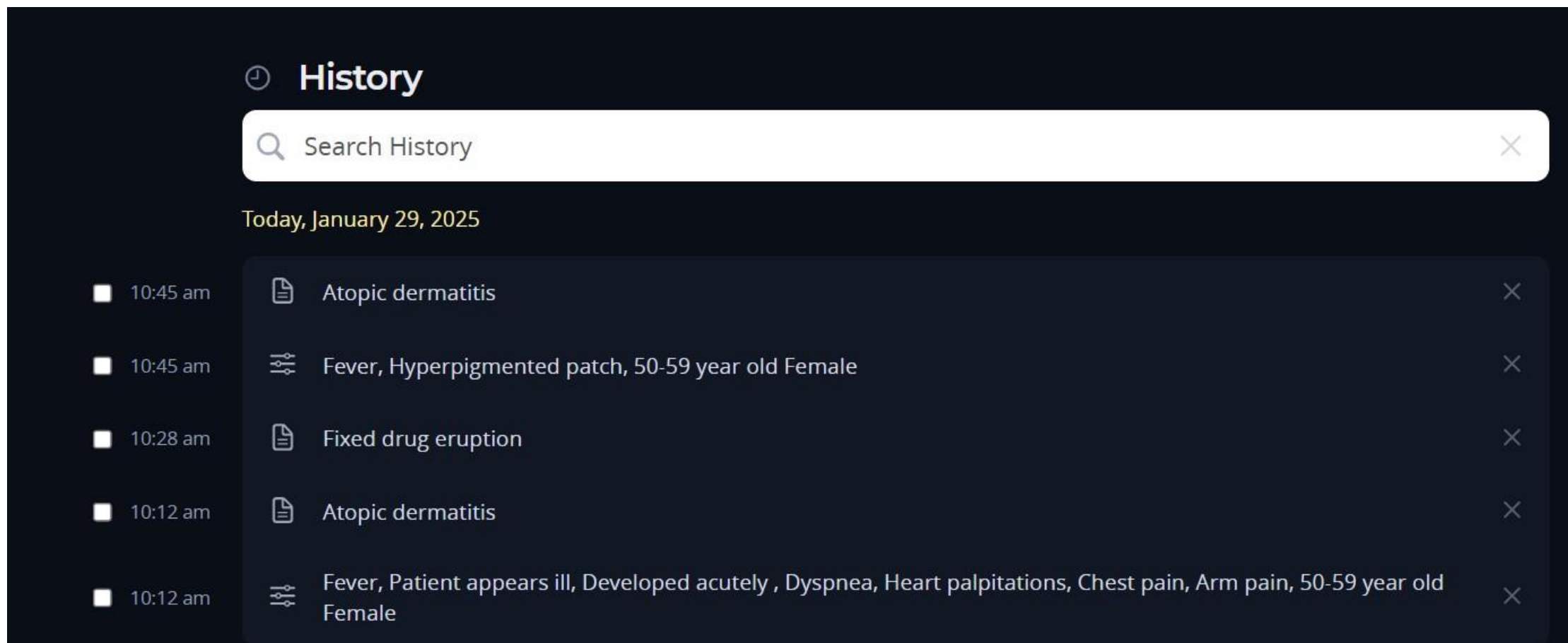
Fixed drug eruption (FDE) is a cutaneous adverse drug reaction that recurs at the same body site each time the individual is re-exposed to the culprit drug. One or more sharply demarcated, red or violaceous patches that are typically round develop within minutes to hours of exposure to the inciting drug. These may vary from 0.5 to several centimeters in size. They are usually asymptomatic, although burning, pain, or pruritus may occur. While any cutaneous surface may be affected, the oral and anogenital mucosa are most frequently involved.

FDE is most commonly solitary, but some individuals may develop multiple patches. There may be an increasing number of patches seen with each exposure. Healing with [postinflammatory hyperpigmentation](#) is common. Atypical variants include nonpigmenting and generalized blistering forms.

[View all Images \(147\)](#)



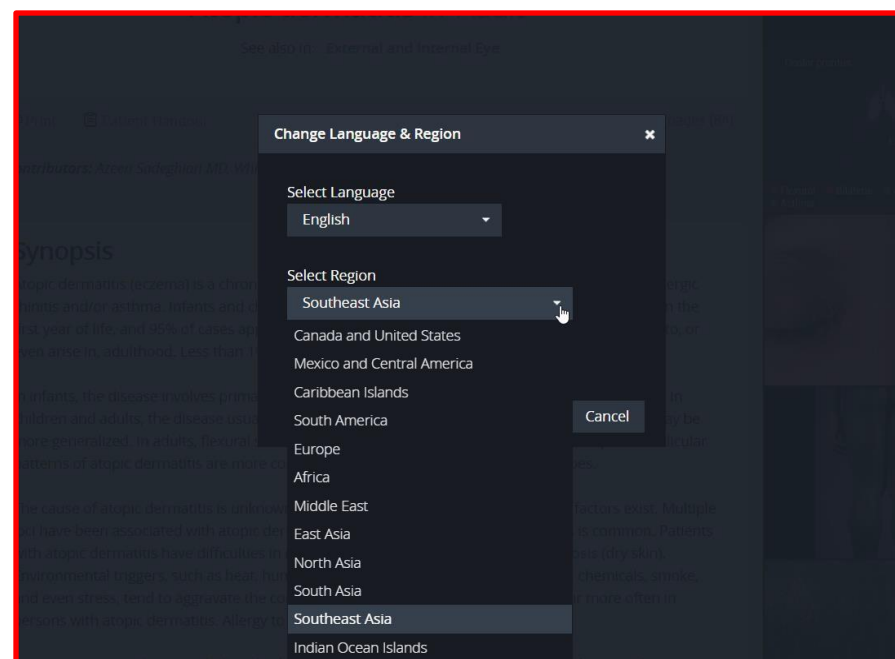
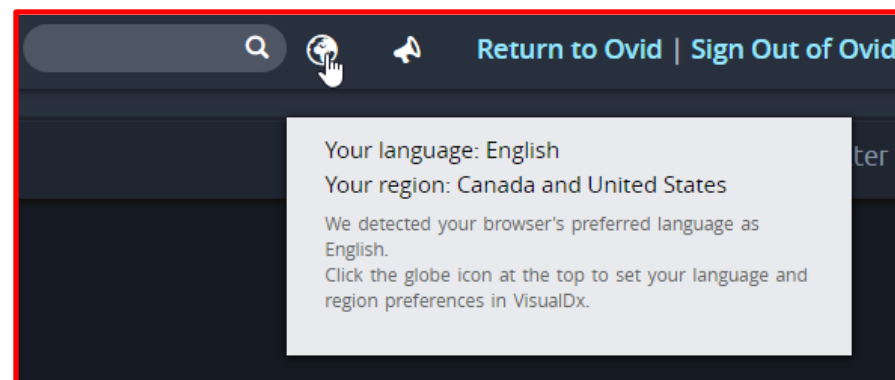
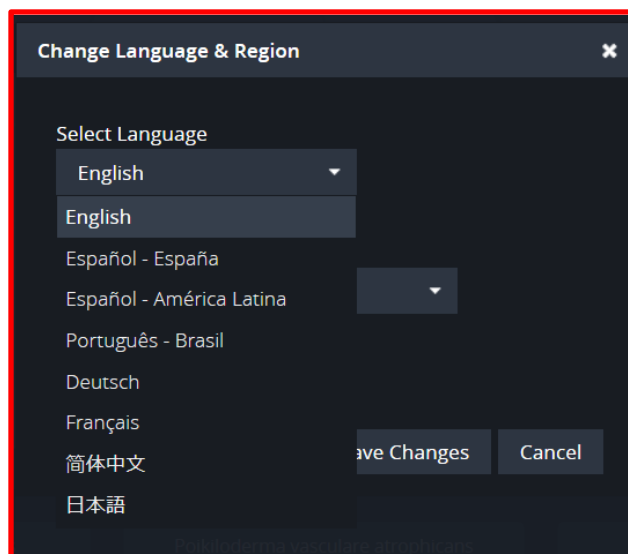
VisualDX特色功能：查詢歷程



The screenshot displays the 'History' section of the VisualDX interface. At the top, there is a search bar labeled 'Search History' with a magnifying glass icon on the left and a close 'X' icon on the right. Below the search bar, the date 'Today, January 29, 2025' is shown. The history list contains five entries, each with a square checkbox on the left, a timestamp, a document icon or filter icon, a text description, and a close 'X' icon on the right.

Timestamp	Icon	Description	Action
10:45 am	Document	Atopic dermatitis	Close
10:45 am	Filter	Fever, Hyperpigmented patch, 50-59 year old Female	Close
10:28 am	Document	Fixed drug eruption	Close
10:12 am	Document	Atopic dermatitis	Close
10:12 am	Filter	Fever, Patient appears ill, Developed acutely , Dyspnea, Heart palpitations, Chest pain, Arm pain, 50-59 year old Female	Close

VisualDX特色功能：依地區顯示公共衛生重點



VisualDx 鑑別診斷工具

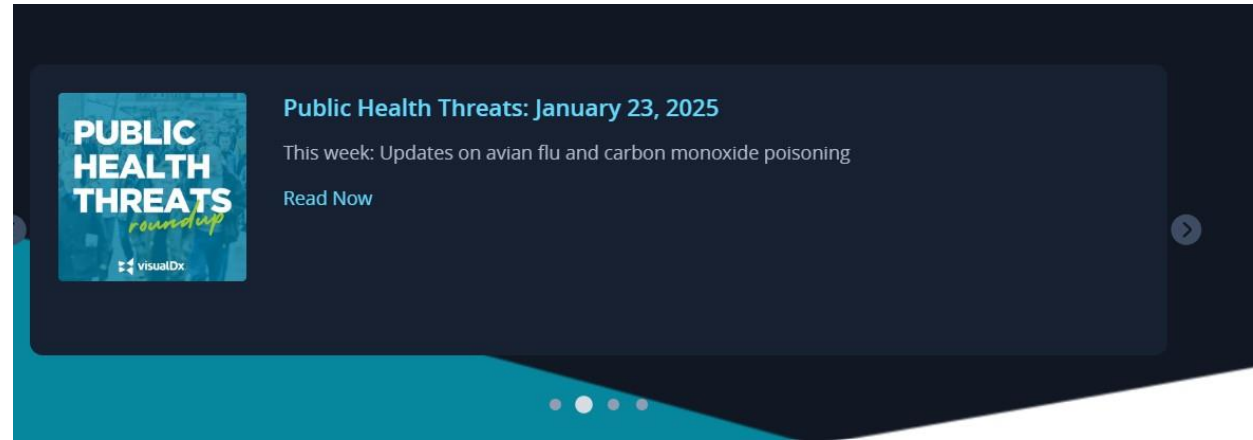
讓您的學生、住院醫師和臨床醫師使用醫學領域最優秀的鑑別診斷工具，以提升診斷準確性、輔助治療決策，並增進患者安全。

使用 VisualDx 可以：

- 迅速建立患者專屬鑑別診斷
- 依主訴提供專家撰寫的引導式診斷問題
- 透過主要症狀搜尋所有可能的疾病
- 辨識藥物不良反應
- 與電子病歷整合，協助臨床醫師做出自信且準確的診斷
- 快速獲取治療指引、管理資訊、治療方案等關鍵內容
- 透過詳細描述與圖片與患者溝通關鍵診斷

VisualDx選單

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FAQs	
Contact Support	



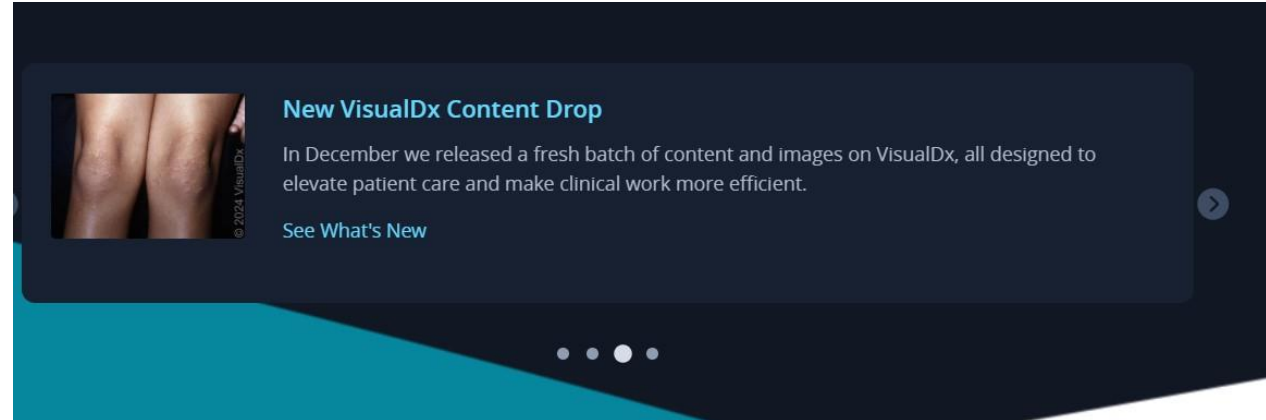
PUBLIC HEALTH THREATS
roundup
VisualDx

Public Health Threats: January 23, 2025

This week: Updates on avian flu and carbon monoxide poisoning

[Read Now](#)

Navigation: 4 dots, 3rd dot active, right arrow



New VisualDx Content Drop

In December we released a fresh batch of content and images on VisualDx, all designed to elevate patient care and make clinical work more efficient.

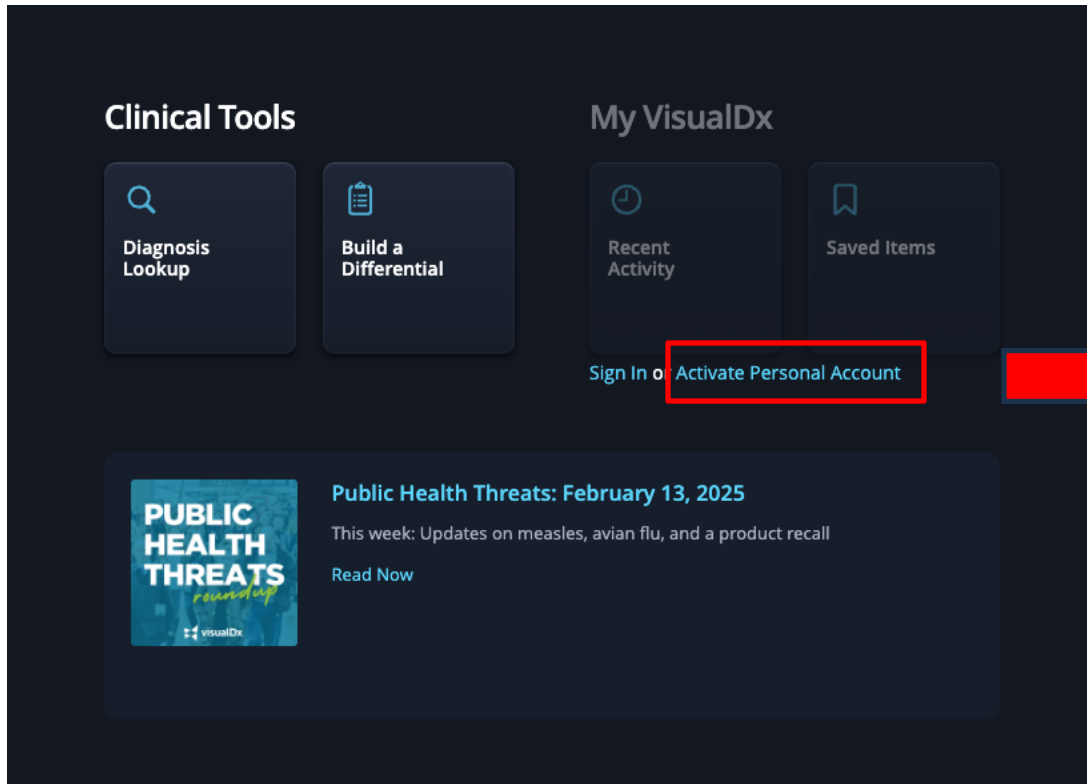
[See What's New](#)

Navigation: 4 dots, 3rd dot active, right arrow

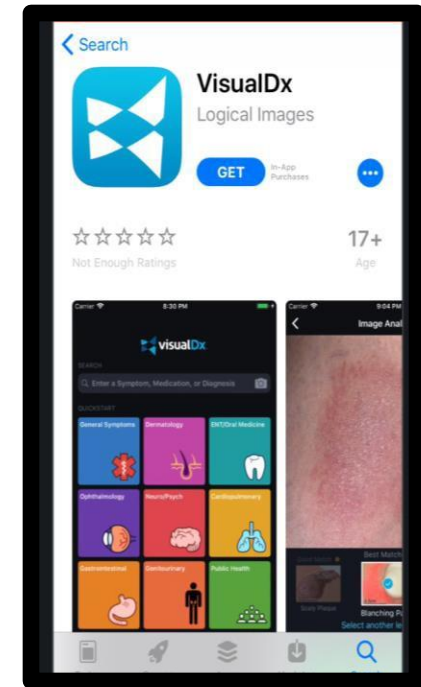
安裝VisualDX APP

必須完成步驟1及步驟2之後再下載APP：

1. 在院內IP範圍內登入VisualDX網站
2. 點選，填寫相關資訊，建立個人帳號
3. 在手機下載APP，輸入步驟2申請的帳號密碼，完成安裝。



A screenshot of the 'Create a Personal Account' form. The form has a dark background and a white border. It contains the following fields: 'E-mail (username)', 'Password', 'Verify Password', 'First Name', and 'Last Name'. There are also dropdown menus for 'Please Select Profession', 'Please Select Specialty', and 'Reason(s) for joining VisualDx'. A red box highlights the 'Create Personal Account' button at the bottom.



謝謝