

Interview questions

1. We noticed that your field of expertise is kidney transplantation. When it comes to kidney transplantation, the unavoidable topic is the occurrence of rejection reaction. So what do you think are the disadvantages of the current detection techniques for kidney rejection, such as biopsy? Are there any current precautions against rejection?
2. We have read a guideline on kidney biopsy operation, which mentioned that after obtaining the sample, the doctor will use a light microscope, immunopathology, and other means to process and observe the sample, and the accuracy rate of the final result is 60% to 70%. Do you think this is a kind of input and output imbalance?
3. We noticed that in the process of biopsy puncture, we need to use two-color ultrasound. The second color ultrasound is to judge the best timing of puncture, and the patient's cooperation (such as stable breathing) is also required. If something goes wrong with the puncture procedure, does it lead to more serious complications than blood in the urine?
4. To your knowledge, do patients have great dissatisfaction with any part of the testing process? (for example, the biopsy is painful, the procedure is complicated and expensive, and patients need to wait in line for surgery, etc.)
5. Could you please explain the test box you know in detail? Including its scope of application and use advantages.
6. What is your suggestion for our project? Do you think our products are suitable for hospitals or families?