

Fisa Pacient Pneumopatii Interstitiale Difuze

Nume Pacient		Varsta:		ani
CNP				
Adresa			<input type="checkbox"/> Urban	<input type="checkbox"/> Rural
Telefon				
Medic curant				

DIAGNOSTIC:	
Data diagnostic:	___ / ___ / _____
Deces? <input type="checkbox"/> Nu <input type="checkbox"/> Da	Data deces: ___ / ___ / _____

Date clinice:	G = _____ Kg	T = _____ cm	IMC = _____
<i>Debutul simptomelor (luni anterior):</i> _____			

<i>Dispnee de efort</i> <input type="checkbox"/> nu <input type="checkbox"/> da mMRC = _____	<i>Hipocratism</i> <input type="checkbox"/> nu <input type="checkbox"/> da _____
<i>Tuse</i> <input type="checkbox"/> nu <input type="checkbox"/> da _____	<i>Raluri in velcro</i> <input type="checkbox"/> nu <input type="checkbox"/> da _____
<i>Febra</i> <input type="checkbox"/> nu <input type="checkbox"/> da _____	<i>Miopatie</i> <input type="checkbox"/> nu <input type="checkbox"/> da _____
<i>Dureri toracice</i> <input type="checkbox"/> nu <input type="checkbox"/> da _____	<i>Poliartralгии</i> <input type="checkbox"/> nu <input type="checkbox"/> da _____
<i>Wheezing</i> <input type="checkbox"/> nu <input type="checkbox"/> da _____	<i>Deformari articulare</i> <input type="checkbox"/> nu <input type="checkbox"/> da _____
<i>Fatigabilitate</i> <input type="checkbox"/> nu <input type="checkbox"/> da _____	<i>Sdr. Raynaud</i> <input type="checkbox"/> nu <input type="checkbox"/> da _____
<i>Anxietate</i> <input type="checkbox"/> nu <input type="checkbox"/> da _____	<i>Eritem nodos</i> <input type="checkbox"/> nu <input type="checkbox"/> da _____
<i>Modificari ORL</i> <input type="checkbox"/> nu <input type="checkbox"/> da _____	<i>Modificari cutanate</i> <input type="checkbox"/> nu <input type="checkbox"/> da _____
<i>Tulburari de vedere</i> <input type="checkbox"/> nu <input type="checkbox"/> da _____	

Antecedente familiale? <input type="checkbox"/> Nu <input type="checkbox"/> Da: _____

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Istoric fumat / noxe respiratorii / medicatie

Istoric fumat Niciodata Fumator activ Ex-fumator _____ pachete-an

data start

___/___/_____

data stop

___/___/_____

Noxe respiratorii Nu Da: _____ Durata: _____

Medicamente folosite pe termen lung:

Medicatie cu potential toxic pulmonar? *amiodarona, busulfan, ciclofosfamida, metotrexat, IEC, aspirina, sarurile de aur, penicilamina, nitrofurantoin, sulfasalazina, statine, droguri...*

(<http://www.pneumotox.com>) Nu Da

Pneumoalergeni

Profesia _____ HOBBY: _____

Locuinta (in care au aparut simptomele): mucegai, inundatii, sera de flori, baie cu cada,
 perdea de dus, aer conditionat, nebulizator, pisica, perne/pilote cu puf

Pasari: sunteti crescator _____, aveti contact ocazional _____, ati observat simptome in contact cu pasarile sau curand dupa? _____ (porumbei, canari, papagali, gaini, rate, curcani etc)

PROFESIUNE: textile _____, fan _____, fabricarea branzei _____, crescator pasari _____, crescator animale _____, pielarie/tabacarie _____, ciupercarie _____, sticlaria _____, gradinarit cu insecticide/pesticide _____, curatenie _____, prelucrarea lemnului _____, biblioteca sau arhiva _____

Machine operator's lung, *culegator de ciuperci*, *enzyme/detergent*, *lucrator in malt*, *vinificatie (mucegai de struguri)*, *soareci de laborator*, *scoici*. Ocazional: *balneoterapie*, *sauna*, *compost*

Serologie pneumonite (Alergeni IgG-Specifice)

Rezultate:

Plamanul crescatorilor de pasari: Proteine serice, pene si dejectii de:

perusi, porumbel, pagal

Plamanul fermierului: *Micropolyspora faeni*, *Thermoactinomyces vulgaris*, *Aspergillus fumigatus*, *Dermatophagoides farinae*,
 Dermatophagoides pteronyssinus, *Fungi amestec*, *Cladosporium herbarum*, *Stachybotrys atra*, *Candida albicans*, *Alternaria alternata*

Alti alergeni: _____

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Laborator

VSH: _____ PCR: _____ HLG: _____

Creatinina: _____ Alte: _____

Markeri Imunologici efectuat Rezultate

ACS

Receptor solubil IL2

(Sarcoidoza)

Ac anti MB glomerulara

(Goodpasture)

CIC (activitate boli

autoimmune)

Anti GMCSF (Proteinoza

alveolara)

Ac c-ANCA (Wegener)

Ac p-ANCA (Churg-Strauss,

PAM)

Factor reumatoid (AR)

Ac-anti CCP (AR)

ANA depistaj (IF)

Profil ANA (Imunoblot)

U1nRNP/Sm: (boala mixta)

Sm: (LES)

SS-A (Ro): (Sjogren, LES)

Ro 52

SS-B (La): (Sjogren, LES)

Scl-70: (Sclerodermie)

PM/Scl: (Sclerodermie-
Polimiozita/Dermatomiozita)

Jo-1: (dermatomiozita/polimiozita)

Centromer: (CREST)

PCNA: (LES)

ds DNA: (LES)

nucleozomi: (LES)

histone: (LES indus medicamentos)

proteina P-ribozomala: (LES)

AMA-M2

Profil Miozita

(polimiozita/dermatomiozita/
sindrom antisintetaza)

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Explorari functionale

SaO₂, Spirometrie

Data efectuării	SaO ₂	CVF	VEMS	VEMS/CVF
___/___/___	___%	___ L ___%	___ L ___%	___%
___/___/___	___%	___ L ___%	___ L ___%	___%
___/___/___	___%	___ L ___%	___ L ___%	___%
___/___/___	___%	___ L ___%	___ L ___%	___%
___/___/___	___%	___ L ___%	___ L ___%	___%
___/___/___	___%	___ L ___%	___ L ___%	___%
___/___/___	___%	___ L ___%	___ L ___%	___%
___/___/___	___%	___ L ___%	___ L ___%	___%
___/___/___	___%	___ L ___%	___ L ___%	___%
___/___/___	___%	___ L ___%	___ L ___%	___%
___/___/___	___%	___ L ___%	___ L ___%	___%

DLCO

Data efectuării	DLCO	CPT	VR
___/___/___	___%	___%	___%
___/___/___	___%	___%	___%
___/___/___	___%	___%	___%
___/___/___	___%	___%	___%
___/___/___	___%	___%	___%
___/___/___	___%	___%	___%
___/___/___	___%	___%	___%

Pletismografie

Data efectuării	CPT	VR	CRF
___/___/___	___%	___%	___%
___/___/___	___%	___%	___%
___/___/___	___%	___%	___%
___/___/___	___%	___%	___%
___/___/___	___%	___%	___%
___/___/___	___%	___%	___%
___/___/___	___%	___%	___%

6MWT

Data efectuării	DISTANTA	SaO ₂ initial → final	Dispnee BORG initial → final	Fatigabilitate BORG initial → final
___/___/___	___ m ___%	___% → ___%	___ → ___	___ → ___
___/___/___	___ m ___%	___% → ___%	___ → ___	___ → ___
___/___/___	___ m ___%	___% → ___%	___ → ___	___ → ___
___/___/___	___ m ___%	___% → ___%	___ → ___	___ → ___
___/___/___	___ m ___%	___% → ___%	___ → ___	___ → ___
___/___/___	___ m ___%	___% → ___%	___ → ___	___ → ___

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Radiografie Torace

Data efectuării: ____ / ____ / ____

- | | | |
|---|--|--------------------------------------|
| <input type="checkbox"/> Opacitati reticulare bilateral | <input type="checkbox"/> Macronoduli | <input type="checkbox"/> Pleurezie |
| <input type="checkbox"/> Procese de condensare | <input type="checkbox"/> Micronoduli | <input type="checkbox"/> Pneumotorax |
| <input type="checkbox"/> Geam mat | <input type="checkbox"/> Adenopatii hilare | |

Distributie/Localizare:

Observatii:

CT Torace

Data efectuării: ____ / ____ / ____

HRCT? da (sectiuni sub 2 mm) nu

Pattern HRCT	<input type="checkbox"/> UIP	da / nu da / nu da / nu da / nu	- anomalii de tip reticular - fagure de miere ± bronșiectazii de tractiune - distributie predominant subpleurala si bazala - absenta caracteristicilor non UIP
	<input type="checkbox"/> UIP posibil	da / nu da / nu da / nu	- anomalii de tip reticular - distributie predominant subpleurala si bazala - absenta caracteristicilor non UIP
	<input type="checkbox"/> Non-UIP	da / nu da / nu da / nu da / nu da / nu da / nu da / nu	- distributie predominant in zonele pulmonare mijlocii sau superioare) - distributie predominant peribronhovasculara - anomalii ground-glass extensive (> anomaliile reticulare) - micronoduli diseminati (predominant in lobii superiori) - chiste individuale (multiple, la distanta de zonele de fagure de miere) - aspect difuz mozaicat / air trapping (bilateral, > de 3 lobi) - procese de condensare (segmente sau lobi)
	<input type="checkbox"/> NSIP(<input type="checkbox"/> celular / <input type="checkbox"/> fibrotic) <input type="checkbox"/> DIP <input type="checkbox"/> RB <input type="checkbox"/> OP <input type="checkbox"/> DAD <input type="checkbox"/> LIP <input type="checkbox"/> Boala multichistica <input type="checkbox"/> Crazy Paving <input type="checkbox"/> Mozaic <input type="checkbox"/> Adenopatii mediastinale		
<input type="checkbox"/> Alt pattern	Descriere:		

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Lavaj bronhiolo-alveolar Data efectuării: ___ / ___ / _____

Volum instilat _____ Volum recuperat _____

Nr. Celule _____ x 10⁶, Macrofage _____ %, Limfocite _____ %, Eozinofile _____ %, Neutrofile _____ %, Siderofage _____ %, CD4/CD8 _____ CD1 _____

Alte: _____

Scor GOLDE: 0 1 2 3 4

Concluzii:

Biopsie

- neefectuata: refuzul pacientului boala foarte severa comorbiditati
 boala usoara/stabila (nu justifica biopsia) nu este necesara (diagnostic evident)
 alt motiv: _____

efectuata: Data efectuării: ___ / ___ / _____

- TRANSBRONSICA:** PULMONARA ADENOPATIE EBUS
 CRIOBIOPSIE
 MEDIASTINOSCOPIE
 BIOPSIE PULMONARA CHIRURGICALA

HISTOLOGIE:

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Evaluare HTP

Data: ___ / ___ / _____	PSAP = _____	mmHg	<input type="checkbox"/> Ecocardiografic /	<input type="checkbox"/> Cateterism
Data: ___ / ___ / _____	PSAP = _____	mmHg	<input type="checkbox"/> Ecocardiografic /	<input type="checkbox"/> Cateterism
Data: ___ / ___ / _____	PSAP = _____	mmHg	<input type="checkbox"/> Ecocardiografic /	<input type="checkbox"/> Cateterism
Data: ___ / ___ / _____	PSAP = _____	mmHg	<input type="checkbox"/> Ecocardiografic /	<input type="checkbox"/> Cateterism

Comorbiditati / Complicatii / Exacerbari

Diagnostic	data diagnostic	tratament / management
	___ / ___ / _____	
	___ / ___ / _____	
	___ / ___ / _____	
	___ / ___ / _____	
	___ / ___ / _____	
	___ / ___ / _____	
	___ / ___ / _____	
	___ / ___ / _____	
	___ / ___ / _____	
	___ / ___ / _____	
	___ / ___ / _____	
	___ / ___ / _____	
	___ / ___ / _____	
	___ / ___ / _____	

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EVALUARE MULTIDISCIPLINARA

Data evaluare: ___ / ___ / _____

DIAGNOSTICUL stabilit prin CONSENS:

Gradul de confidenta:

Diagnostice diferite:

Comportamentul clinic al bolii: Reversibila, autolimitanta Reversibila cu risc de progresie Stabila cu afectare reziduala Progresiva, ireversibila cu potential pentru stabilizare Progresiva, ireversibila sub tratament

Recomandari:

Investigatii suplimentare:

Monitorizare:

Tratament:

Tratament PID

OLD

Nu / Da

data start

___ / ___ / _____

durata (h/zi)

Reabilitare

Nu / Da

data start

___ / ___ / _____

___ / ___ / _____

___ / ___ / _____

___ / ___ / _____

data stop

___ / ___ / _____

___ / ___ / _____

___ / ___ / _____

___ / ___ / _____

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Propunere transplant? <input type="checkbox"/> Nu <input type="checkbox"/> Da	<u>Includerea pacientului pe lista de așteptare:</u> <input type="checkbox"/> Evidențe imagistice sau histopatologice de UIP și unul dintre următoarele criterii: <input type="checkbox"/> DLco < 39% din prezis <input type="checkbox"/> ↓ CVF > 10 % în ultimele 6 luni <input type="checkbox"/> Desaturare sub 88 % la 6MWT <input type="checkbox"/> HRCT honeycombing > 50% din parenchimul pulmonar
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Medicatie recomandata (doza, reactii adverse)	Evolutie
___/___/_____ <div style="text-align: right;">Programare control ___/___/_____</div>	<input type="checkbox"/> Ameliorare <input type="checkbox"/> Stationar <input type="checkbox"/> Agravare
___/___/_____ <div style="text-align: right;">Programare control ___/___/_____</div>	<input type="checkbox"/> Ameliorare <input type="checkbox"/> Stationar <input type="checkbox"/> Agravare
___/___/_____ <div style="text-align: right;">Programare control ___/___/_____</div>	<input type="checkbox"/> Ameliorare <input type="checkbox"/> Stationar <input type="checkbox"/> Agravare
___/___/_____ <div style="text-align: right;">Programare control ___/___/_____</div>	<input type="checkbox"/> Ameliorare <input type="checkbox"/> Stationar <input type="checkbox"/> Agravare

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<p>__/__/____</p> <p style="text-align: right;">Programare control __/__/____</p>	<input type="checkbox"/> Ameliorare <input type="checkbox"/> Stationar <input type="checkbox"/> Agravare
<p>__/__/____</p> <p style="text-align: right;">Programare control __/__/____</p>	<input type="checkbox"/> Ameliorare <input type="checkbox"/> Stationar <input type="checkbox"/> Agravare
<p>__/__/____</p> <p style="text-align: right;">Programare control __/__/____</p>	<input type="checkbox"/> Ameliorare <input type="checkbox"/> Stationar <input type="checkbox"/> Agravare
<p>__/__/____</p> <p style="text-align: right;">Programare control __/__/____</p>	<input type="checkbox"/> Ameliorare <input type="checkbox"/> Stationar <input type="checkbox"/> Agravare
<p>__/__/____</p> <p style="text-align: right;">Programare control __/__/____</p>	<input type="checkbox"/> Ameliorare <input type="checkbox"/> Stationar <input type="checkbox"/> Agravare