



```
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请对以下病历进行质量评估：

患者信息：{"patientId":3835,"patientName":"胡安

秀","patientNickName":"huanxiu","dialyzeNo":"01040039","dialyzeAge":null,"spellName":null,"id":2115,"content":{"chiefComplaint":null,"treatmentHistory":  
[3],"treatmentHistoryContent":"2013年左前臂自体动静脉血管造瘘术。","presentMedical":"患者于2013年6月因头晕、乏力、全身浮肿、恶心、呕吐、食欲减  
退在深圳市龙华区人民医院诊断为慢性肾脏病5期，肾性贫血，肾性骨病，开始规律性血液透析治疗，并行左前臂自体动静脉血管造瘘术，同年8月启用内  
瘘。目前透析方案为3次/周，每次超滤量为2500-3000ml，现干体重为57kg，为继续行规律血液透析收入我中心。患者平素未诉不适，双下肢无水肿，无乏  
力、胸闷、心悸、气促，无头晕、头痛，胃纳欠佳，精神、睡眠一般，无尿，大便正常。","tentativeDiagnosis":"慢性肾脏病5期,维持性血透状态,肾性贫血,  
肾性高血压,继发性甲状旁腺功能亢进,高磷酸血症,高尿酸血症,代谢性酸中毒,高钾血  
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json\n{\n  \"totalScore\": 总分数字,\n  \"level\": \"甲级/乙级/丙级\",\n  \"details\": [\n    {\n      \"item\": \"主诉\",\n      \"fullScore\": 10,\n      \"role\": \"user\", \"content\": \"请对以下病历进行质量评估：\n\n患者信息：{\n  \"patientId\": 3835,\n  \"patientName\": \"胡安秀\",\n  \"patientNickName\": \"huanxiu\",\n  \"dialyzeNo\": \"01040039\",\n  \"dialyzeAge\": null,\n  \"spellName\": null,\n  \"id\": 2115,\n  \"content\": \"{\n    \"chiefComplaint\": null,\n    \"treatmentHistory\": [3],\n    \"treatmentHistoryContent\": \"2013年左前臂自体动静脉血管造瘘术。\",\n    \"presentMedical\": \"患者于2013年6月因头晕、乏力、全身浮肿、恶心、呕吐、食欲减退在深圳市龙华区人民医院诊断为慢性肾脏病5期，肾性贫血，肾性骨病，开始规律性血液透析治疗，并行
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肠鸣音3次/分))"]},"label":"脊柱及四肢","value":["脊柱(正常)","活动(自如,关节活动自如)","震颤(有)","杂音(有)"]},"label":"神经系统","value":["生理反射(肱二头肌、肱三头肌反射正常,膝腱反射正常,跟腱反射正常)","病理反射(未引出)","脑膜刺激征(未引出)"]},"chronicDiseasesHistoryText":"乙型病毒性肝炎","checkList":2},"remark":null,"mainSuit":"维持性血液透析11年余。","presentDisease":"患者于2013年6月因头晕、乏力、全身浮肿、恶心、呕吐、食欲减退在深圳市龙华区人民医院诊断为慢性肾脏病5期，肾性贫血，肾性骨病，开始规律性血液透析治疗，并行左前臂自体动静脉血管造瘘术，同年8月启用内瘘。目前透析方案为3次/周，每次超滤量为2500-3000ml，现干体重为57kg，为继续行规律血液透析收入我中心。患者素来未诉不适，双下肢无水肿，无乏力、胸闷、心悸、气促，无头晕、头痛，胃纳欠佳，精神、睡眠一般，无尿，大便正常。","preliminary":"慢性肾脏病5期,维持性血透状态,肾性贫血,肾性高血压,继发性甲状旁腺功能亢进,高磷酸血症,高尿酸血症,代谢性酸中毒,高钾血症","patientType":null,"name":null,"age":null,"marriage":null,"nation":null,"culture":null,"occupation":null,"address":null,"idCard":null,"mobile":null,"bodyInspect":null}\n诊疗信息：{"patientId":3835,"mainSuit":"维持性血液透析11年余。","initDiagnosis":"慢性肾脏病5期,维持性血透状态,肾性贫血,肾性高血压,继发性甲状旁腺功能亢进,高磷酸血症,高尿酸血症,代谢性酸中毒,高钾血症","healingProject":"1、按肾病内科常规护理，监测体重、血压。n2、维持性血液透析，一周三次。n3、低盐，优质蛋白饮食。n4、纠正贫血及对症处理。","nowDiseaseHistory":"患者于2013年6月因头晕、乏力、全身浮肿、恶心、呕吐、食欲减退在深圳市龙华区人民医院诊断为慢性肾脏病5期，肾性贫血，肾性骨病，开始规律性血液透析治疗，并行左前臂自体动静脉血管造瘘术，同年8月启用内瘘。目前透析方案为3次/周，每次超滤量为2500-3000ml，现干体重为57kg，为继续行规律血液透析收入我中心。患者素来未诉不适，双下肢无水肿，无乏力、胸闷、心悸、气促，无头晕、头痛，胃纳欠佳，精神、睡眠一般，无尿，大便正常。","oldDiseaseHistory":"否认高血压、糖尿病、冠状动脉粥样硬化性心脏病等慢性病史，否认结核等传染病病史，否认食物、药物过敏史，否认外伤、输血史。","weightPre":null,"pressurePre":null,"bodyInspect":"一般情况：体型(正常),发育(正常),入科(步行),神志(清楚),体位(自主),步态(正常),查体(合作),语言(流利),病容(慢性)n皮肤及淋巴结：皮肤弹性(正常),皮疹(无),皮下出血(无),瘀斑(无),蜘蛛痣(无),肝掌(无),癍痕(无),溃疡(无)n头颈部五官：头颅：大小形状((正常)),毛发((正常)),眼((瞳孔等大等圆)(左3.5mm,右3.5mm),(对光反射存在)),耳：外形((正常)),听力((正常)),鼻((正常)),口((舌居中)),颈((颈部对称),(活动自如),(气管居中))n胸部：胸部(胸廓对称),肛门直肠及外生殖器(未检),肺：视诊((胸式呼吸)),肺：触诊：呼吸活动度((一致),(正常)),肺：叩诊：肺部叩诊((清音),(实音)(肺下界位于肩胛线第10肋间),(肺下界移动度)(正常)),肺：听诊：双肺呼吸音((清晰),(语音传导)(正常)),心脏：视诊((心尖搏动位于锁骨中线第(5肋间),(内/外)(0.5cm)),心脏：触诊：心尖搏动((有力)),心脏：叩诊：心脏相对浊音界((正常)),心脏：听诊：心音((有力),(整齐),(不齐)(心率77次/分))n腹部：视诊：腹部((平坦)),触诊：腹壁((柔软),(胆囊点压痛,莫菲氏征)(阴性undefined)),听诊((闻及血管杂音)( 肠鸣音3次/分))n脊柱及四肢：脊柱(正常),活动(自如,关节活动自如),震颤(有),杂音(有)n神经系统：生理反射(肱二头肌、肱三头肌反射正常,膝腱反射正常,跟腱反射正常),病理反射(未引出),脑膜刺激征(未引出)","assayInspect":"暂缺","diagnosis":null,"diseaseReasonNames":null,"dialysisPlan":null,"medic":null,"nurse":null,"facilityName":null,"startDialyzeTime":null,"endDialyzeTime":null}"},"max\_tokens": 16000, "temperature": 0.1}{"id": "0197ed7cba7e22b2edb3728044a6f9b4", "model": "deepseek-ai/DeepSeek-R1", "usage": {"total\_tokens": 10981, "prompt\_tokens": 10066, "completion\_tokens": 915, "completion\_tokens\_details": {"reasoning\_tokens": 454}}, "object": "chat.completion", "choices": [{"index": 0, "message": {"role": "assistant", "content": "\n\n totalScore": 85,\n level": "乙级",\n details": [\n\n item": "主诉",\n fullScore": 10,\n score": 10,\n deduction": "无扣分。主诉'维持性血液透析11年余'简明扼要，准确反映患者就诊原因。"\n\n item": "病史",\n fullScore": 20,\n score": 15,\n deduction": "扣5分。现病史详细完整，但既往史存在矛盾（否认高血压病史却诊断'肾性高血压'），个人史中疫苗接种、居住环境等未记录，家族史仅简单标注无具体内容。"\n\n item": "体格检查",\n fullScore": 15,\n score": 13,\n deduction": "扣2分。检查记录全面规范（如生命体征、各系统检查数据），但存在遗漏：肛门直肠及外生殖器标记'未检'，腹部触诊中'胆囊点压痛'记录为'阴性undefined'，存在不规范问题。"\n\n item": "诊断",\n fullScore": 15,\n score": 15,\n deduction": "无扣分。诊断'慢性肾脏病5期'等符合疾病命名规范，基于现病史和检查结果，准确完整。"\n\n item": "处理",\n fullScore": 20,\n score": 17,\n deduction": "扣3分。治疗方案整体合理（如血液透析频率、饮食控制），但纠正贫血的具体措施（如药物剂量、监测指标）未详细说明，影响规范性。"\n\n item": "其他",\n fullScore": 20,\n score": 15,\n deduction": "扣5分。病历结构完整，但存在矛盾（病史与诊断不一致）、关键辅助检查（心电图、胸片）标记'暂缺'未补充，且时间戳'2025年'疑似错误。"\n\n ]\n}","reasoning\_content": "\n首先，我需要



根据给定的评分标准对这份住院病历进行质量评估。评分维度包括主诉（10分）、病史（20分）、体格检查（15分）、诊断（15分）、处理（20分）和其他（20分）。每个维度都有具体的扣分点，我需要仔细检查病历内容，找出不足之处。

在主诉部分，病历中明确写着“维持性血液透析11年余”，这简洁地说明了患者就诊的原因，符合要求，所以应该给满分10分。

在病史部分包括现病史、既往史等。现病史详细描述了患者的病程、治疗过程和当前状况，但既往史中提到“否认高血压、糖尿病等慢性病史”，这与现病史中的“肾性高血压”诊断矛盾。此外，个人史和家族史部分似乎缺失，比如疫苗接种、居住环境等没有记录。因此，这里需要扣分，可能扣5分，得15分。

在体格检查记录得很全面，涵盖了各个系统，如一般情况、皮肤、五官、心肺、腹部等，数据也具体。但注意到“肛门直肠及外生殖器”标记为“未检”，这是一个遗漏。另外，腹部触诊中“胆囊点压痛”部分显示“阴性undefined”，可能存在记录不规范的问题。扣2分，得13分。

在诊断部分列出了多个诊断，如慢性肾脏病5期、肾性贫血等，符合疾病命名规范，且基于病史和检查，看起来准确完整。给满分15分。

在处理方案包括血液透析、饮食控制等，针对患者的病情合理规范。但方案中没有提到具体药物或剂量，比如纠正贫血的措施不够详细。扣3分，得17分。

在其他方面涉及病历书写规范性和完整性。病历结构完整，但部分内容如心电图、胸片等标记为“暂缺”，且存在一些矛盾（如既往史否认高血压但诊断有肾性高血压）。此外，时间戳显示为2025年，可能是错误。扣5分，得15分。

现在计算总分：10+15+13+15+17+15=85分。根据评分等级，85分属于乙级（75-89分）。最后，按照JSON格式整理扣分明细，确保输出符合要求。

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