

中西医结合执业（含助理）医师资格考试 《提分专项之思维导图》

（非卖品）

金英杰医学教育研究院 编

主 编	张云清			
编委会成员	欧阳樊	霍秀红	王 爽	冯欣语
	孙晓旭	王 朗	南静毓	杨翠秒
	刘熹儒	馨 月	张圣淇	王安琪
	赵广华	郭 宽	杨庭瑜	王 磊
	许晓兵	边文倩	吴国康	

编写说明

思维导图又叫心智图，是表达发散型思维的有效图形思维工具。

思维导图通过使用一个中央关键词引起形象化的构造和分类来展现主要的知识框架和相关联知识内容的图解方式。它运用图文并重的技巧，把各级主题的关系用相互隶属与相关的层级图表现出来，利用记忆、阅读、思维的规律，协助人们在科学与艺术、逻辑与想象之间平衡发展，从而开启人类大脑的无限潜能。

“思维导图”概念的提出，标志着人类对大脑潜能的开发进入了一个全新的阶段。

随着中西医执业（含助理）医师资格考试难度逐年增加，金英杰医学教育研究院各教研室经过众多市场调研，为弥补医学教辅资料的空白区域，强力推出《思维导图－超级大脑记忆法》。

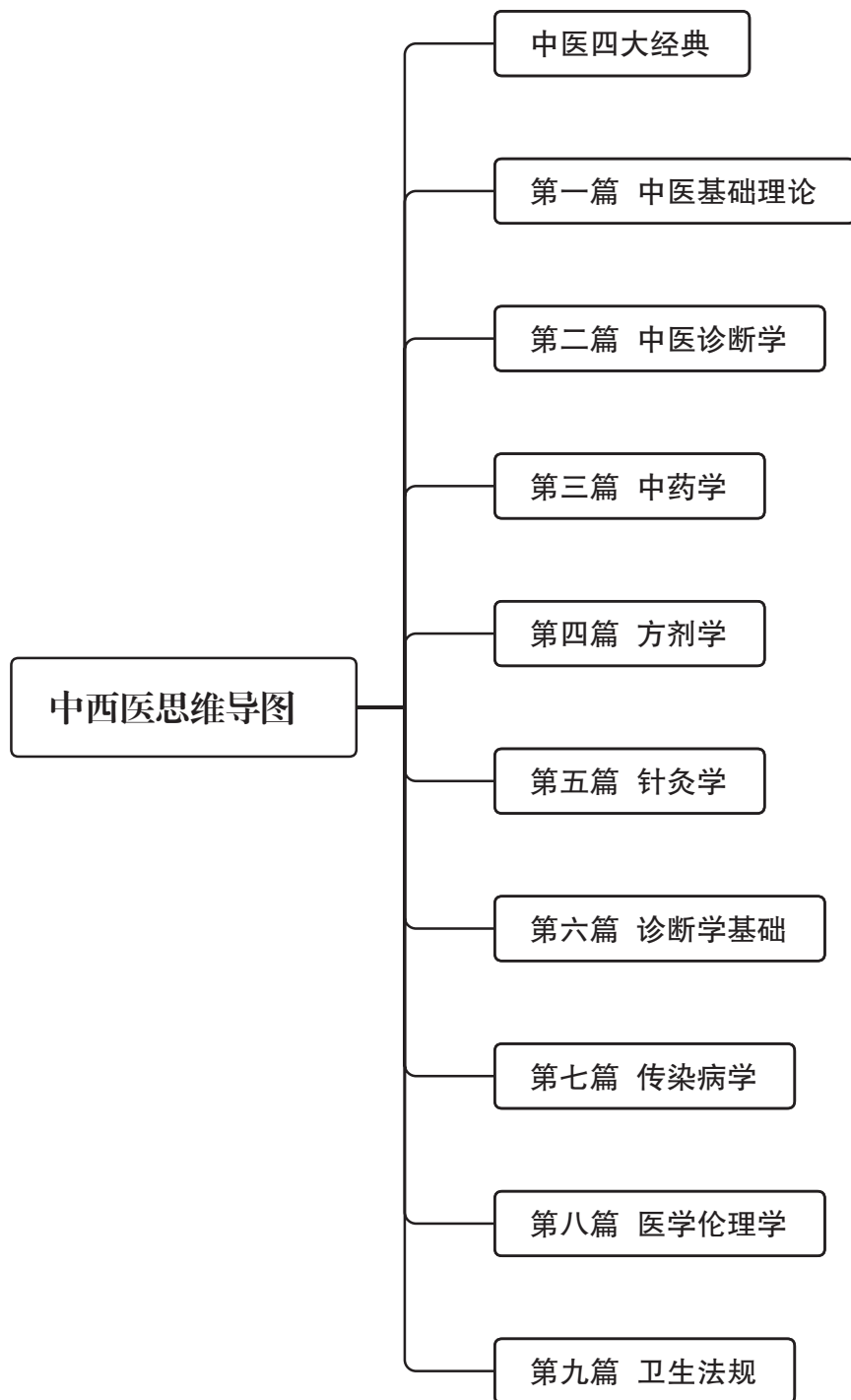
本书将系统性、实用性融于一体，以思维导图的形式构建中医执业（含助理）医师资格考试知识框架，展现各章节的重点知识与知识内容之间的逻辑关系，用简明易懂的图示和色彩鲜明的标记，挖掘学员的思维潜能、记忆潜能、使学习更加轻松、更富成效。

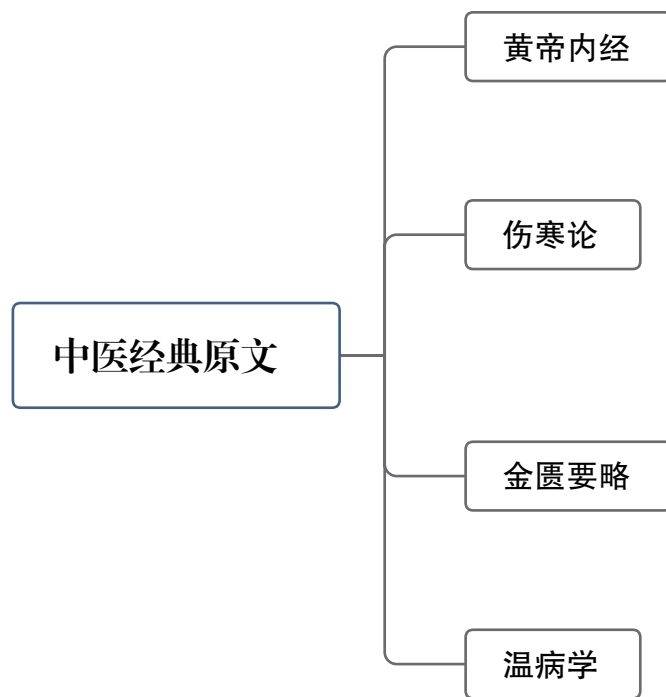
金英杰医学教育研究院

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《内经》

素问·上古天真论

上古之人，其知道者，法于阴阳

和于术数，饮食有节，起居有常，不妄作劳

故能形与神俱，而尽终其天年，度百岁乃去

素问·四气调神大论

是故圣人不治已病治未病，不治已乱治未乱，此之谓也

夫四时阴阳者万物之根本也，所以圣人春夏养阳，秋冬养阴，以从其根

素问·阴阳应象大论

治病必求于本

阴味出下窍；阳气出上窍。味厚者为阴，薄为阴之阳

善诊者，察色按脉，先别阴阳，审清浊而知部分

病之始起也，可刺而已；其盛，可待衰而已

素问·经脉别论

“勇者气行则已，怯者则着而为病”和“生病起于过用”的理论观点

食气入胃，散精于肝，淫气于筋。食气入胃，浊气归心，淫精于脉

素问·太阴阳明论

四肢皆禀气于胃而不得至经，必因于脾乃得禀也

常以四时长四脏，各十八日寄治，不得独主于时

灵枢·本神

所以任物者谓之心；心有所忆谓之意

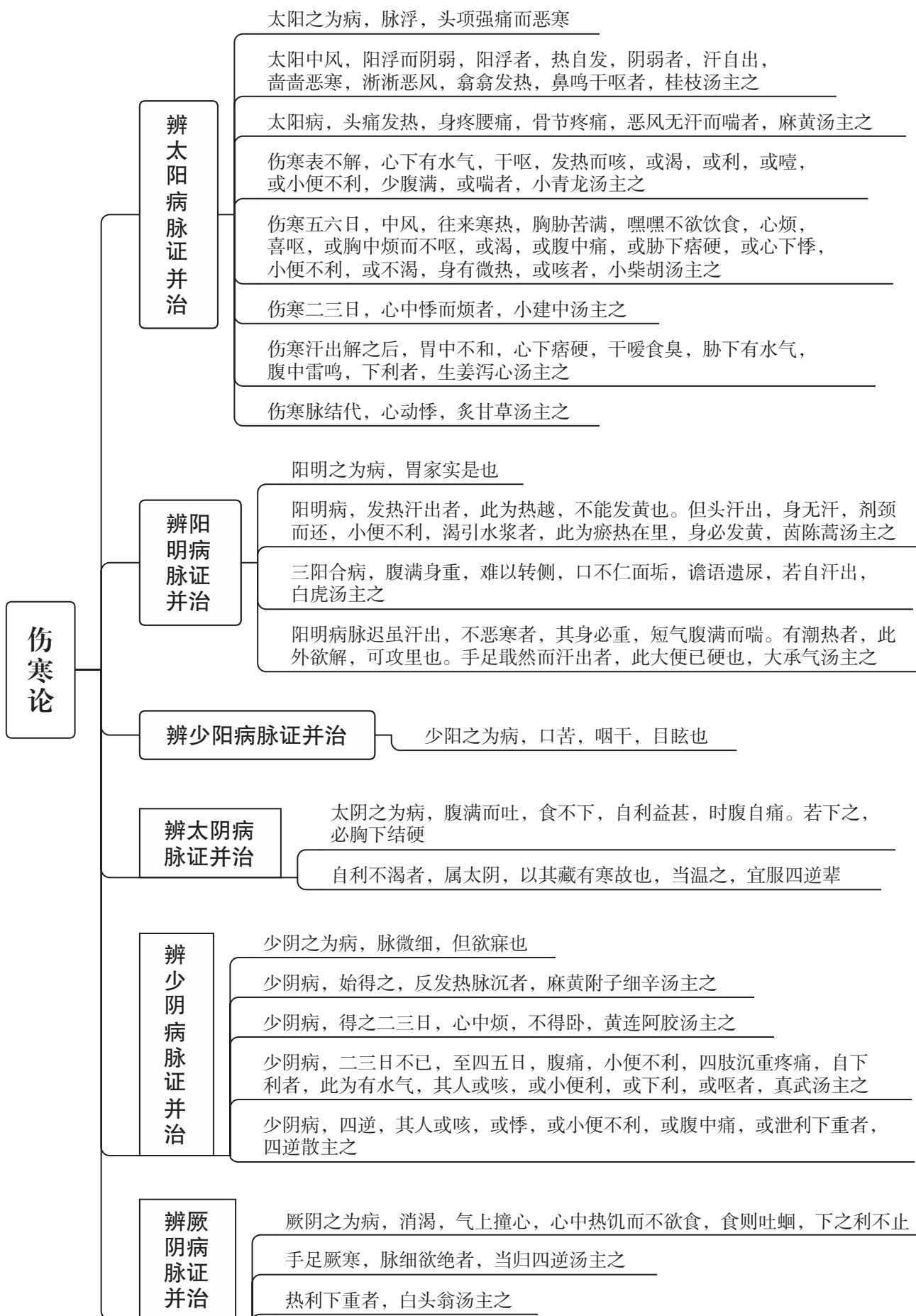
天之在我者德也，地之在我者气也

素问·生气通天论

阴者，藏精而起亟也；阳者，卫外而为固也

素问·举痛论

余知百病生于气也，怒则气上，喜则气缓，悲则气消，恐则气下，寒则气收



金匱要略

肺痿肺病咳嗽上
气病脉证治第七

大逆上气，咽喉不利，止逆下气者，
麦门冬汤主之

腹满寒疝宿食
病脉证治第十

病腹满，发热十日，脉浮而数，饮食如故，
厚朴七物汤主之

消渴小便不利淋病
脉证并治第十三

男子消渴，小便反多，以饮一斗，小便一斗，
肾气丸主之

妇人妊娠病脉
证并治第二十

妇人宿有癥病，经断未及三月，而得漏下
不止，胎动在脐上者，为癥痼害。妊娠六
月动者，前三月经水利时，胎也。下血
者，后断三月衃也。所以血不止者，其癥
不去故也，当下其癥，桂枝茯苓丸主之

妇人杂病脉证
并治第二十二

妇人咽中如有炙脔，半夏厚朴汤主之

温病学

温热论

1.温邪上受,首先犯肺,逆传心包。肺主气属卫,心主血属营,辨营卫气
血虽与伤寒同,若论治法则与伤寒大异也

2.盖伤寒之邪留恋在表,然后化热入里,温邪则热变最速,未传心
包,邪尚在肺,肺主气,其和皮毛,故云在表。在表初用辛凉轻剂。
挟风则加入薄荷、牛蒡之属,挟湿加芦根、滑石之流。或透风于热
外,或渗湿于热下,不与热相搏,势必孤矣

3.不尔,风挟温热而燥生,清窍必干,谓水主之气不能上荣,两阳相
劫也。湿与温合,蒸郁而蒙蔽于上,清窍为之壅塞,浊邪害清也。其
病有类伤寒,其验之之法,伤寒多有变证,温热虽久,在一经不移,
以此为辨

湿热病篇

1.湿热证,始恶寒,后但热不寒,汗出胸痞,舌白,口渴不引饮

2.湿热证,恶寒无汗,身重头痛,湿在表分。宜藿香、香薷、羌活、苍
术皮、薄荷、牛蒡子等味。头不痛者,去羌活

3.湿热证,恶寒发热,身重关节疼痛,湿在肌肉,不为汗解。宜滑
石、大豆黄卷、茯苓皮、苍术皮、藿香叶、鲜荷叶、白通草、桔梗
等味。不恶寒者,去苍术皮

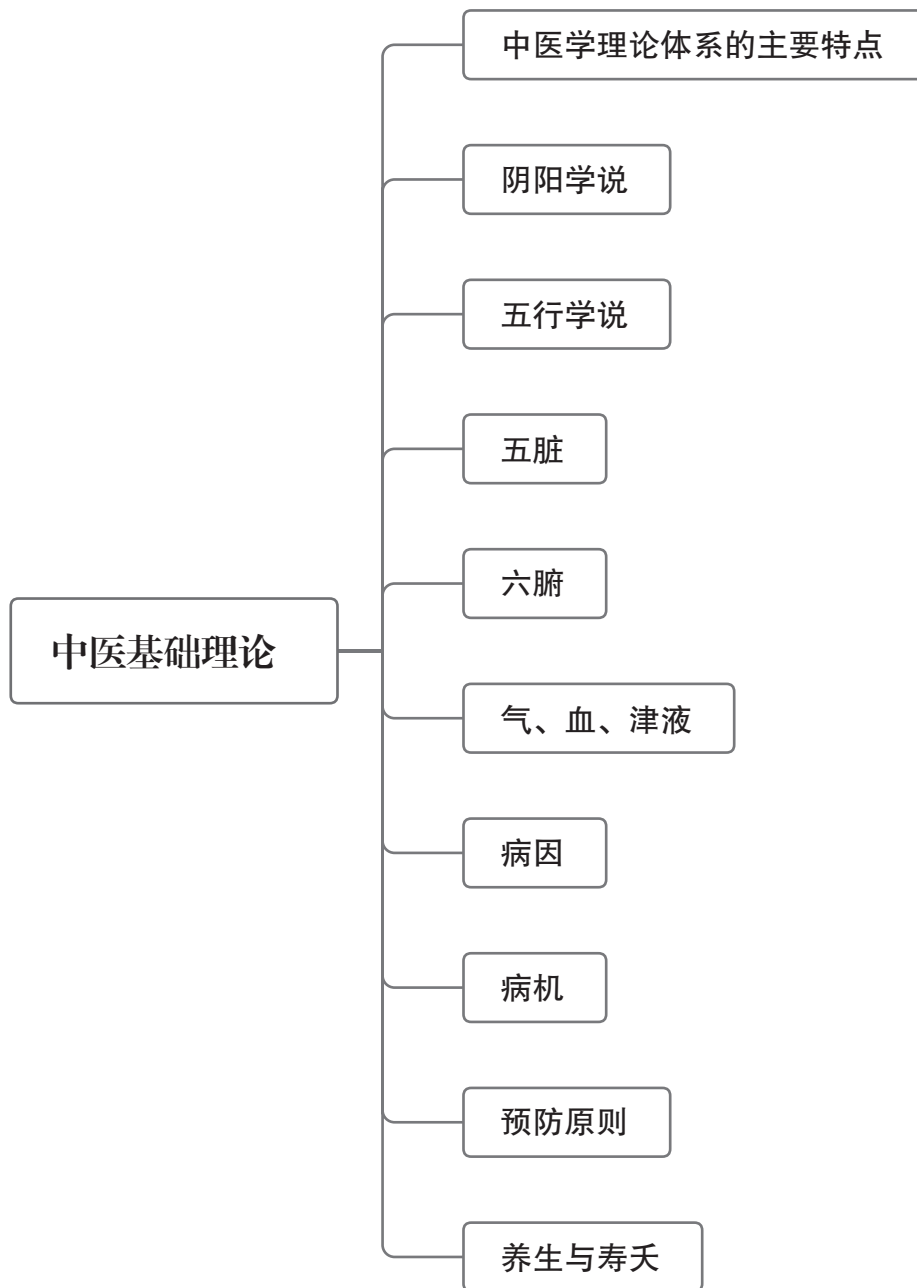
温病条辨

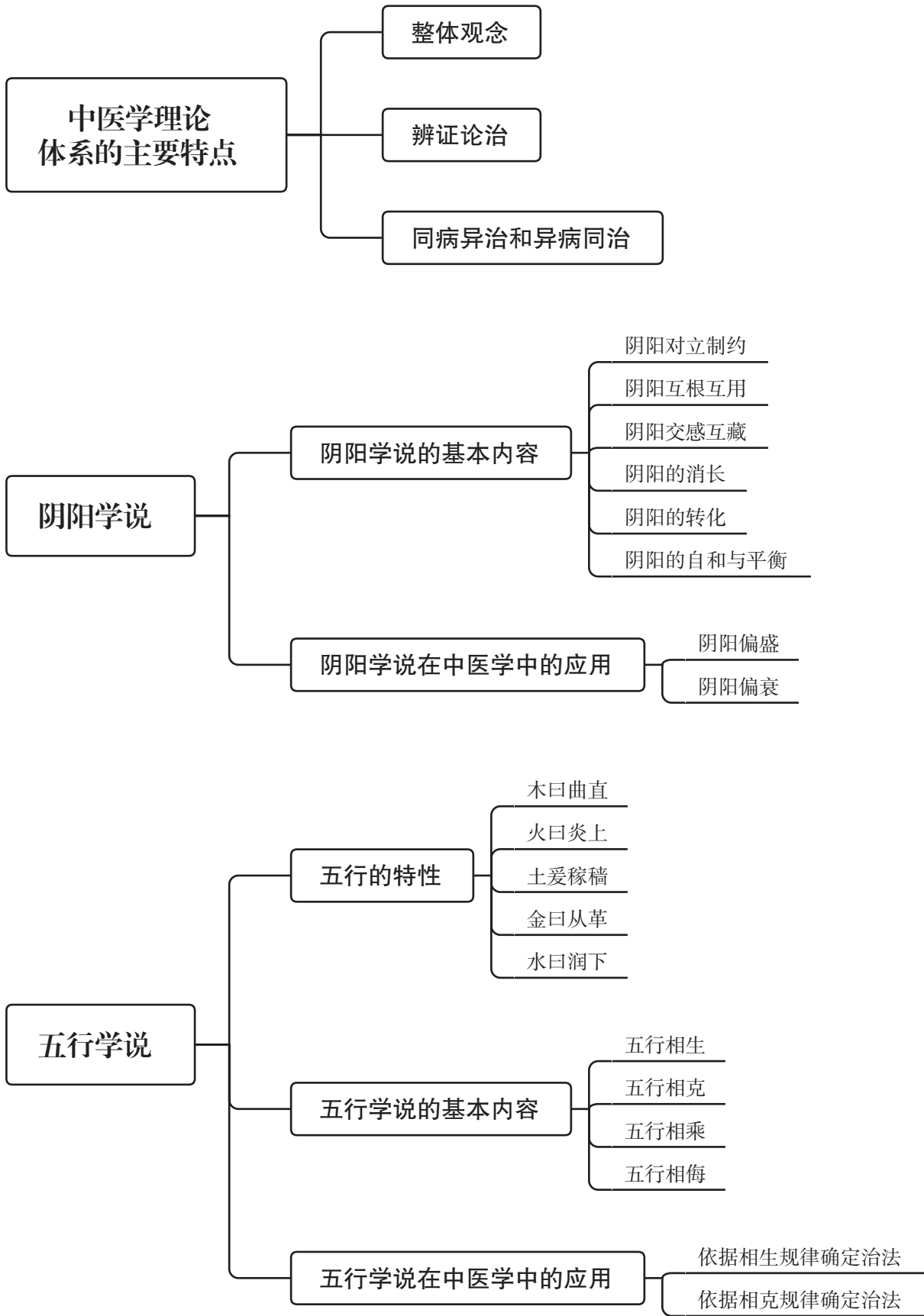
1.温病者:有风温、有温热、有瘟疫、有温毒、有暑温、有湿温、有
秋燥、有冬温、有温疟

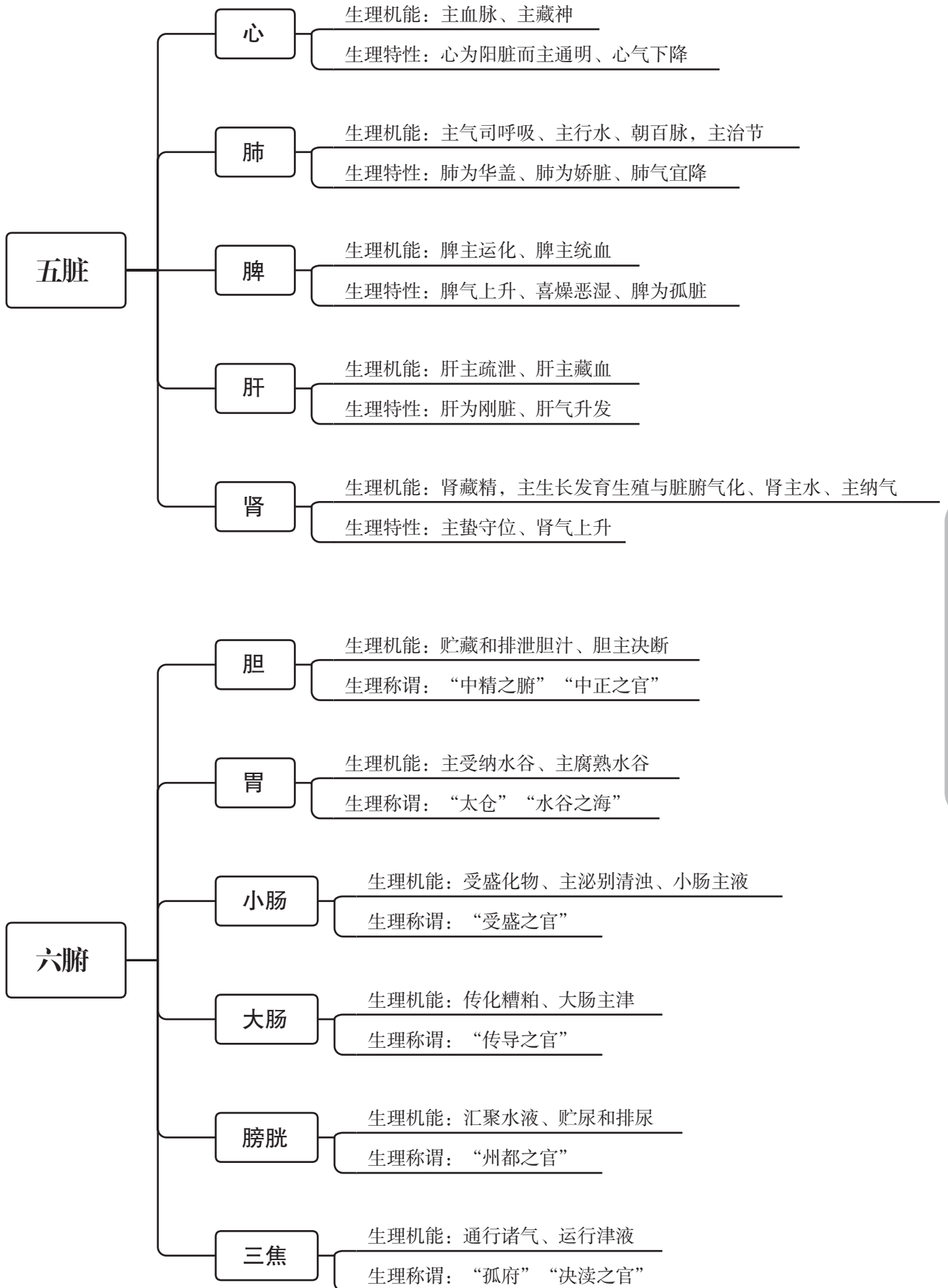
2.太阴风温、温热、温疫、冬温,初起恶风寒者,桂枝汤主之;但热
不恶寒而渴者,辛凉平剂银翘散主之。温毒、暑温、湿温、温疟,不
在此例

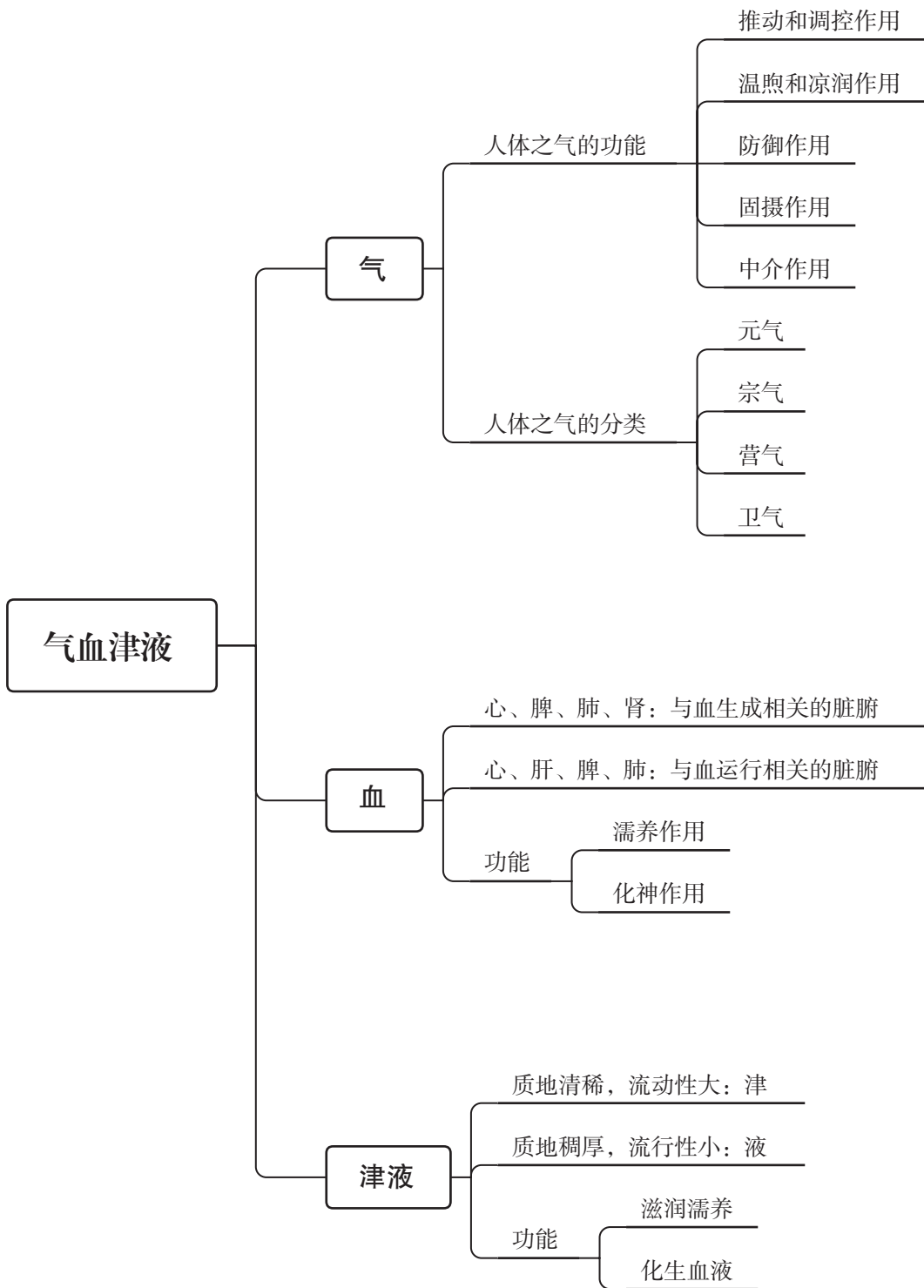
3.太阴温病,血从上溢者,犀角地黄汤合银翘散主之。其中焦病者,
以中焦法治之。若吐粉红血水者,死不治;血从上溢,脉七、八至以
上,面反黑者,死不治,可用清络育阴法

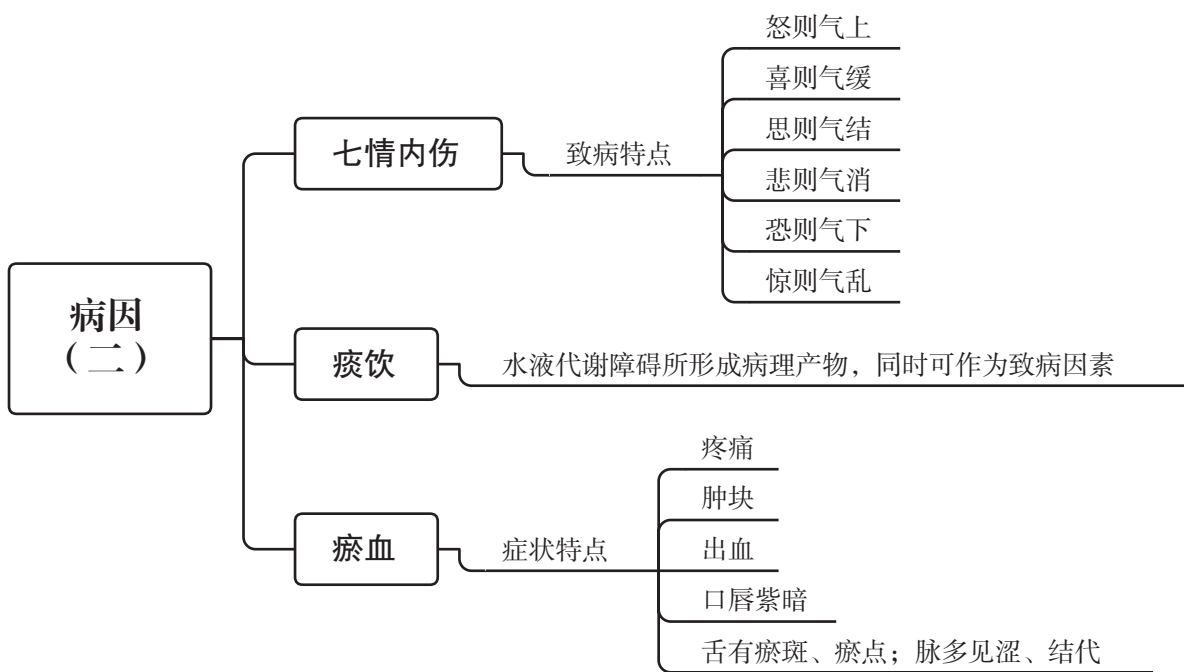
4.太阴温病,寸脉大。舌绛而干,法当渴,今反不渴者,热在营中也,
清营汤去黄连主之

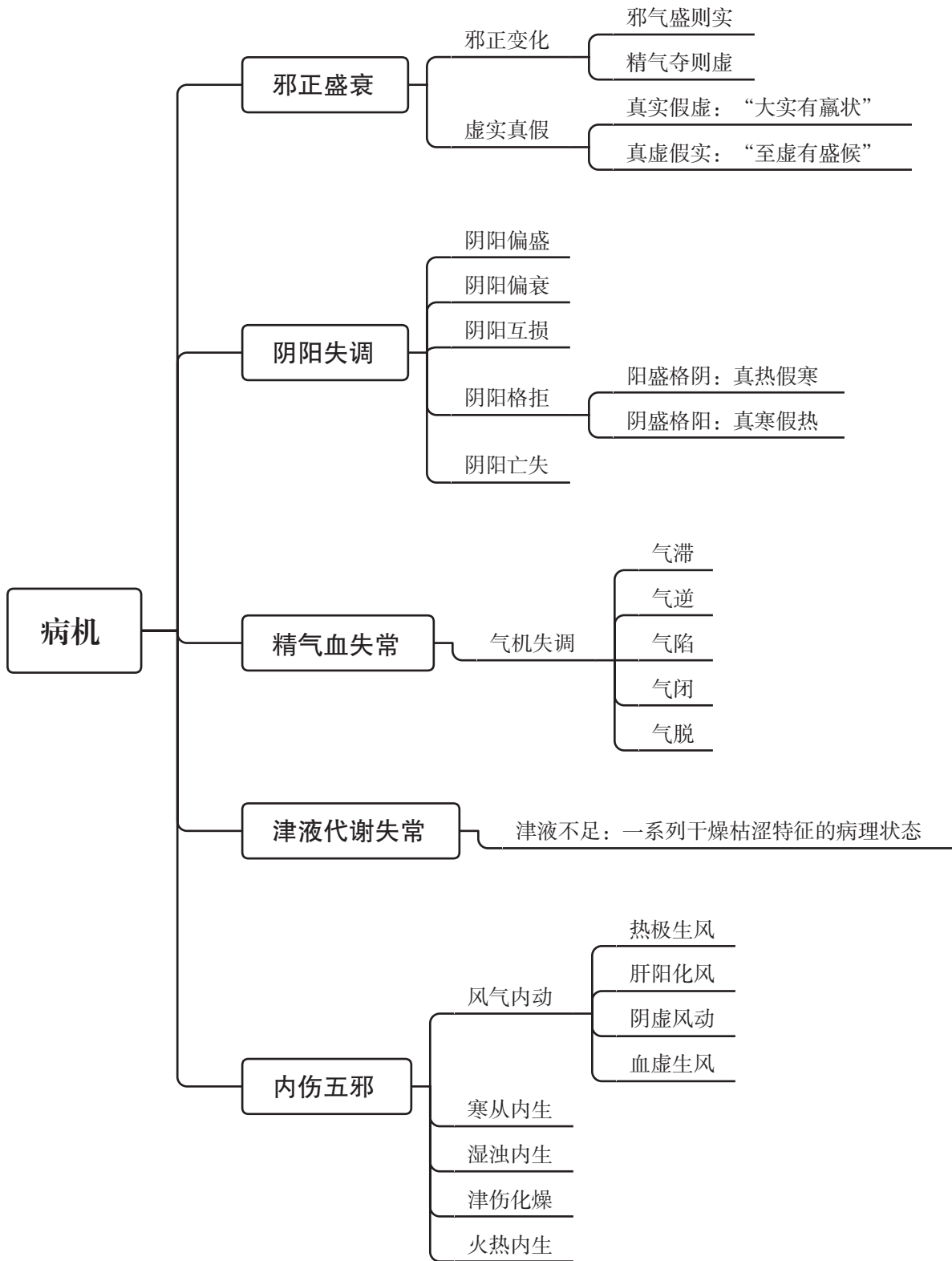


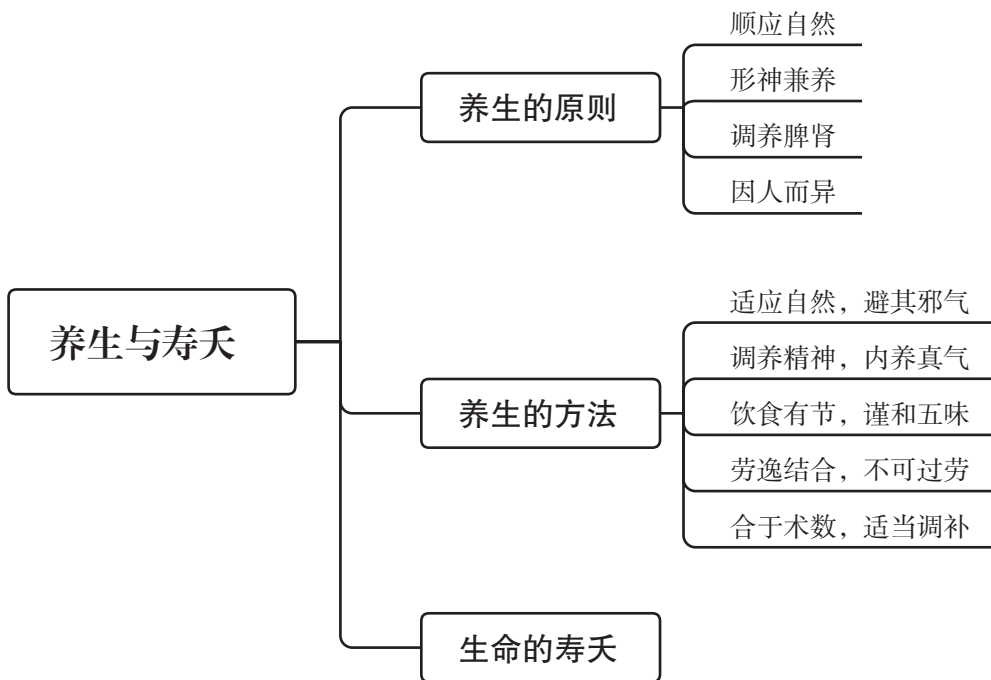
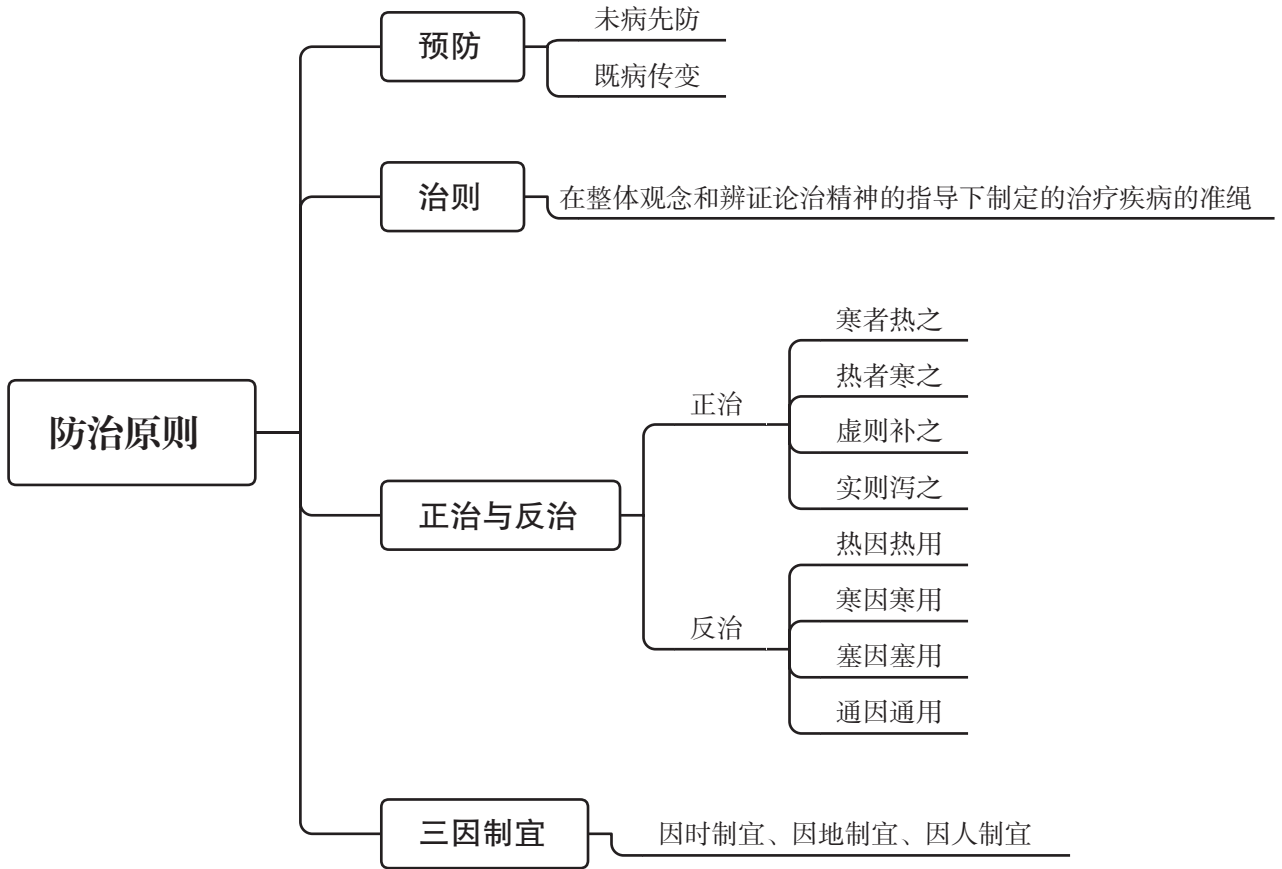


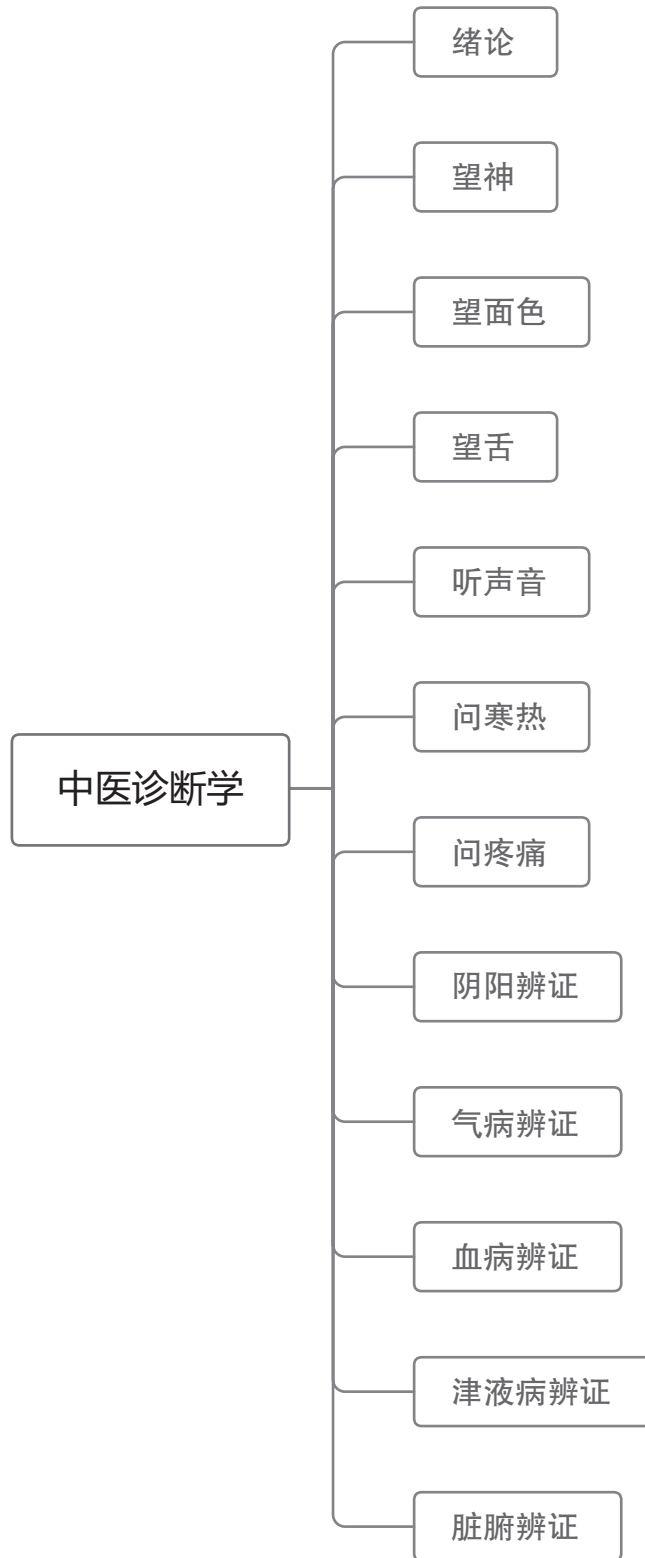


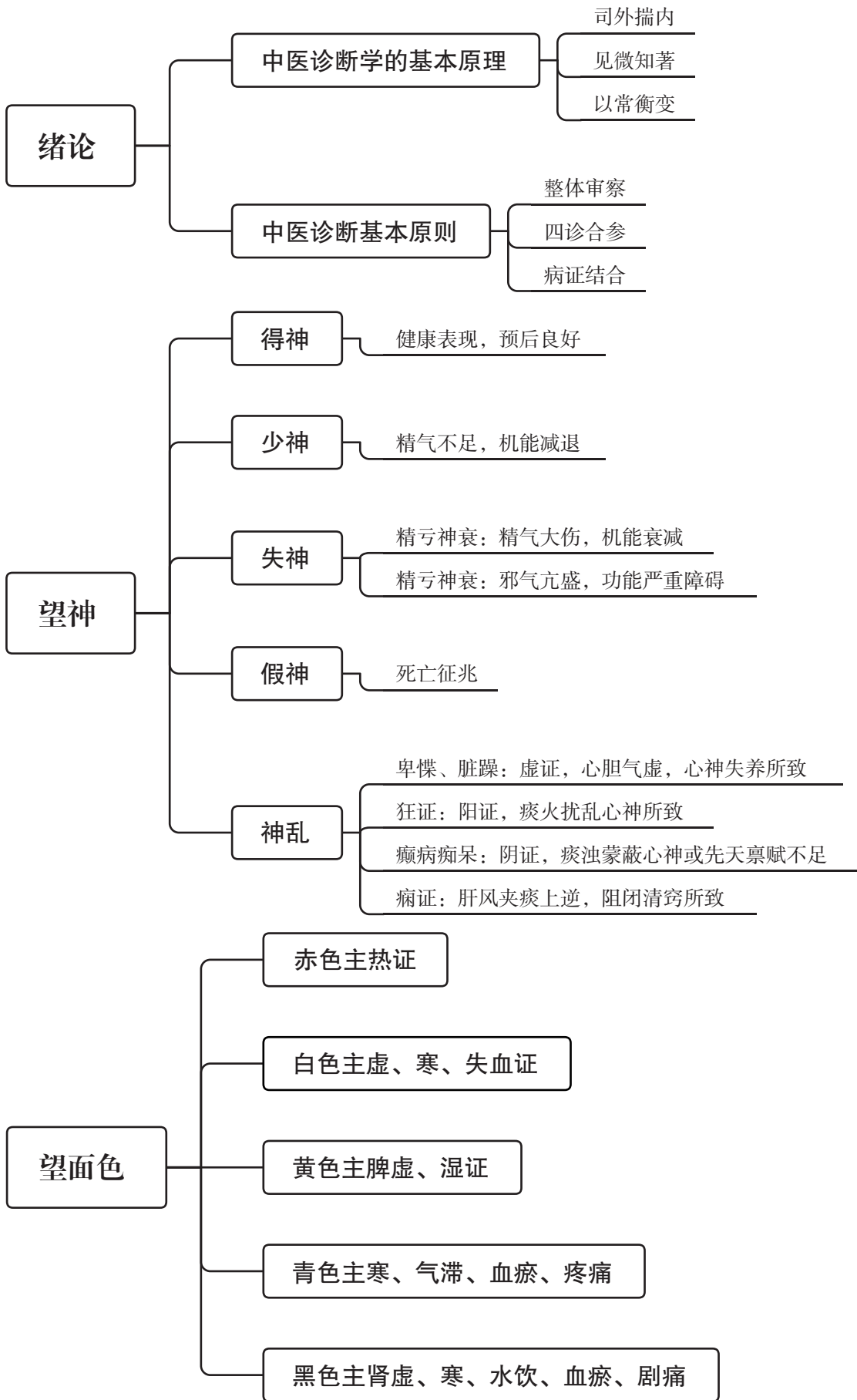


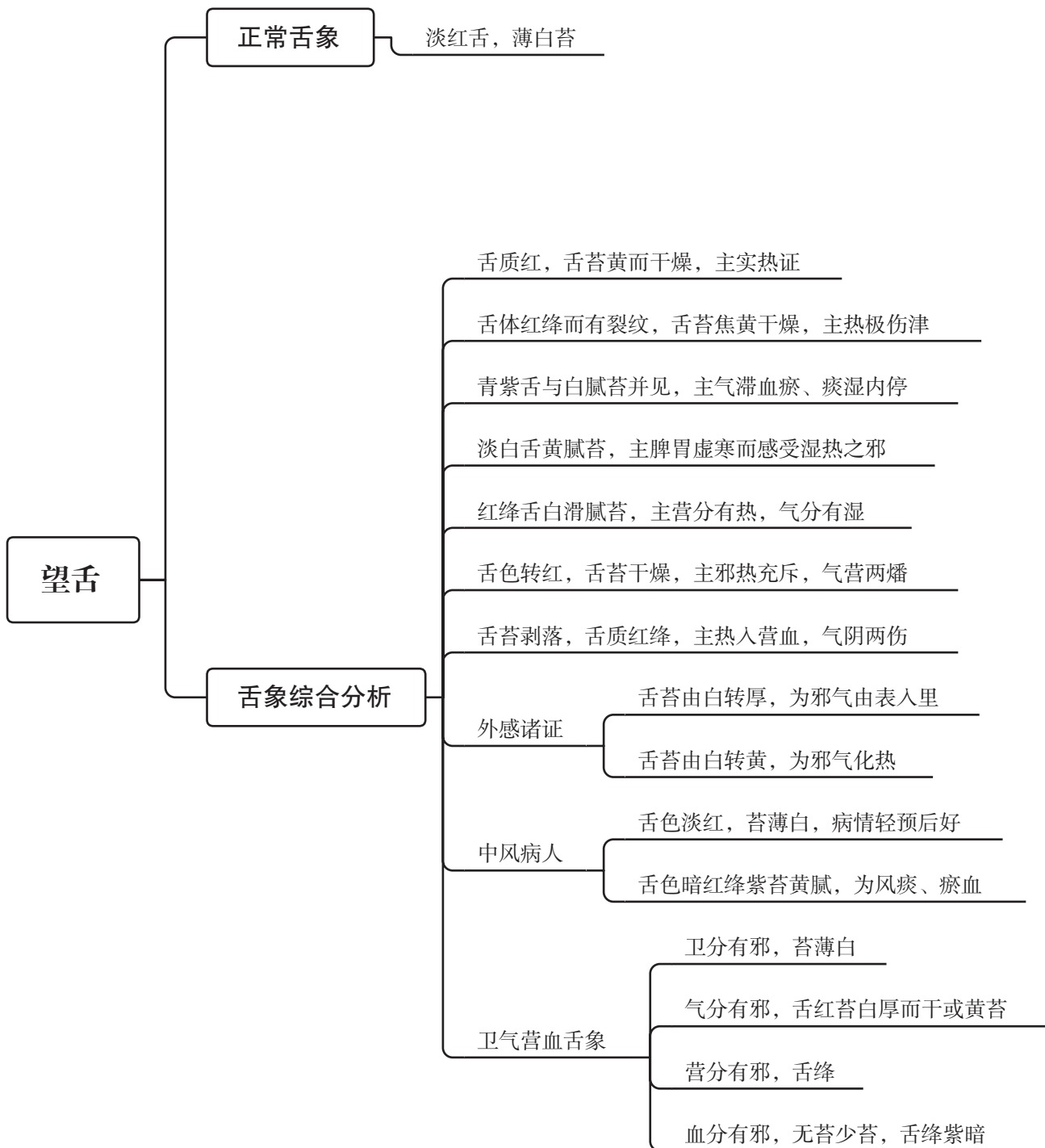


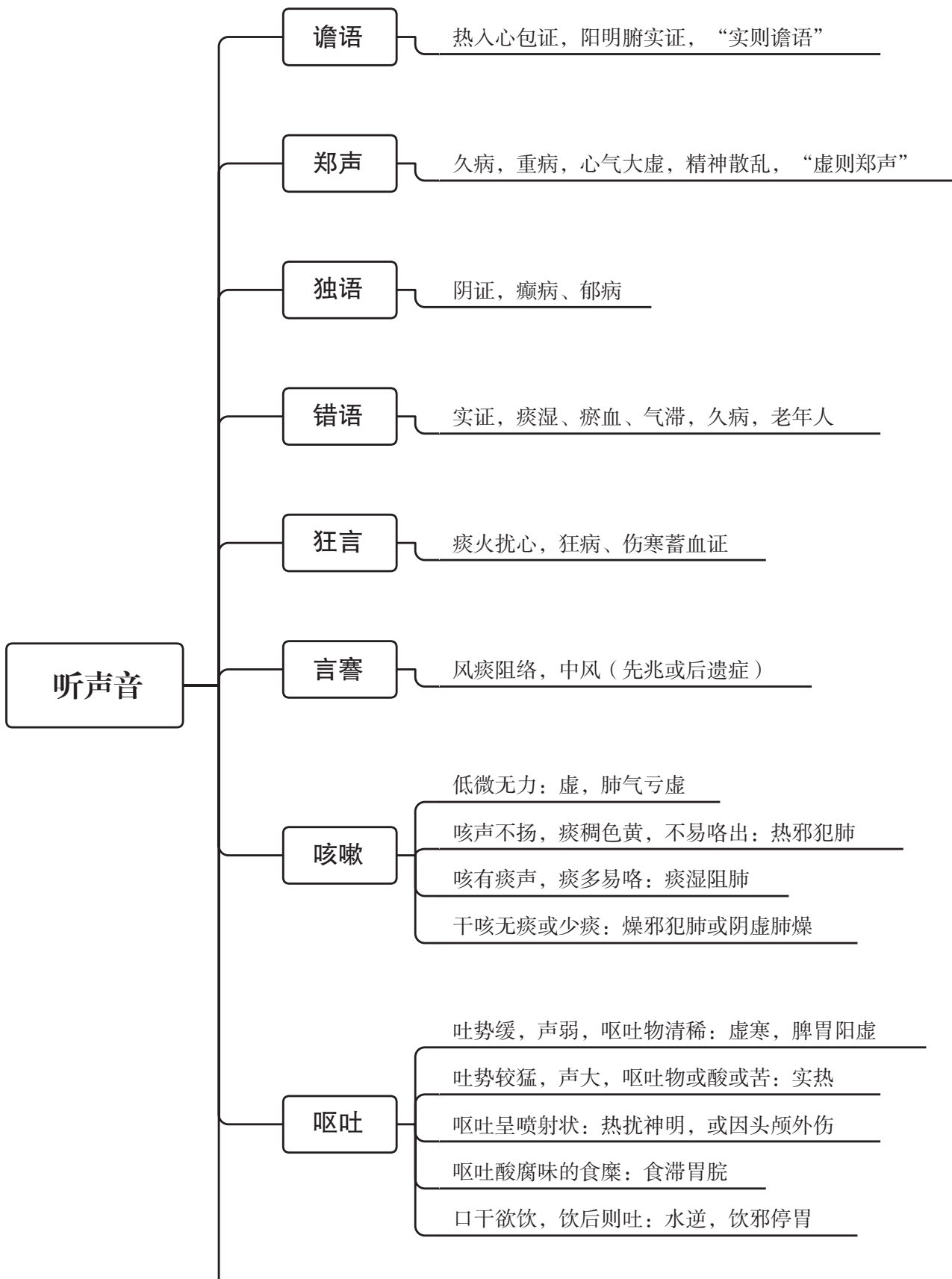


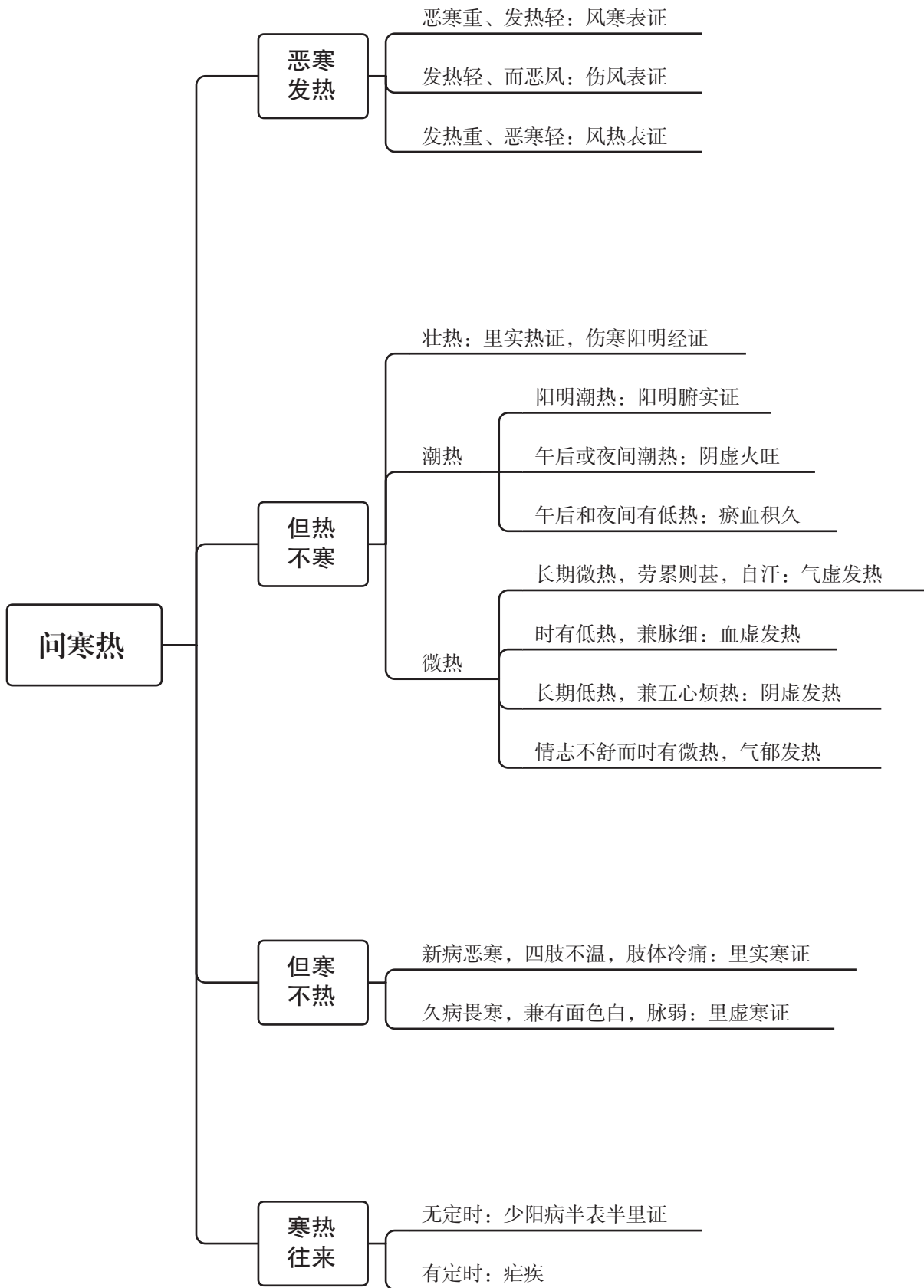


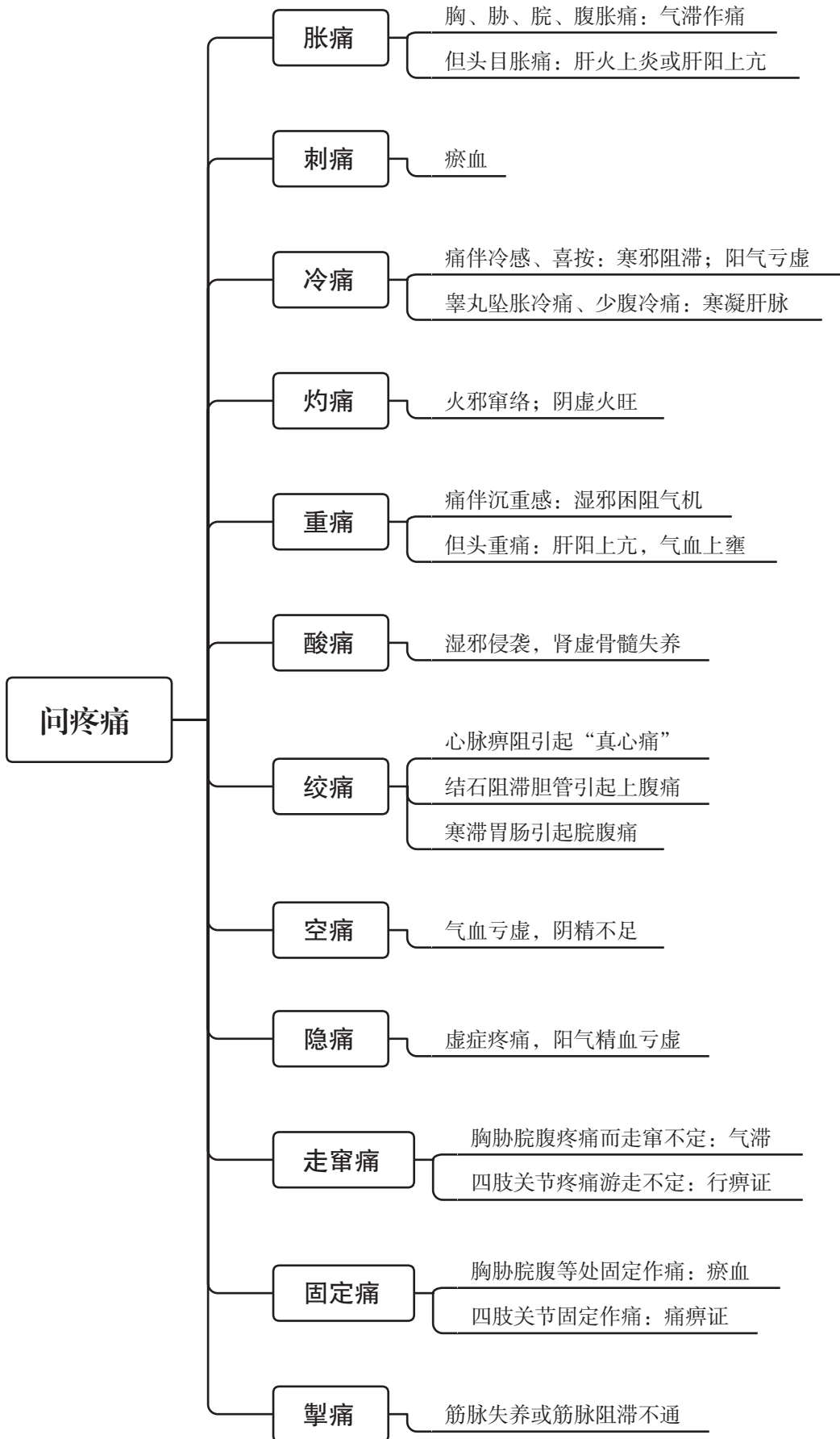


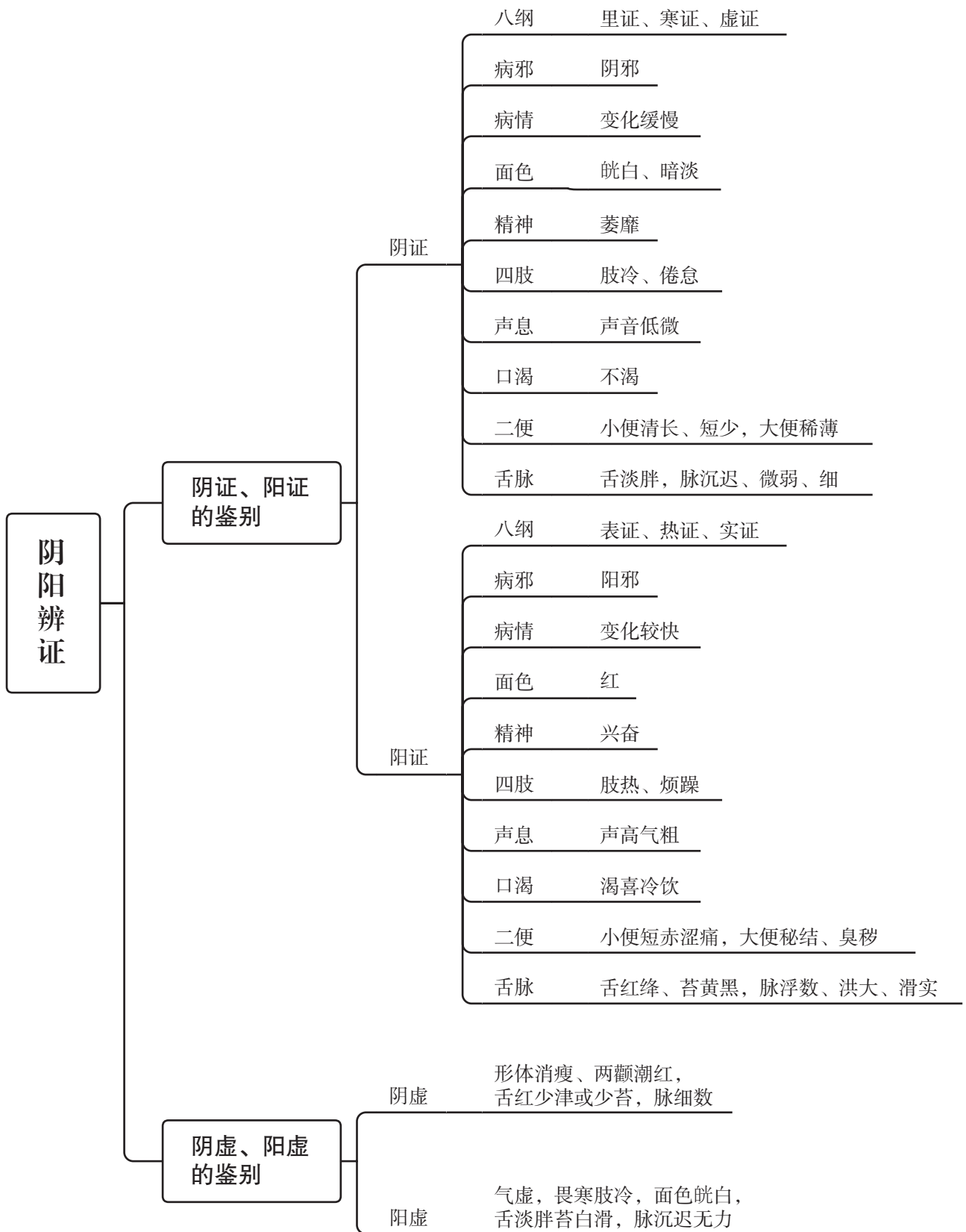


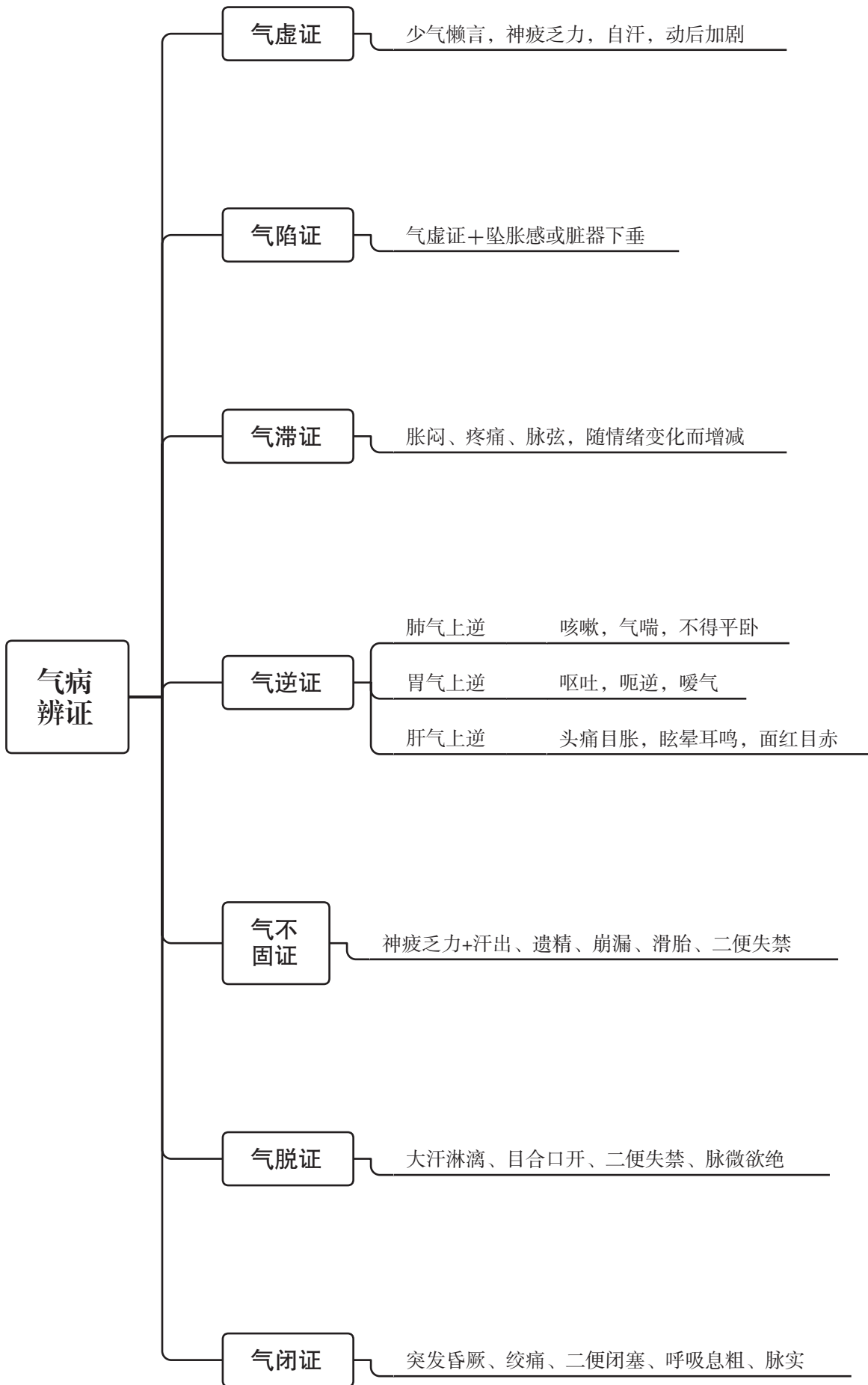


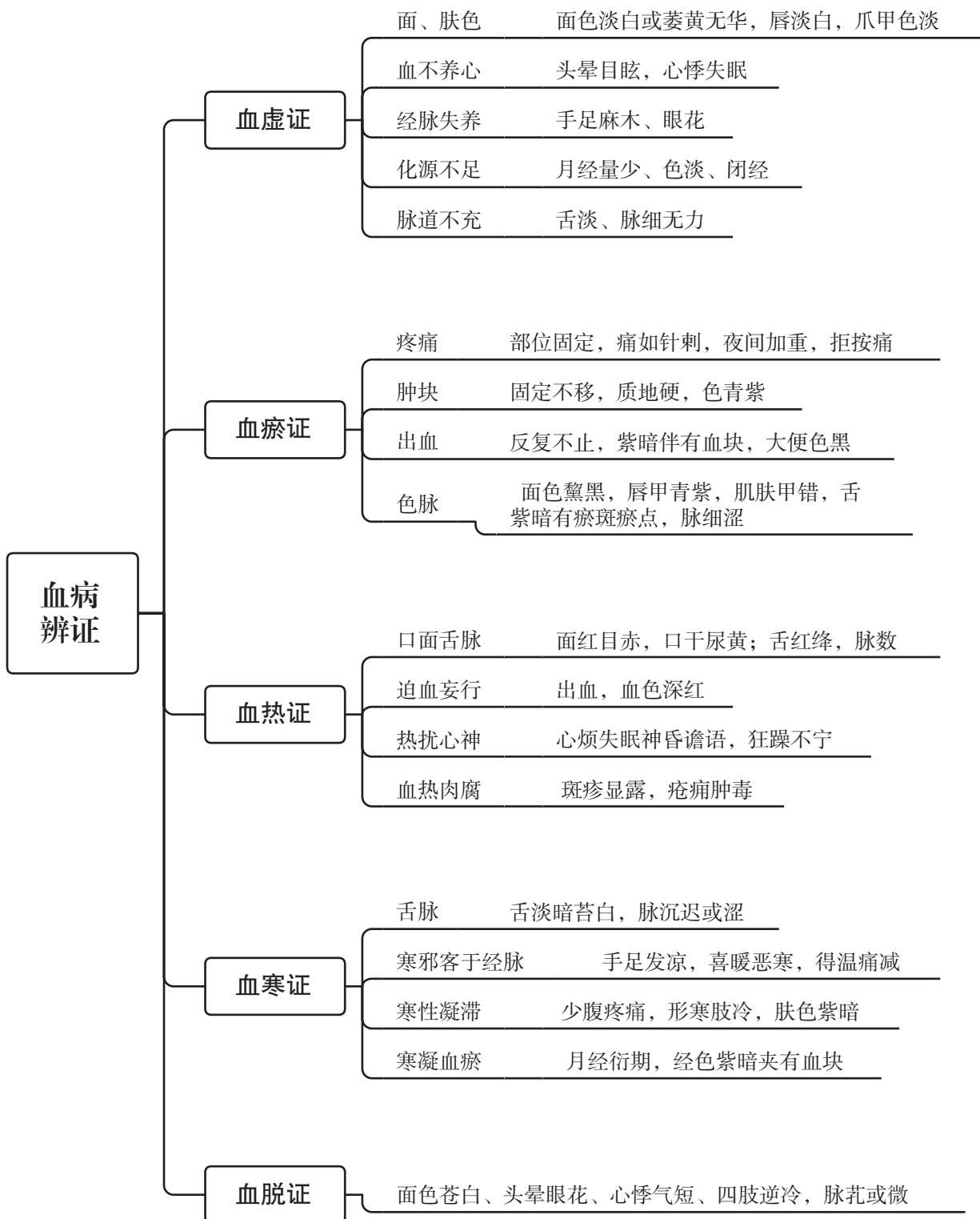


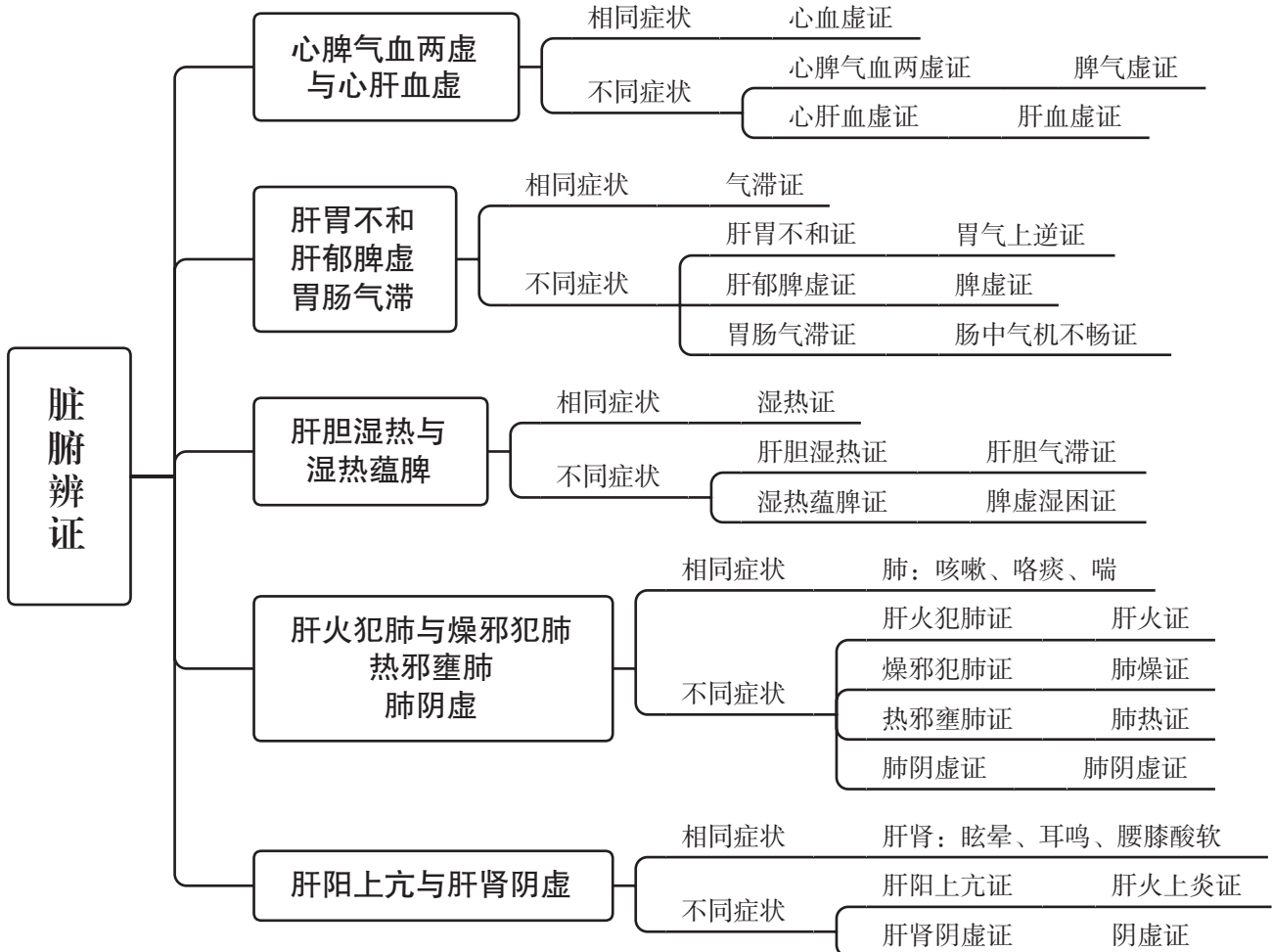
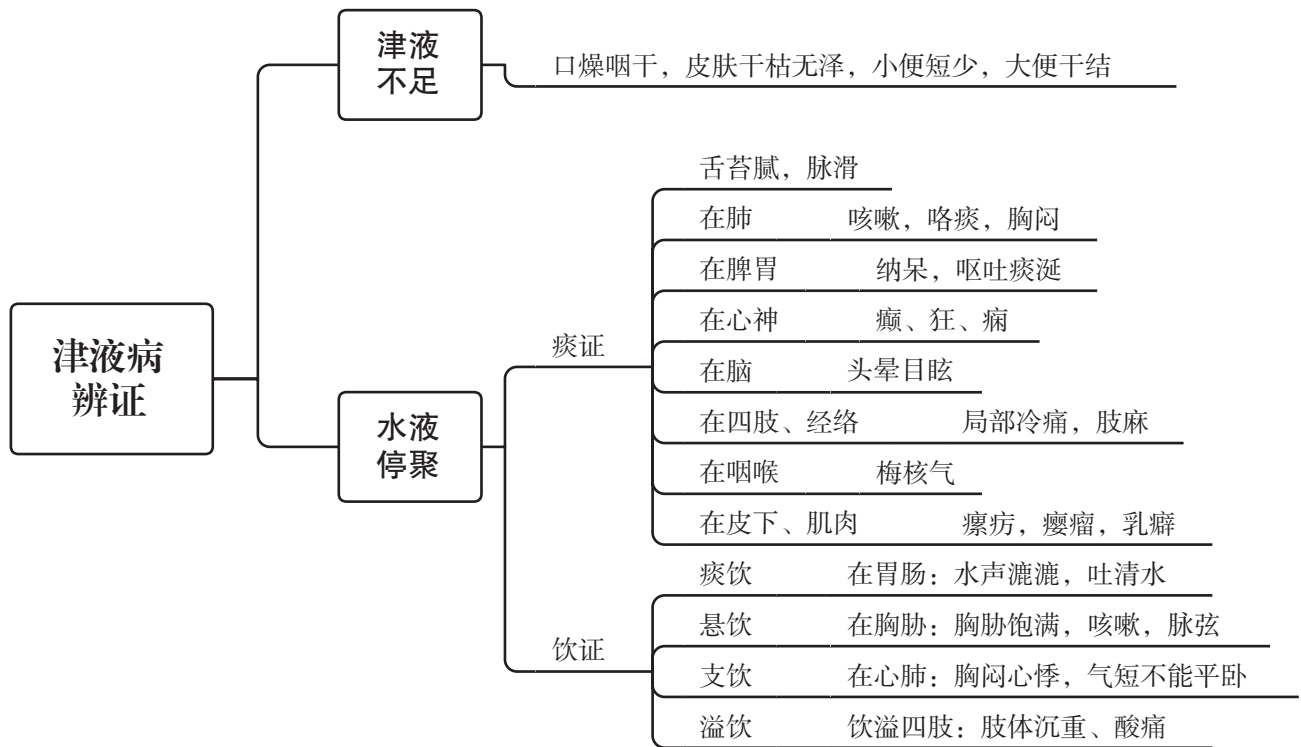


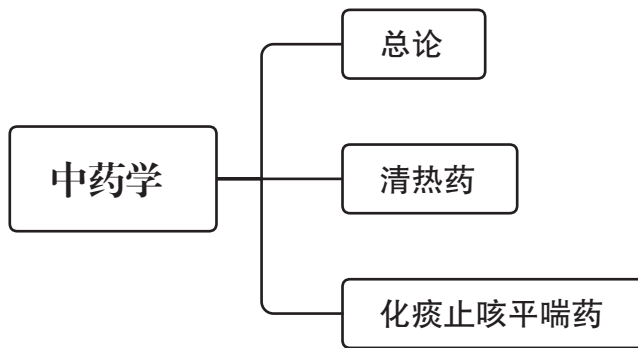


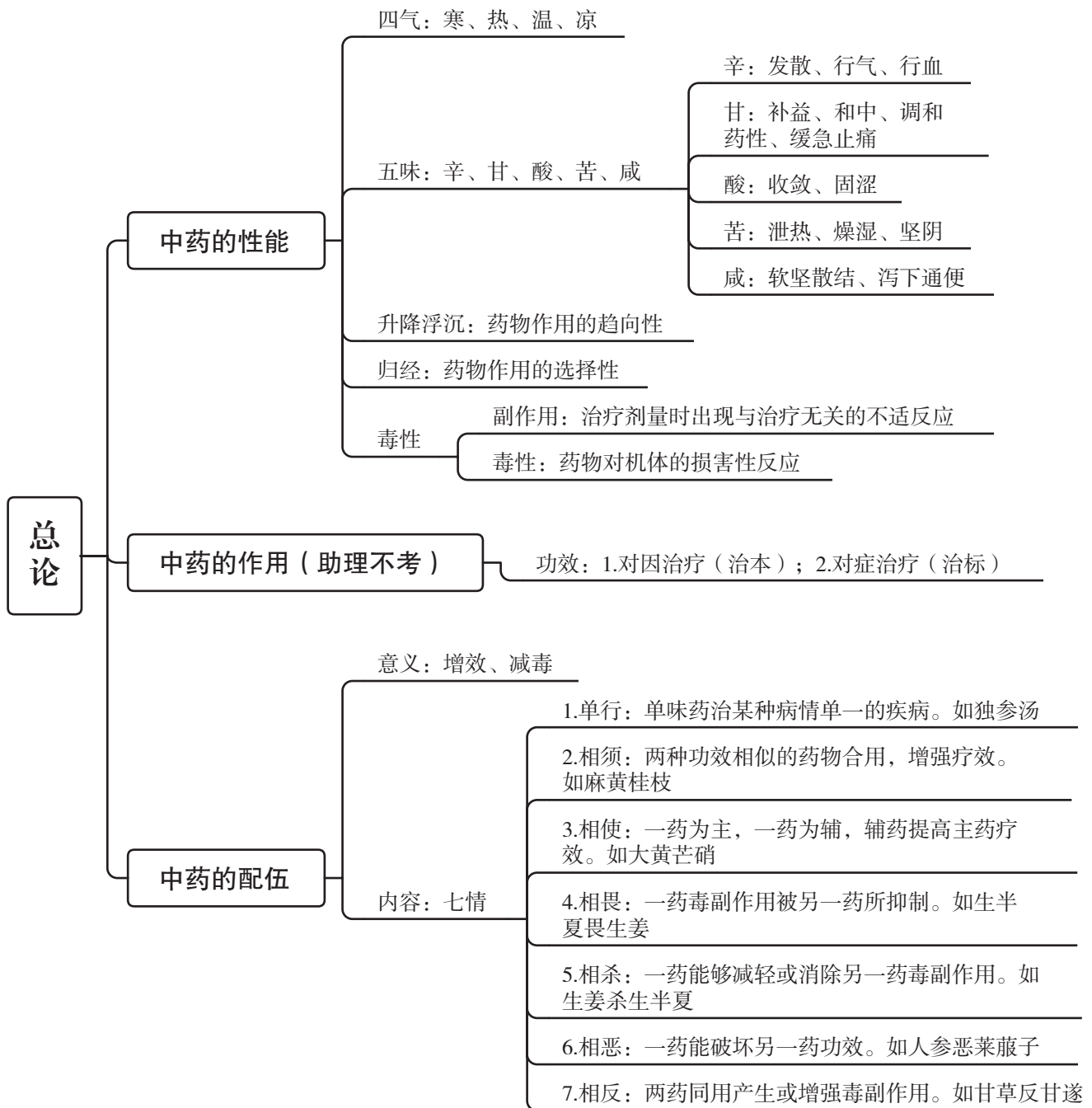


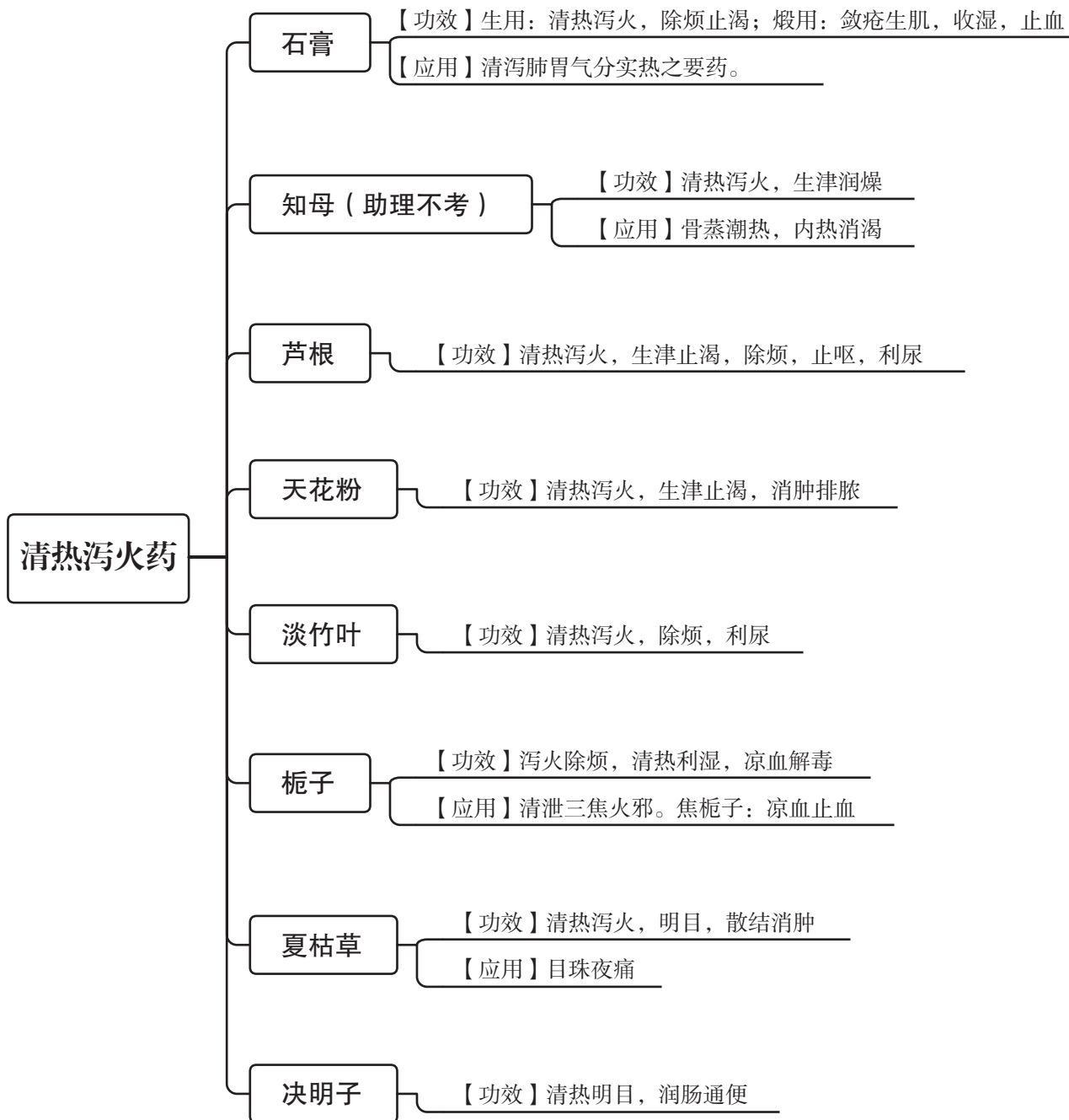


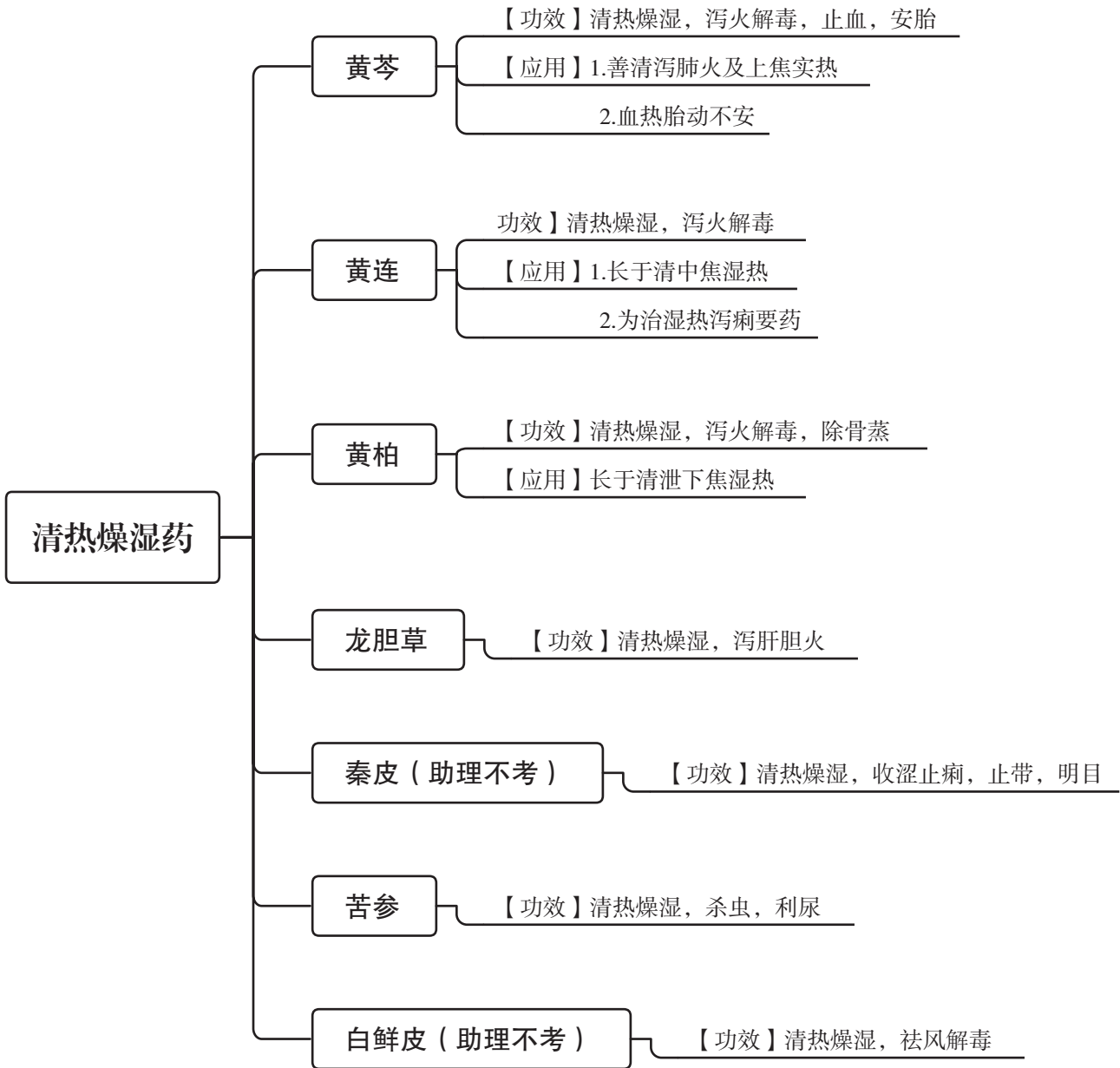


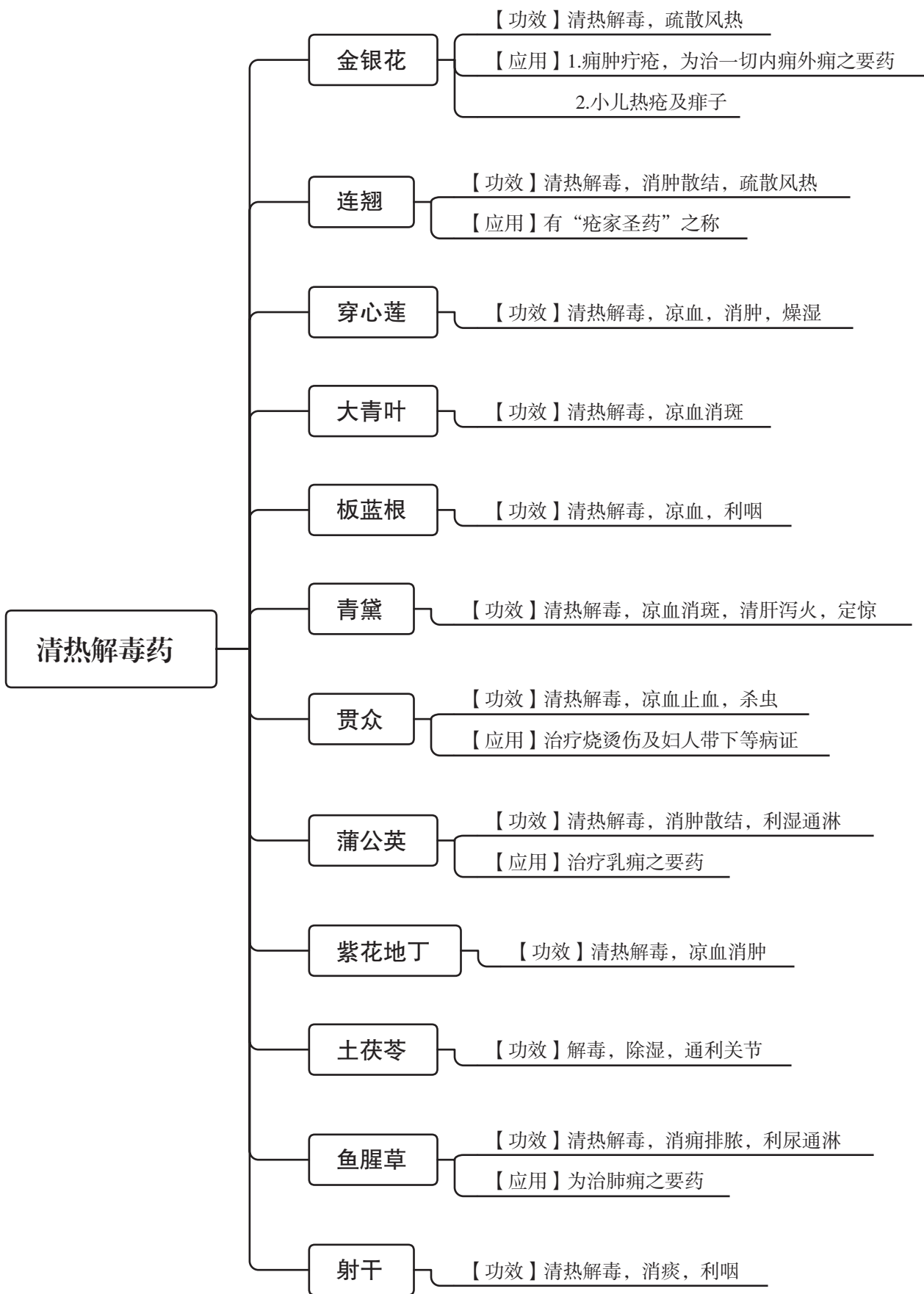


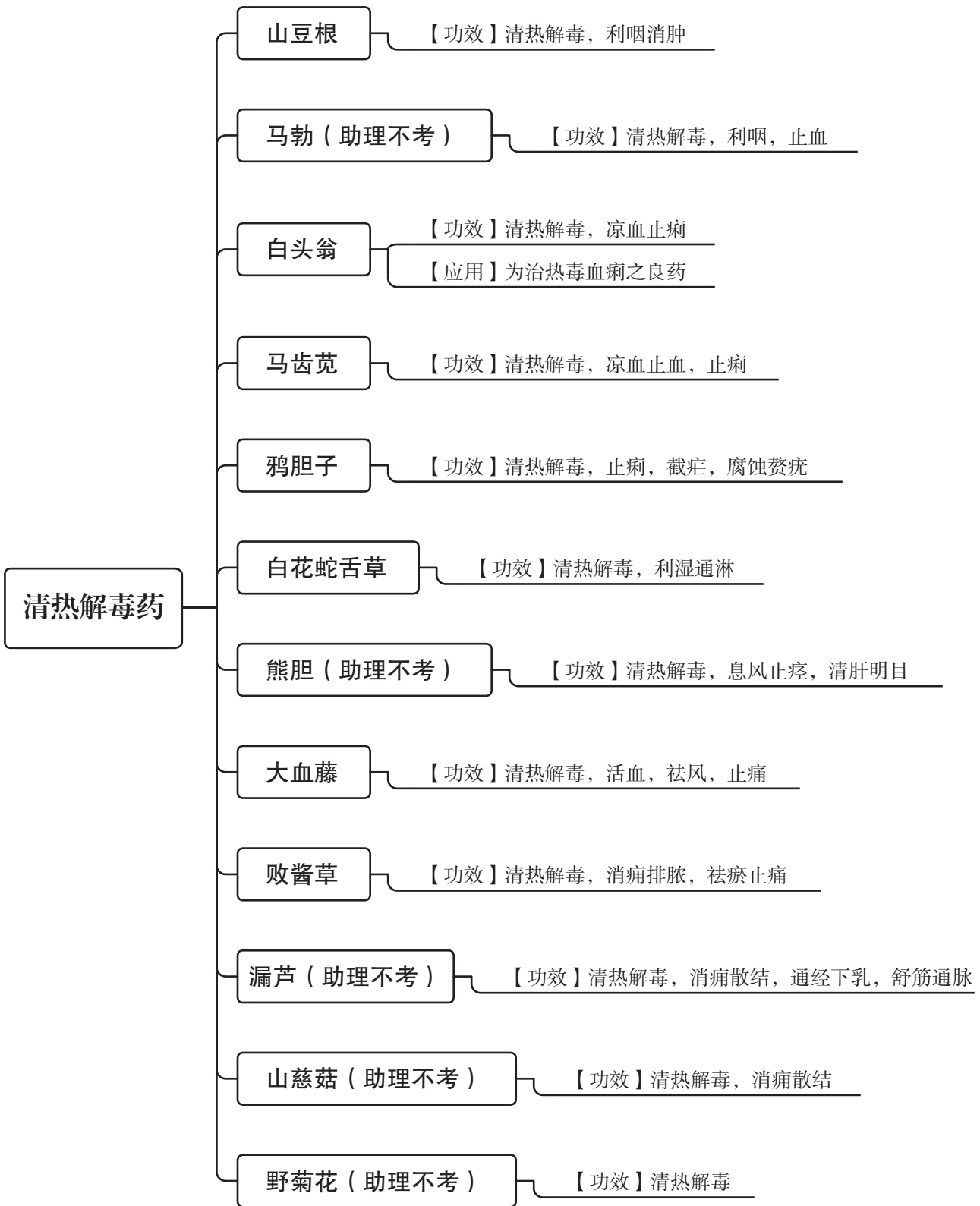


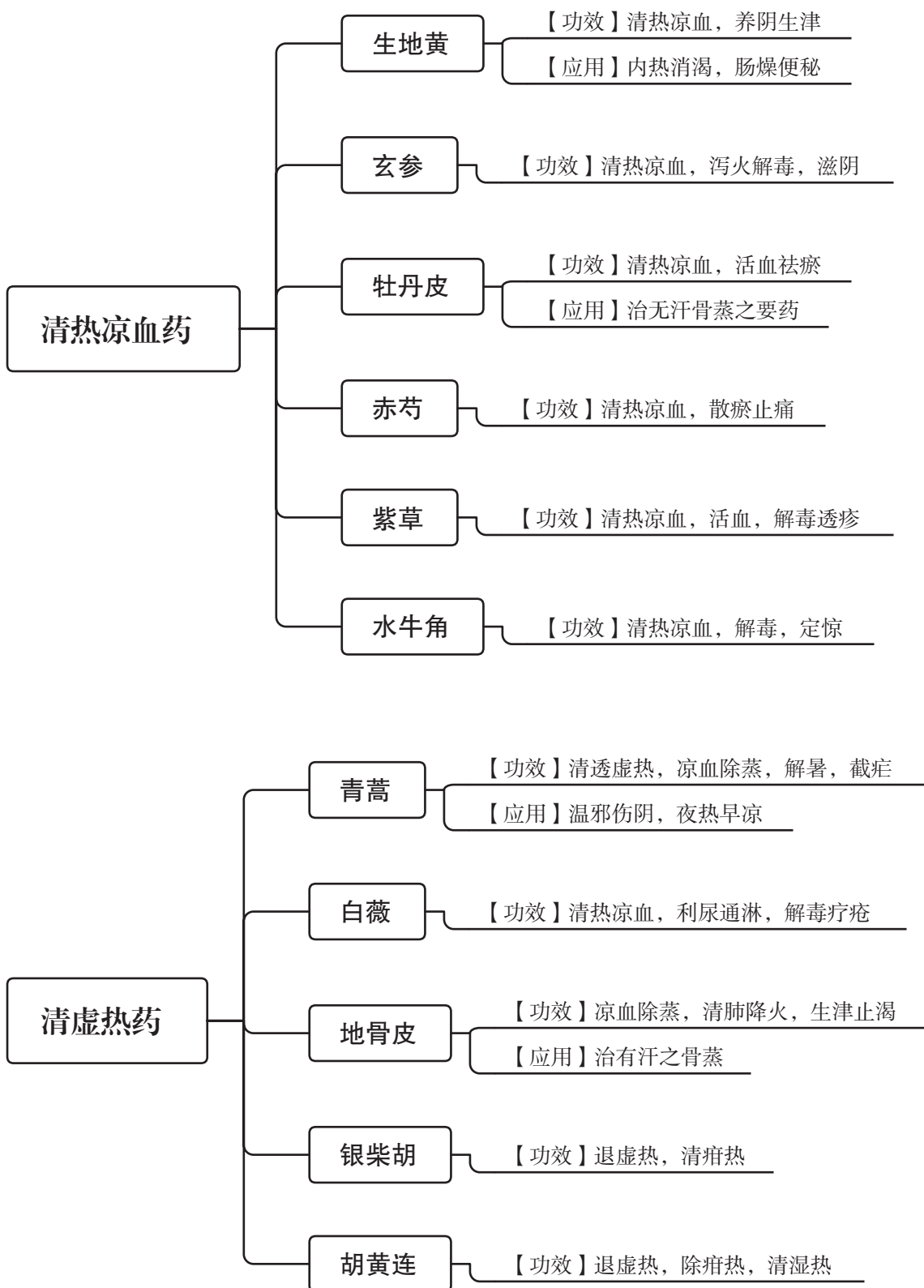


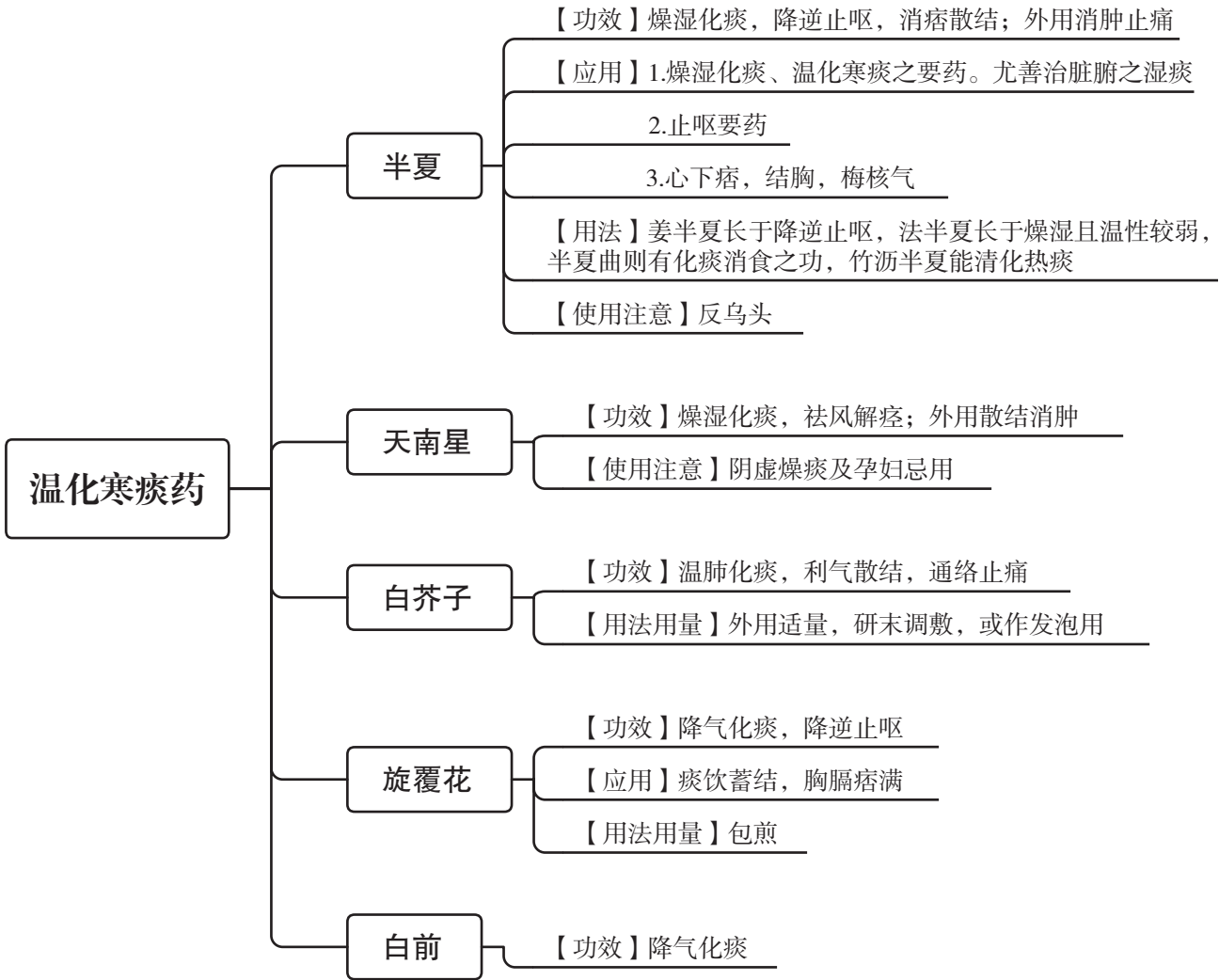


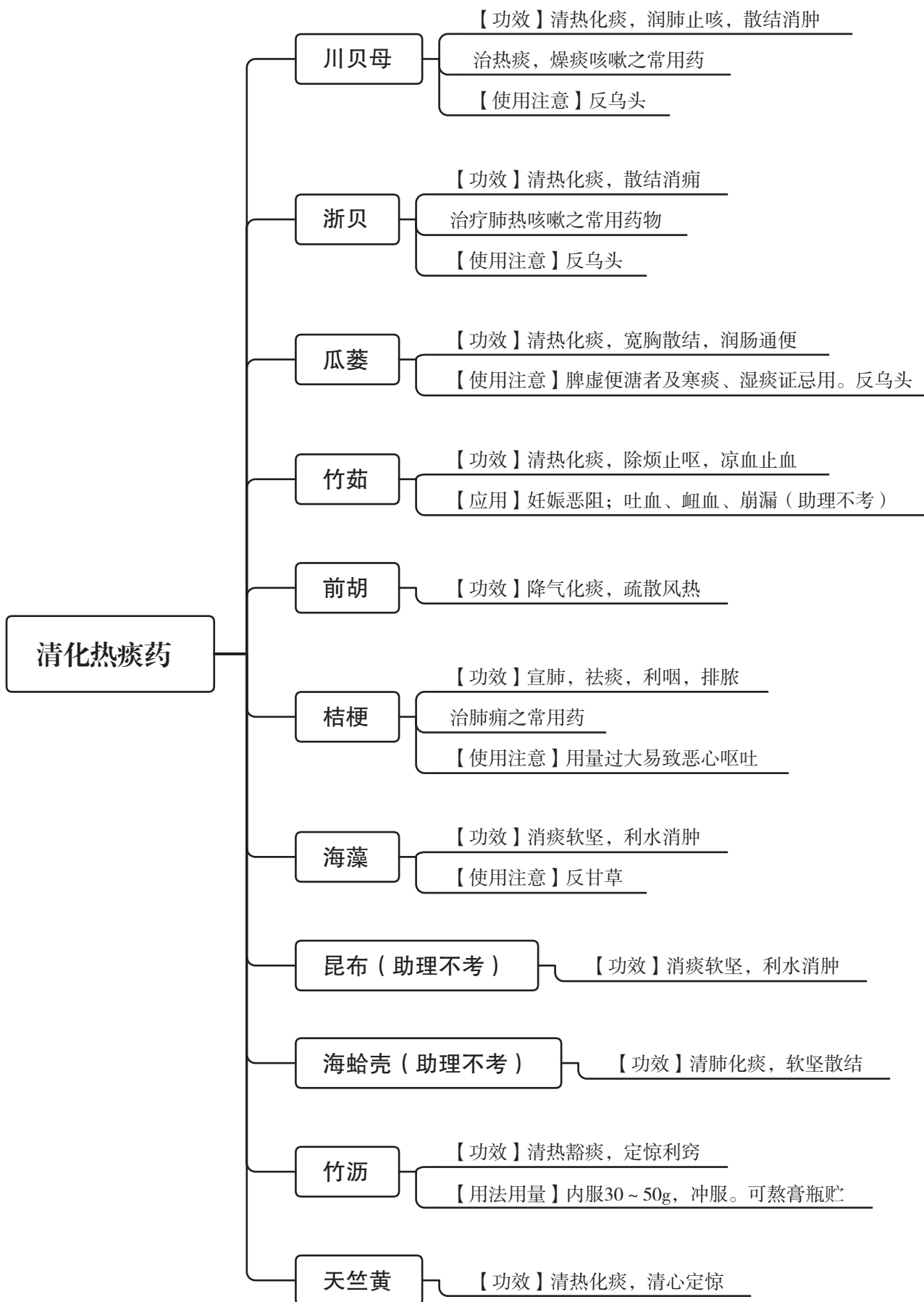


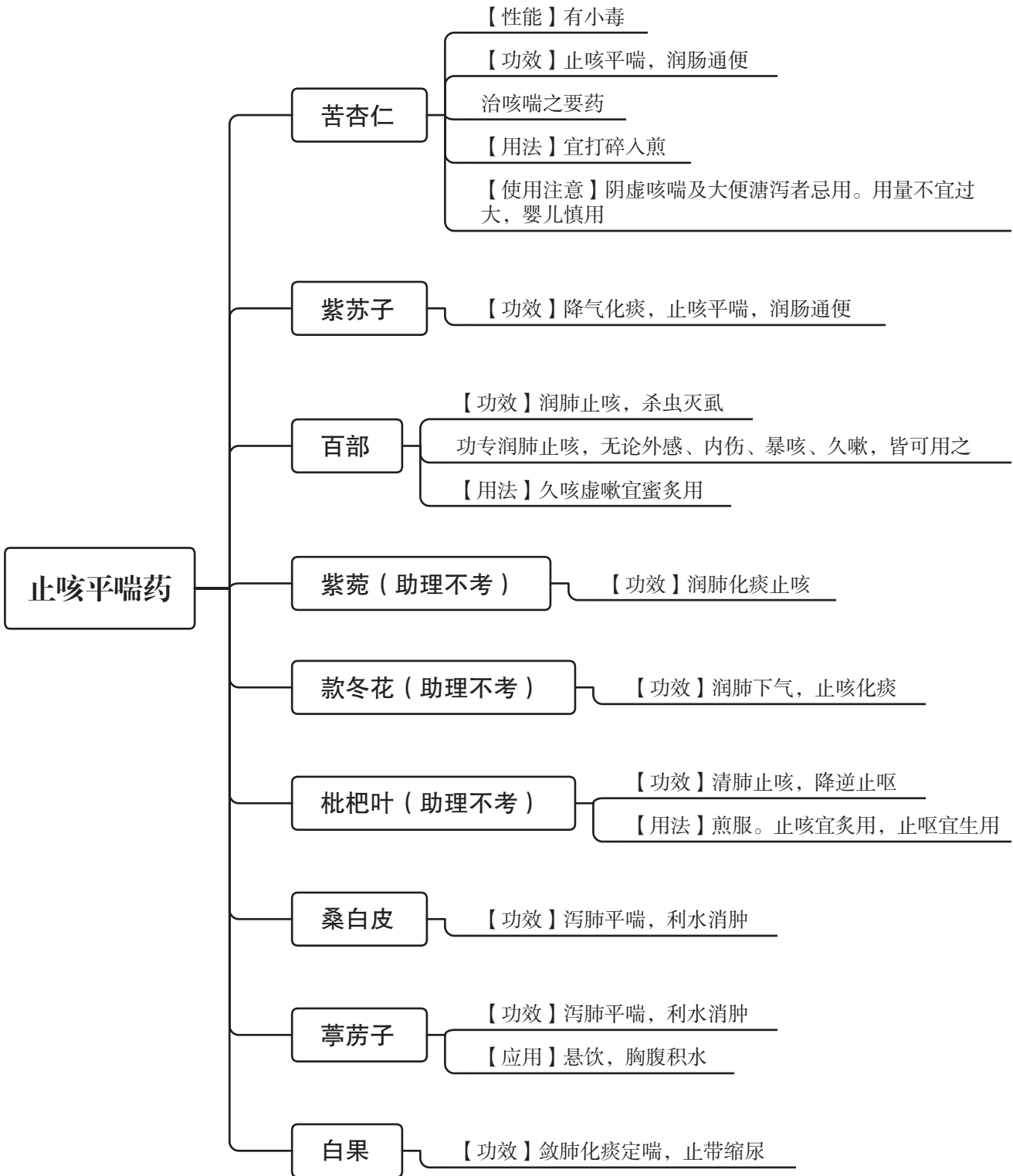


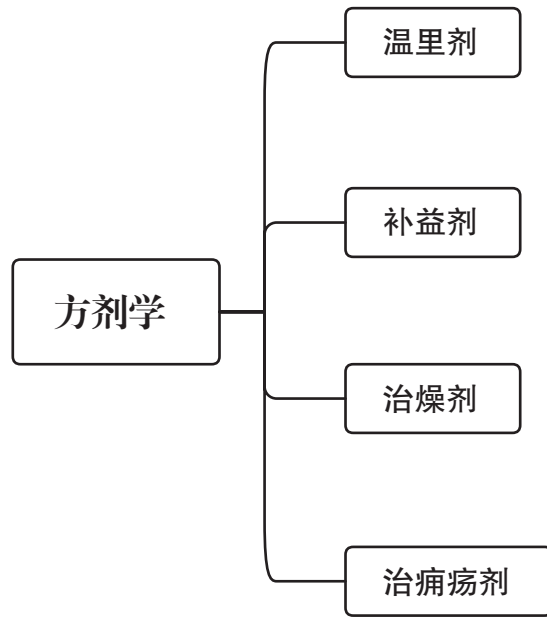


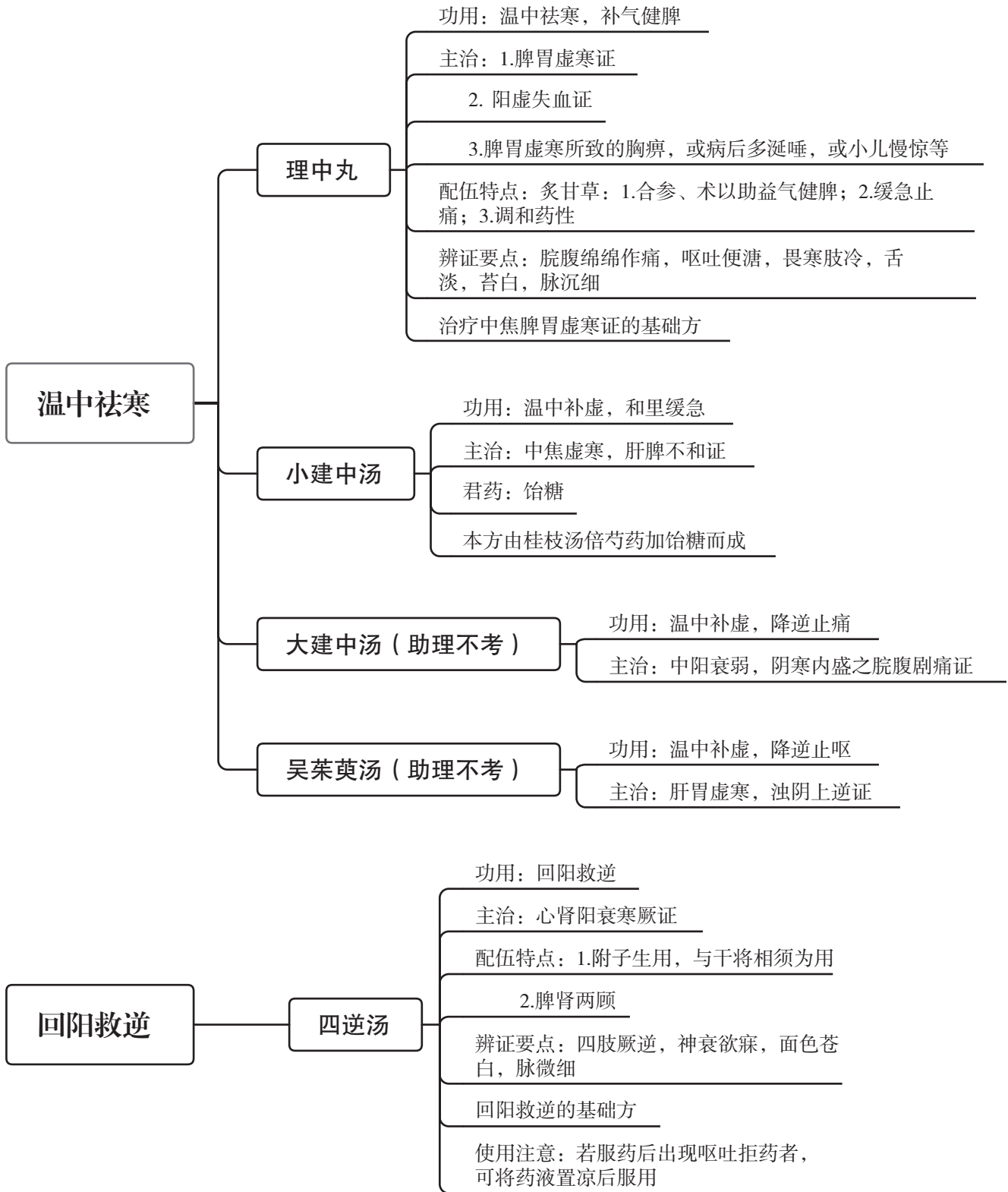


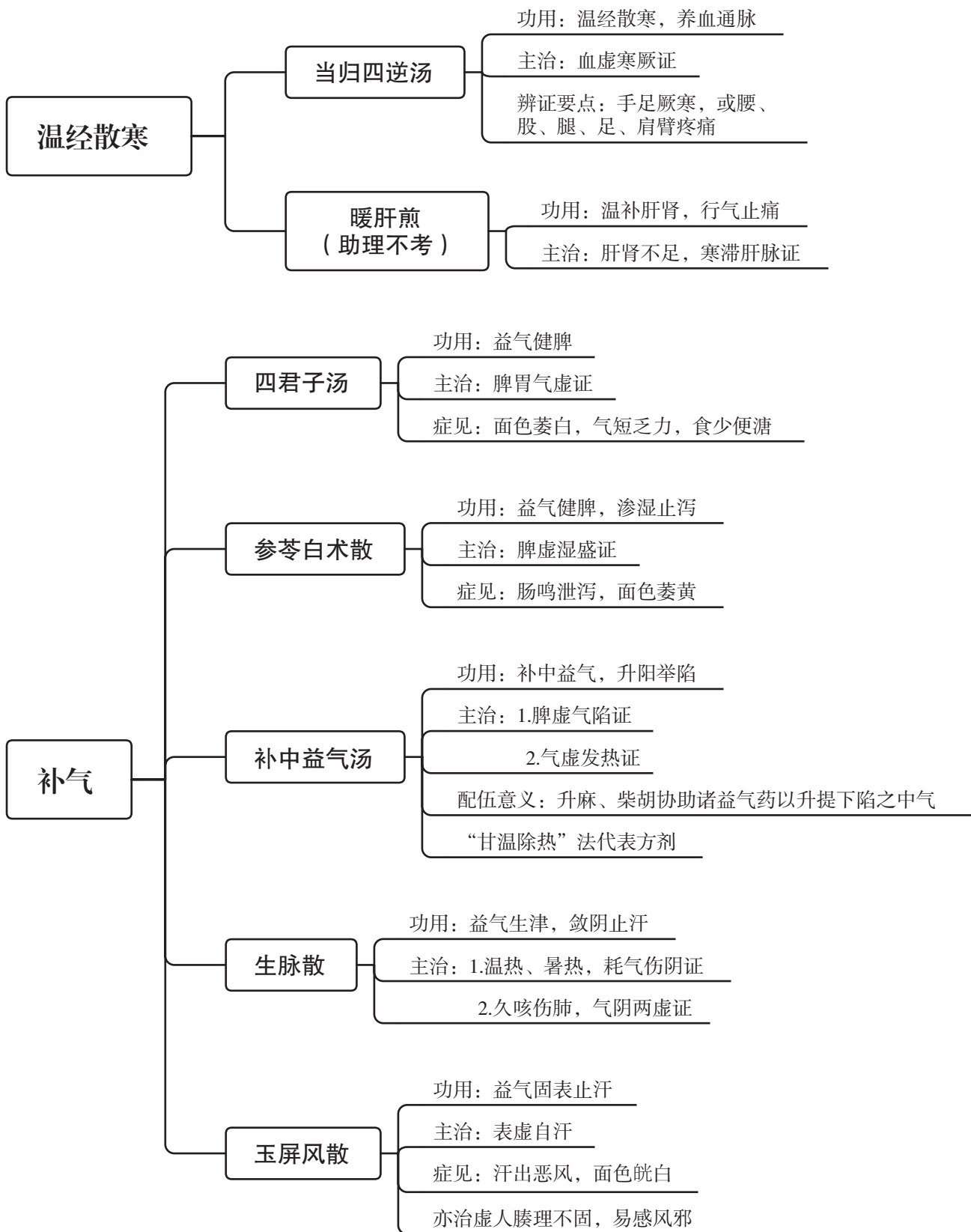


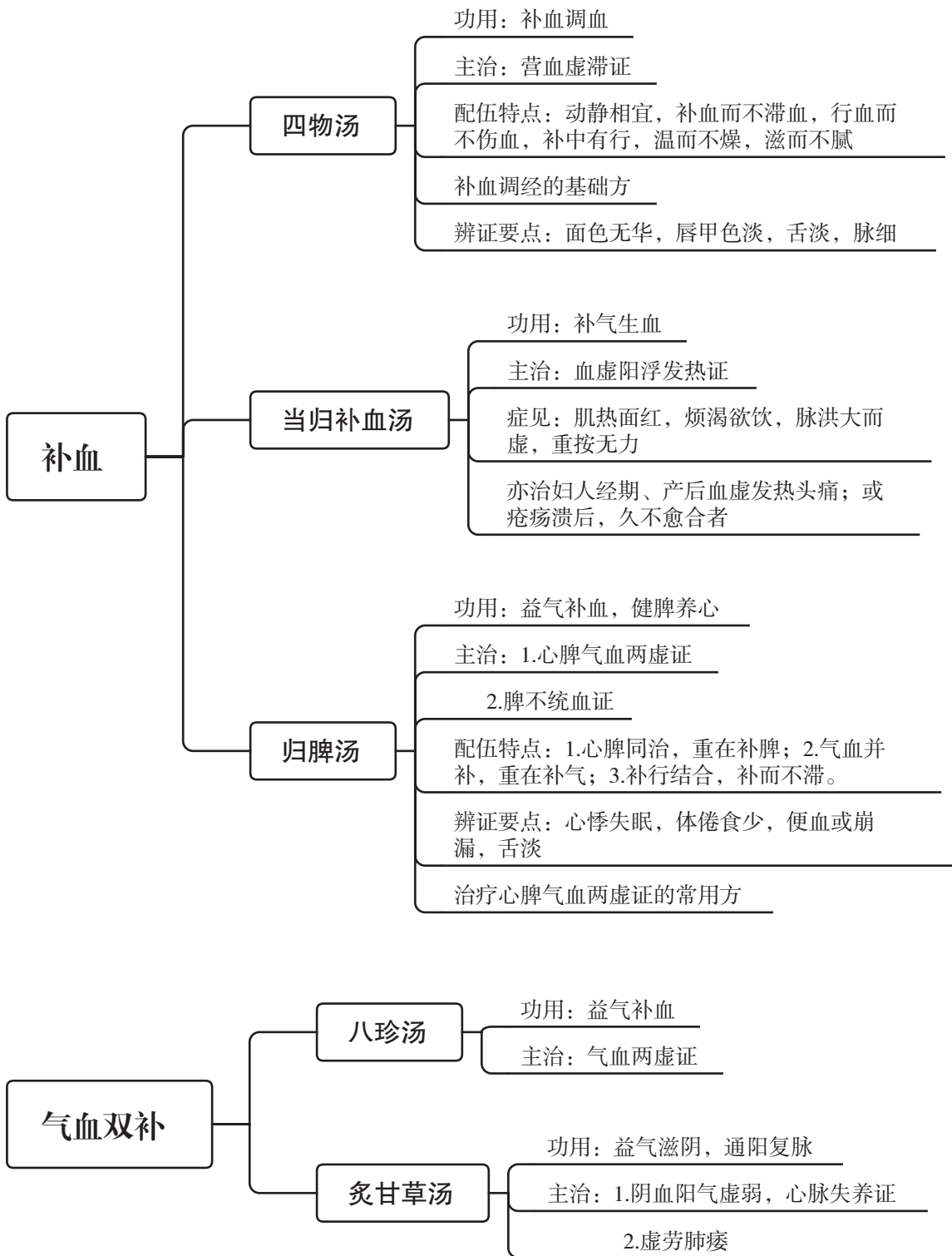


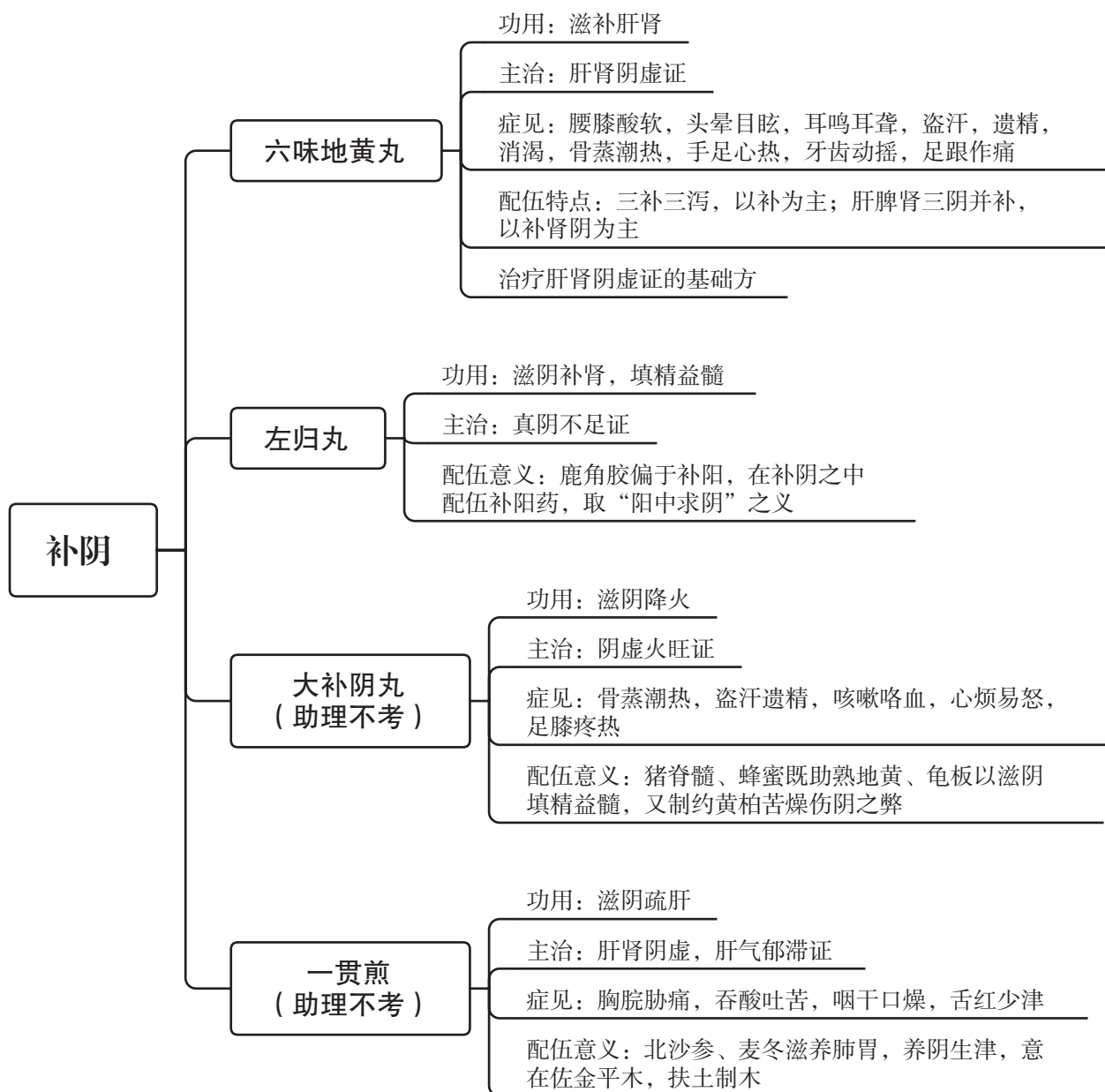


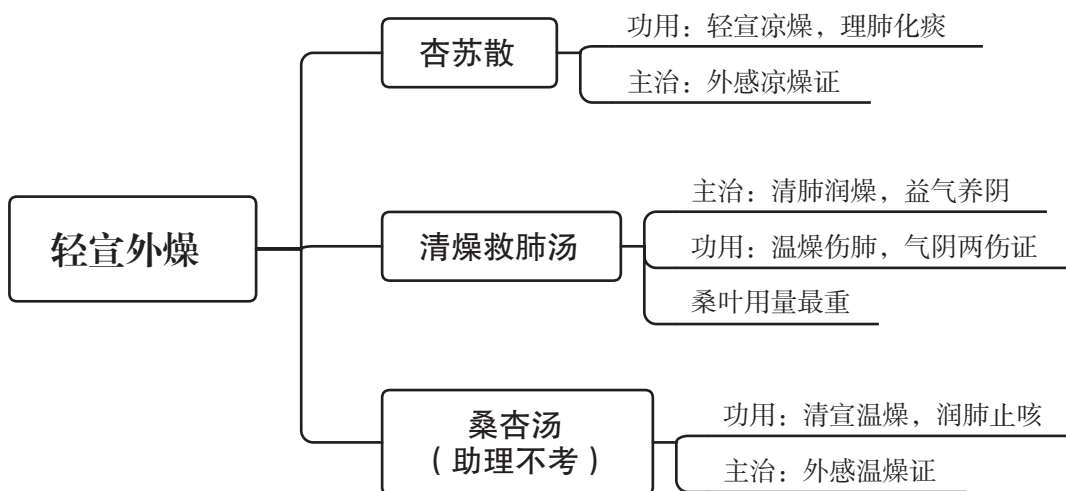
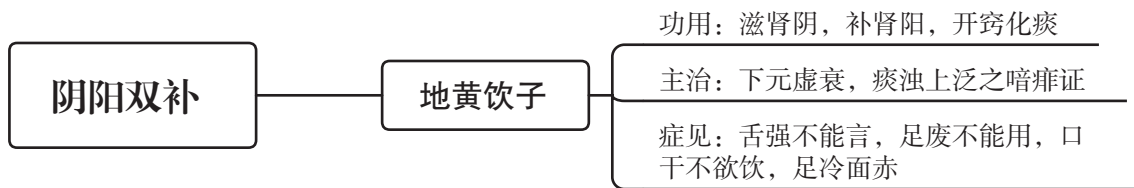
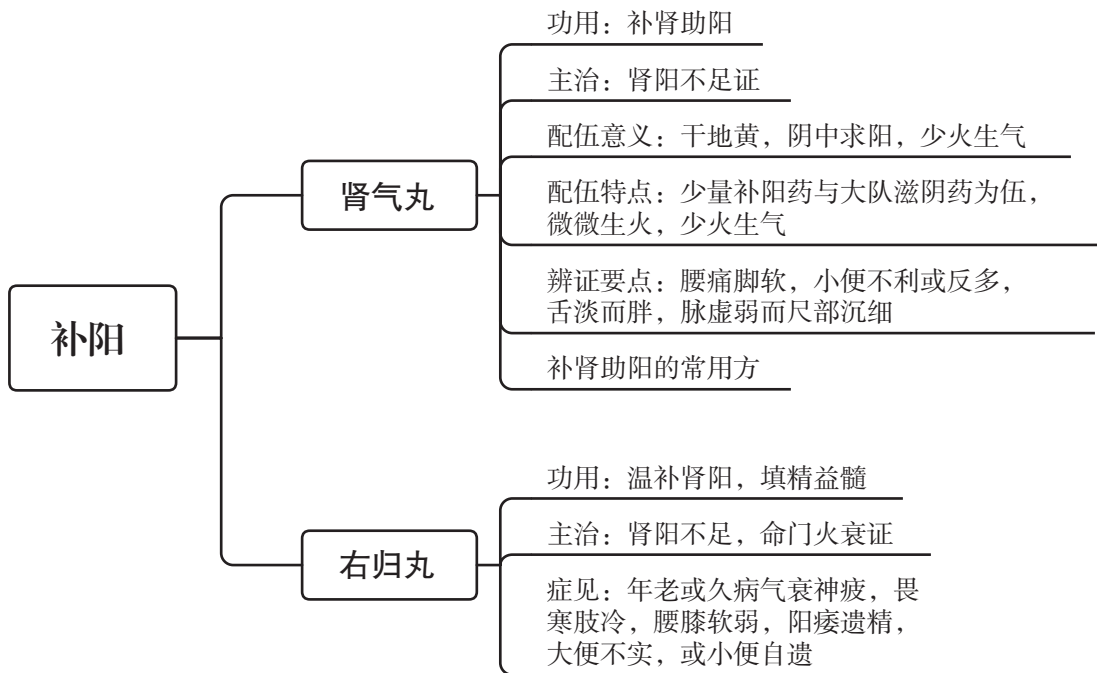


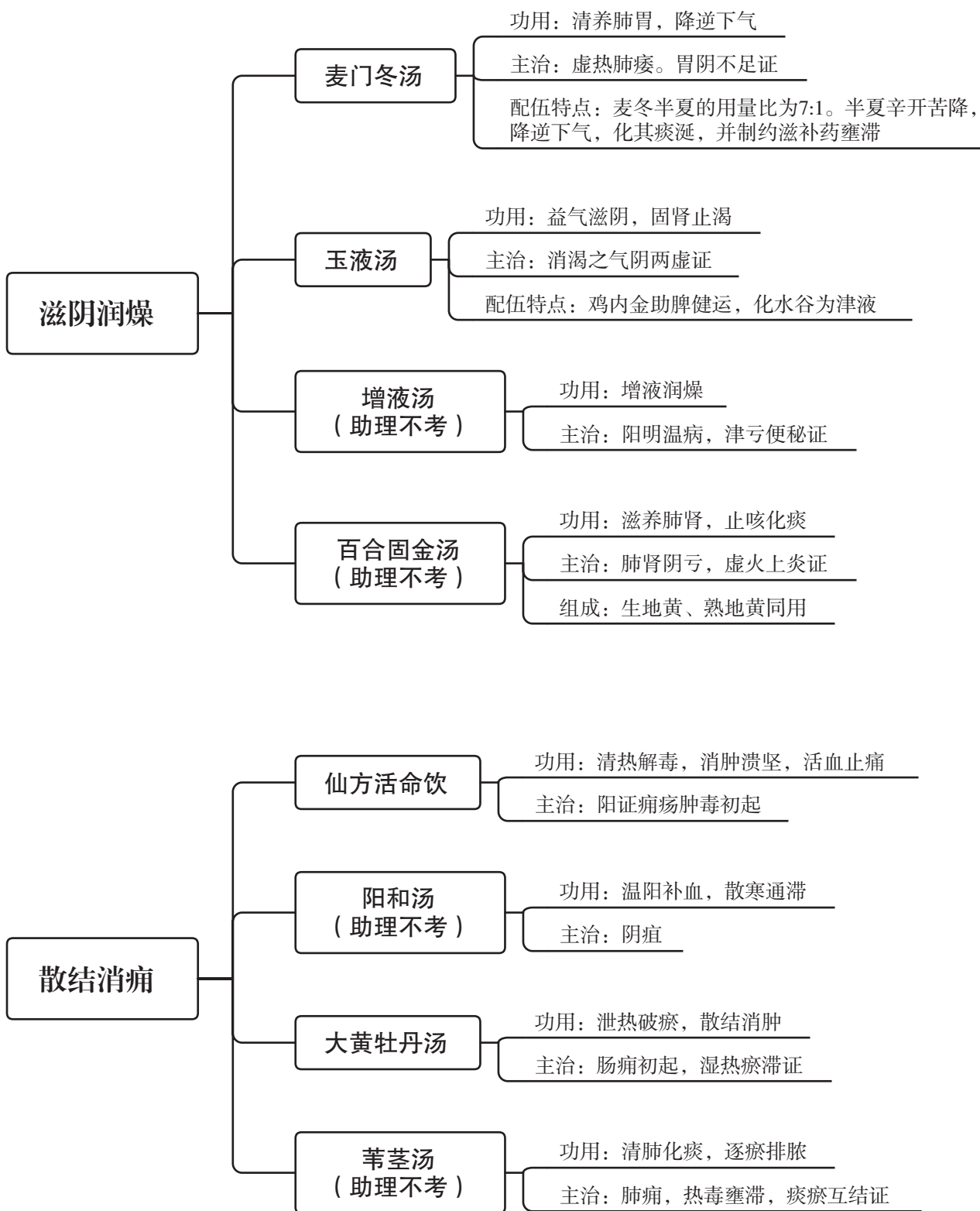


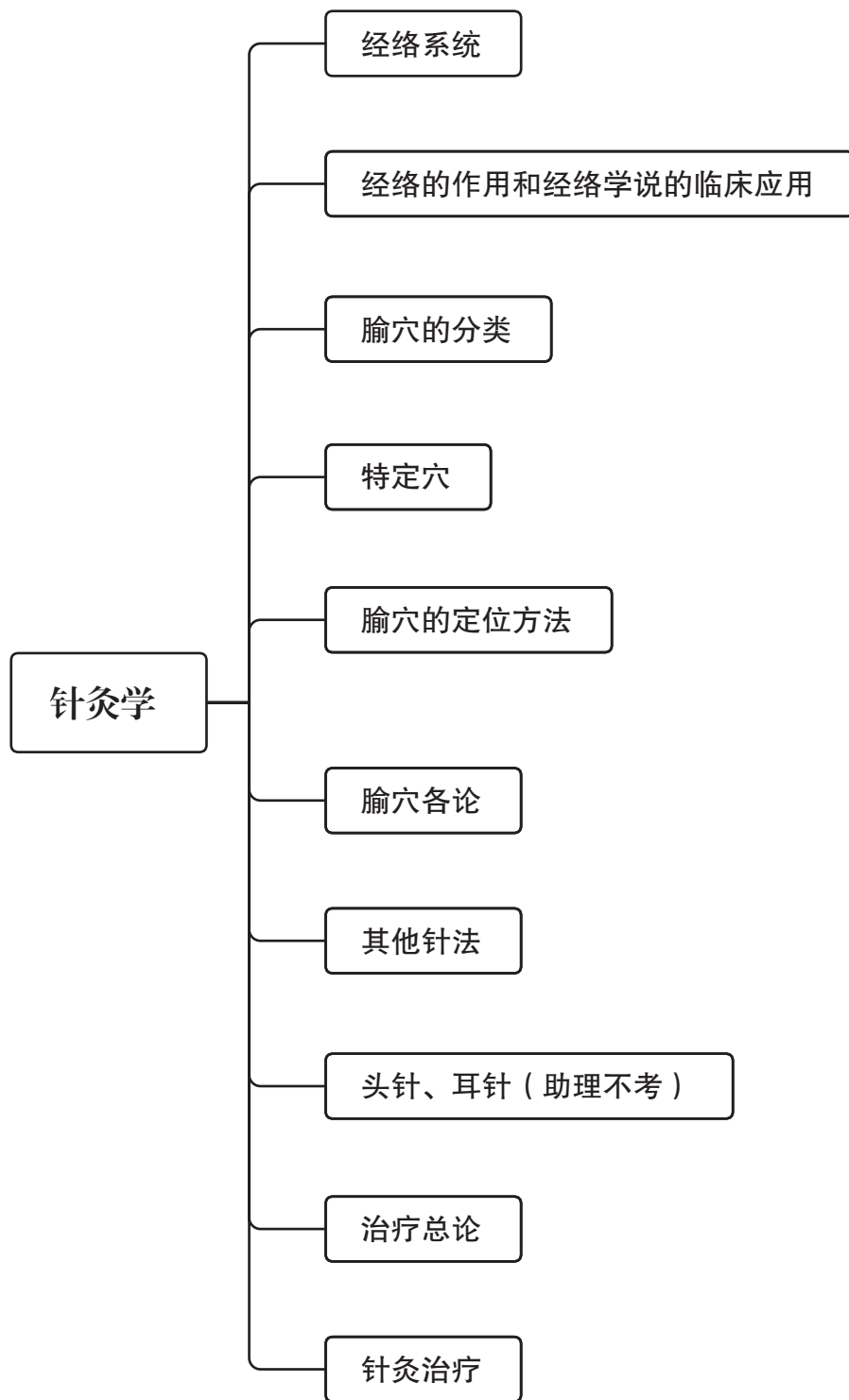


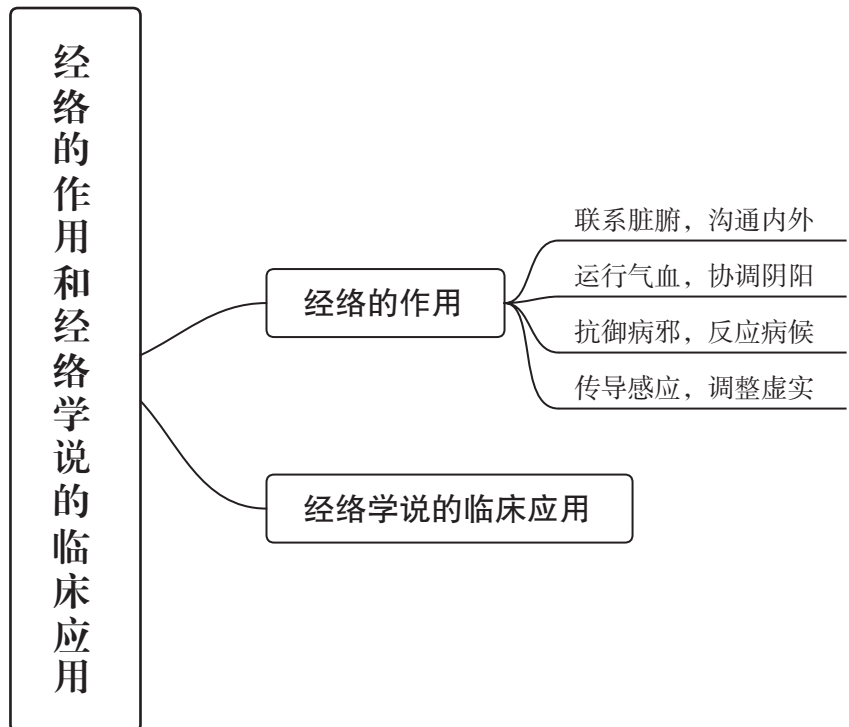
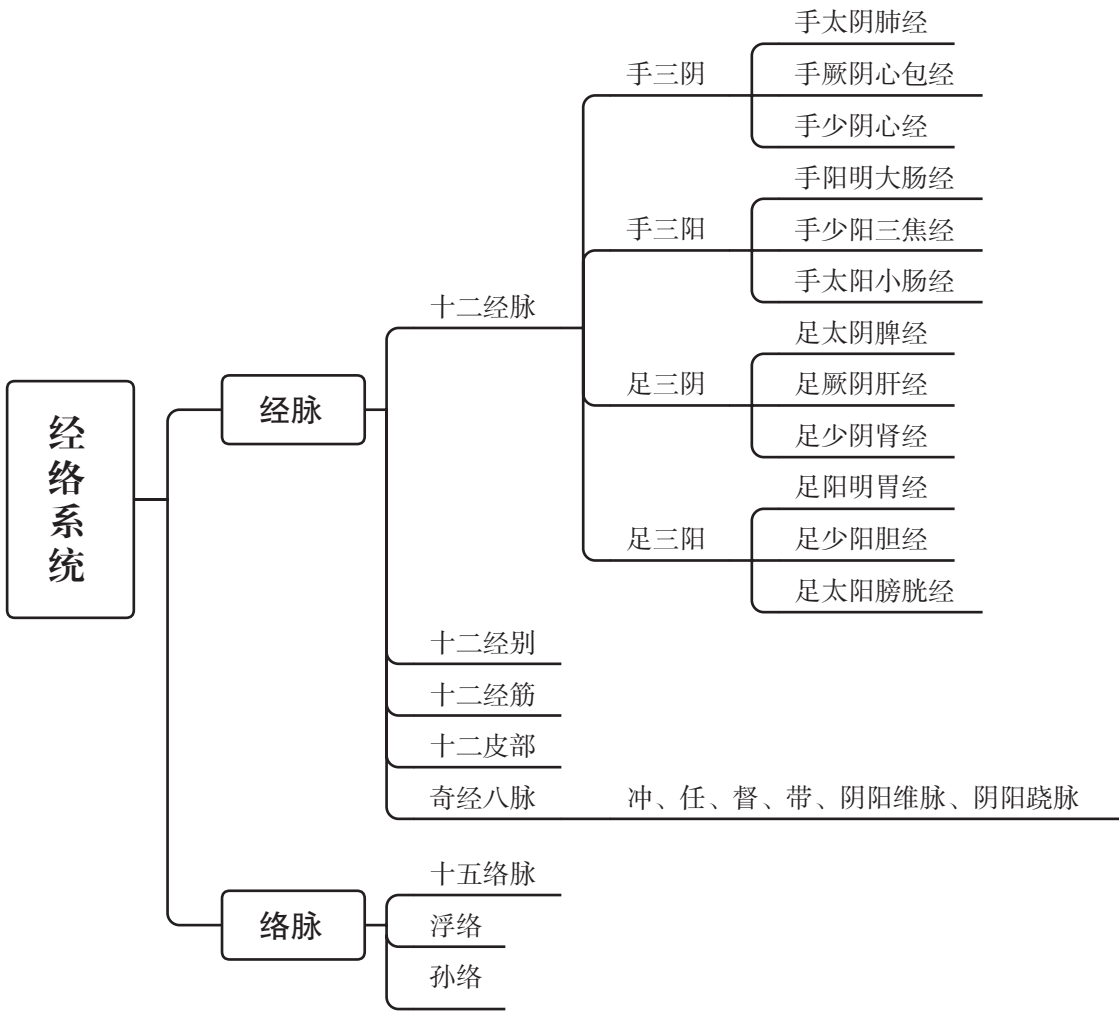


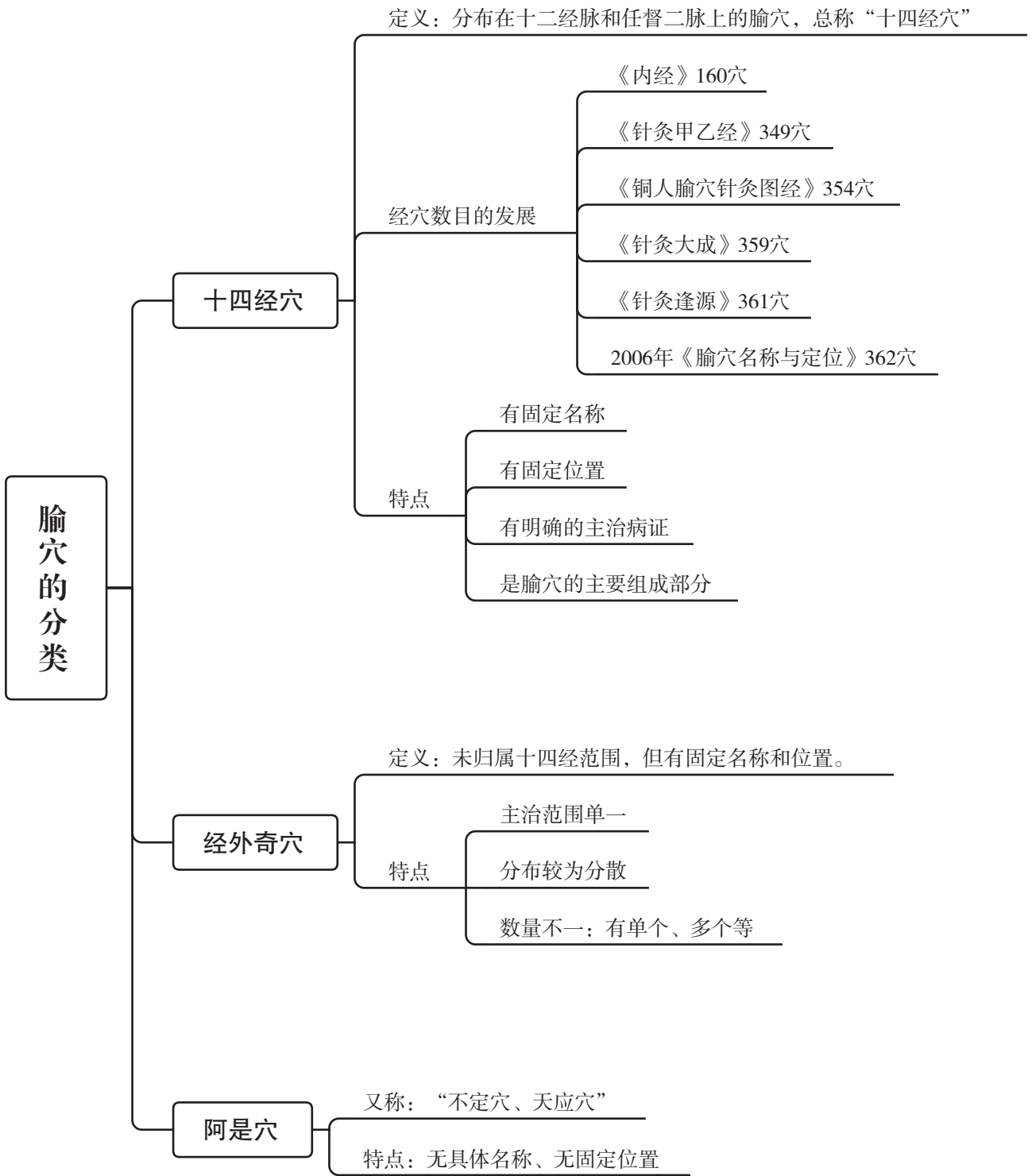


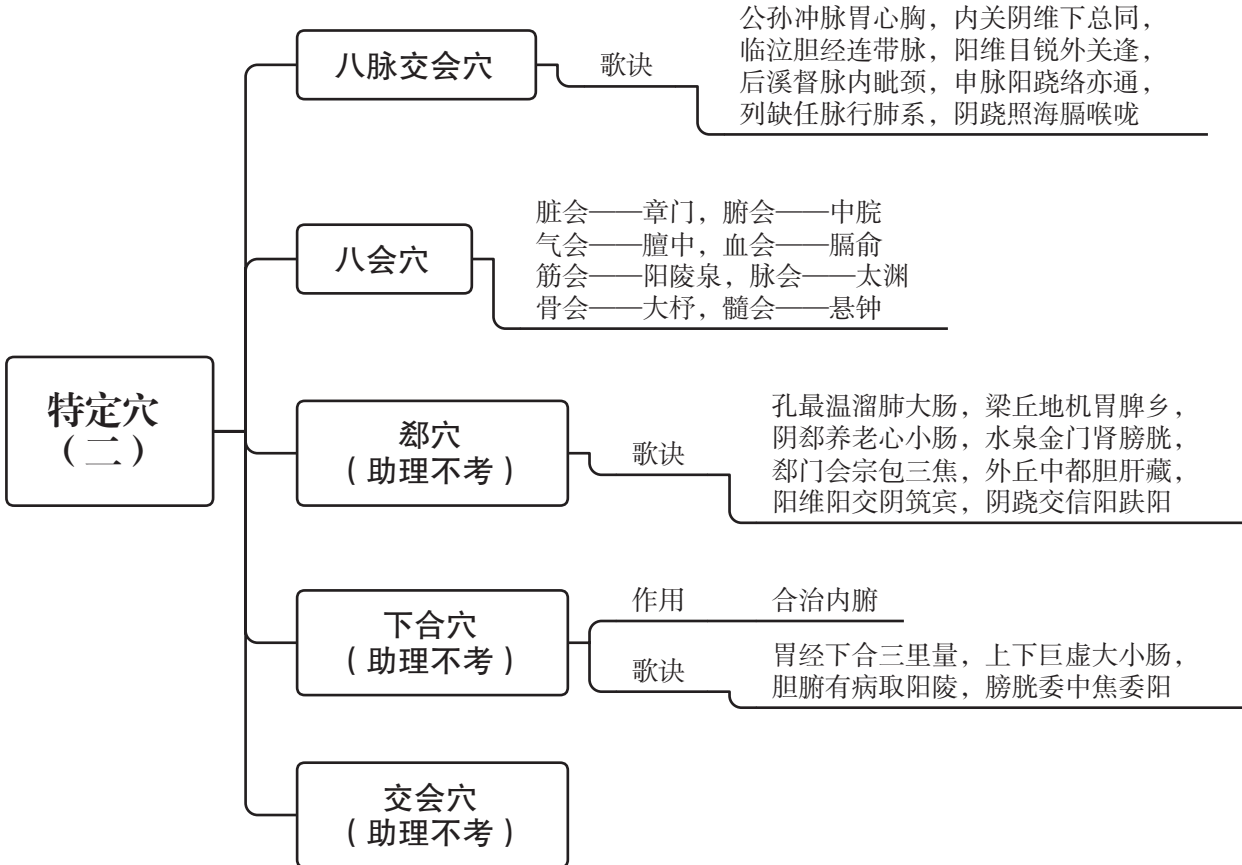
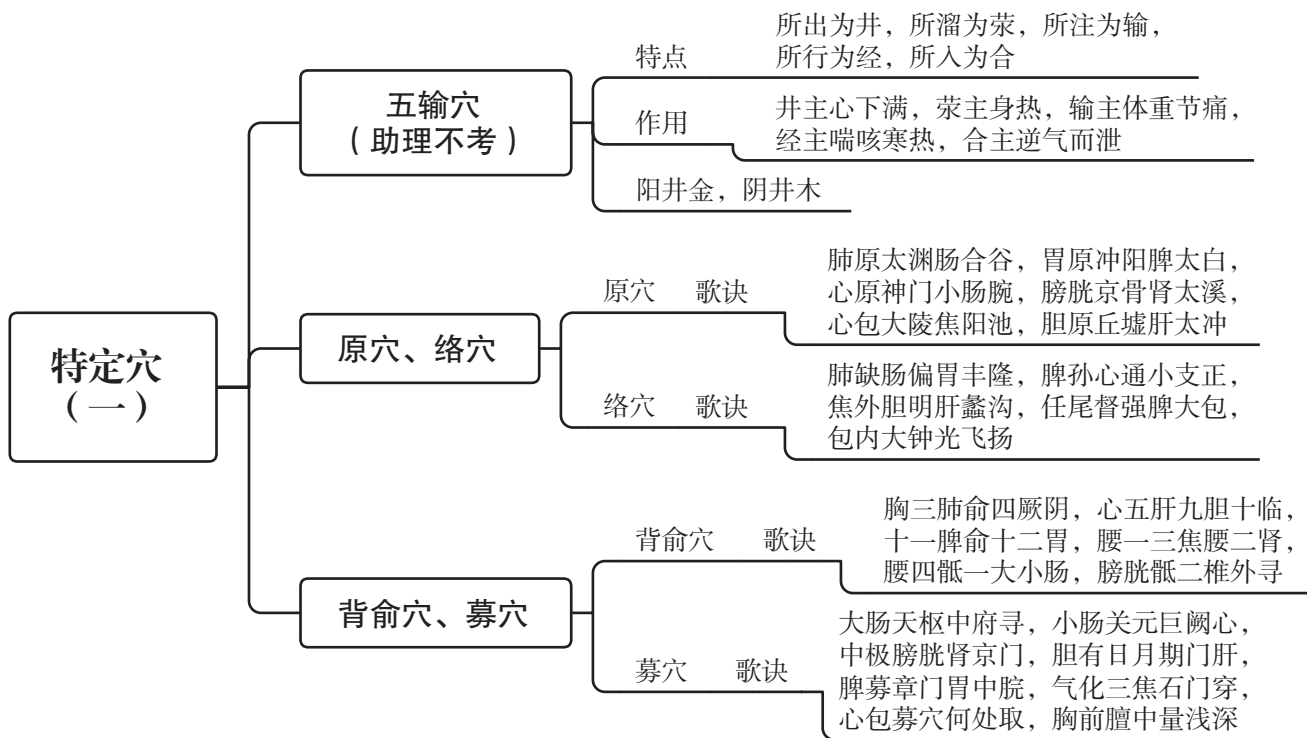


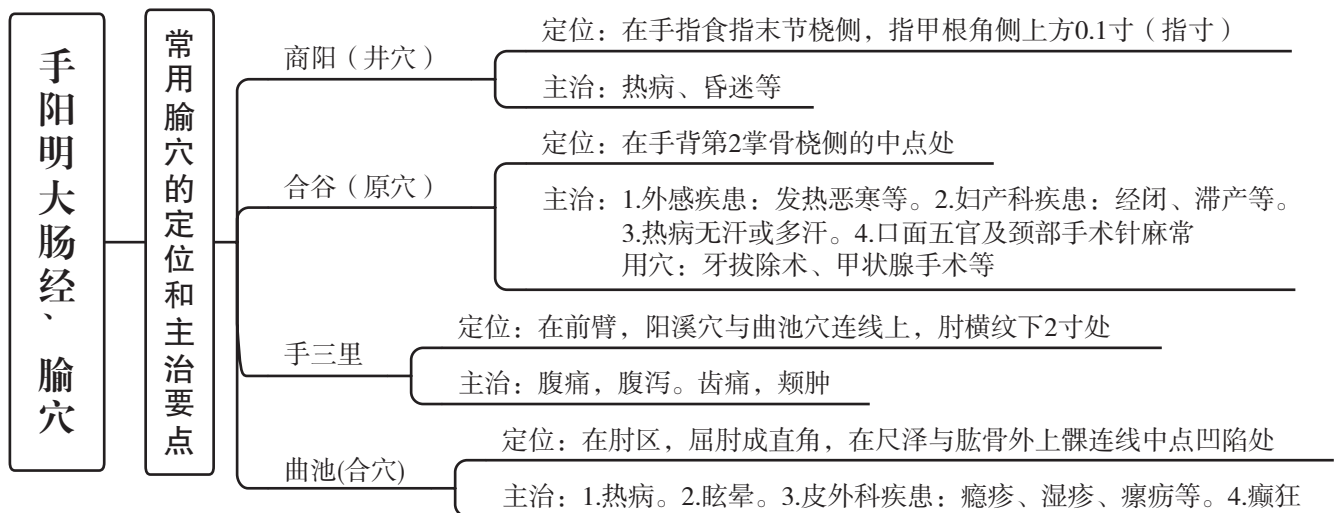
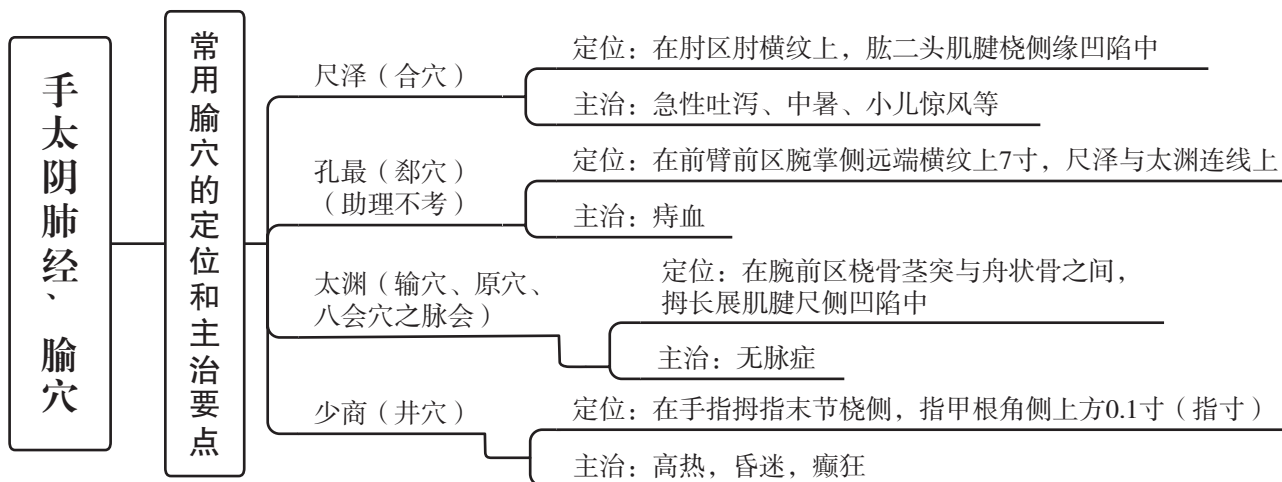
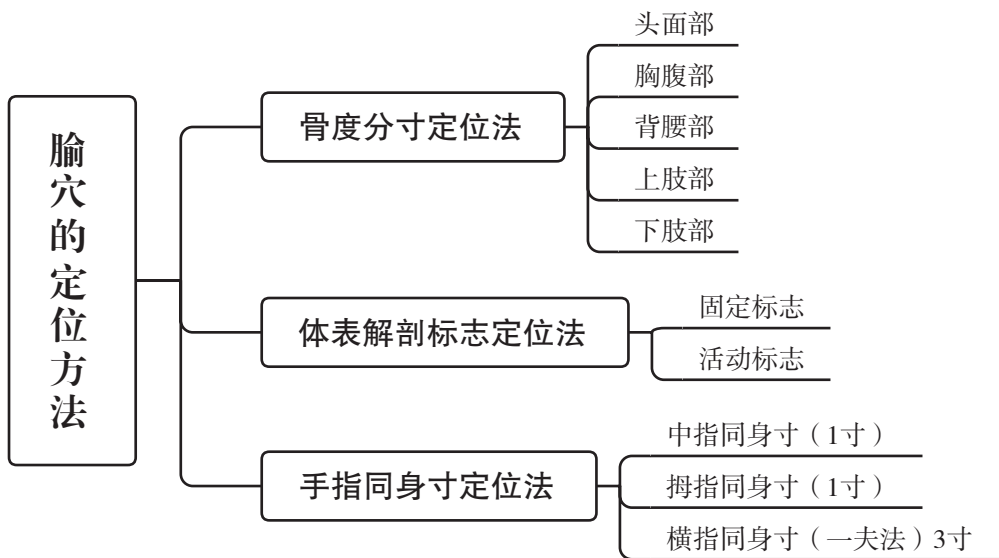


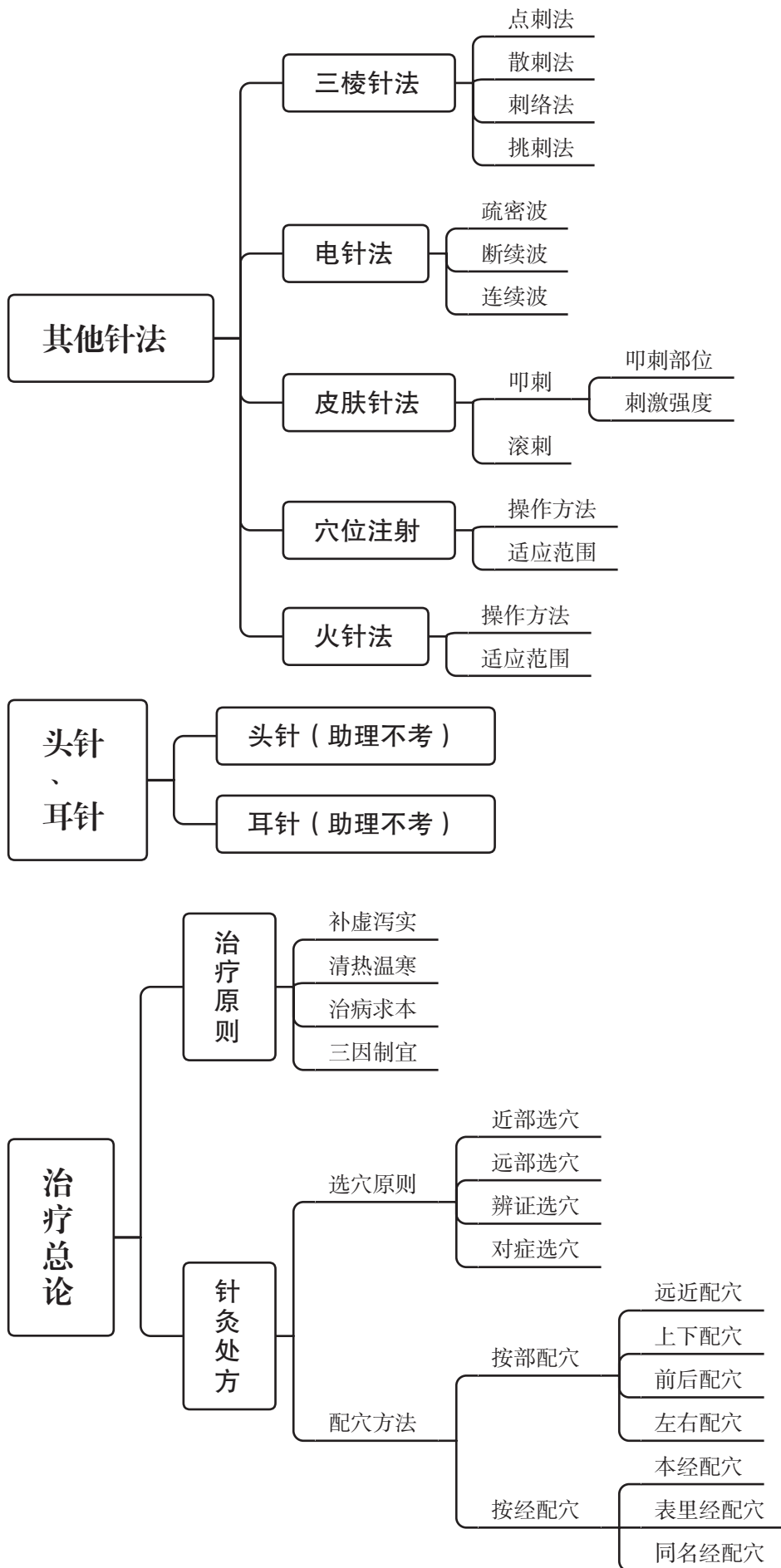


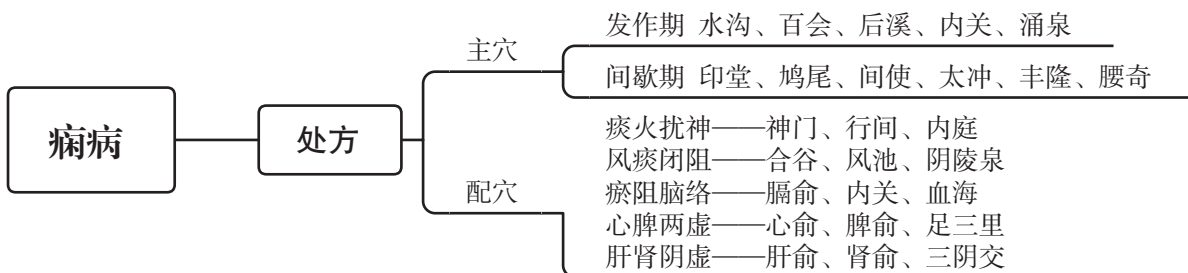
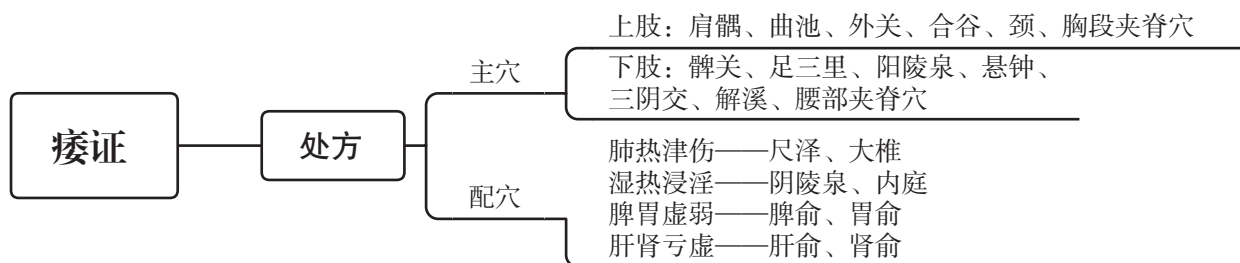
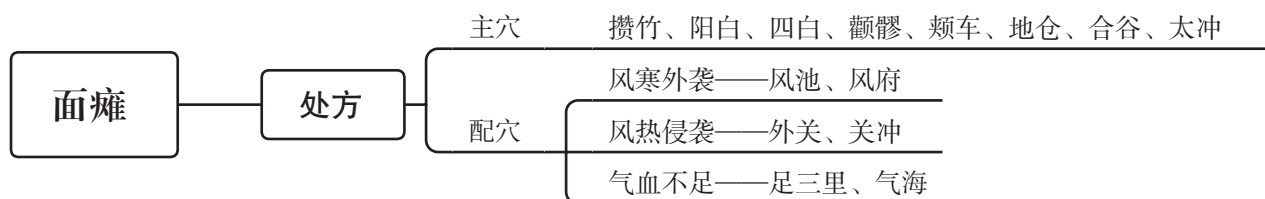
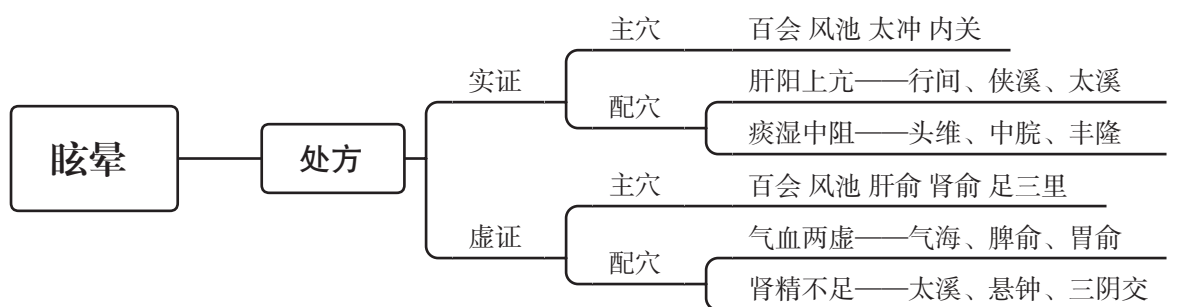


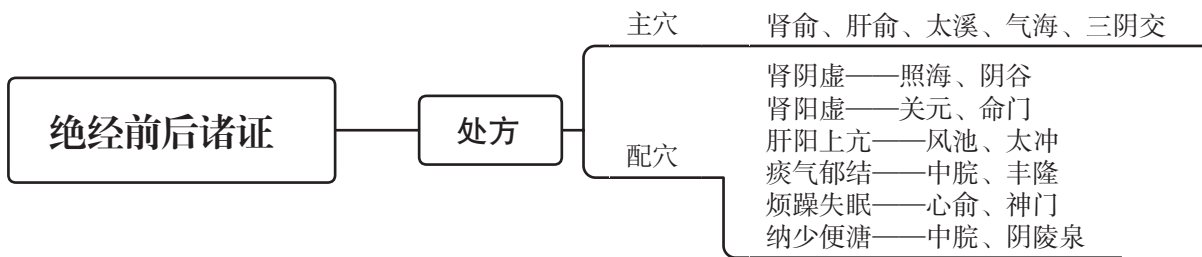
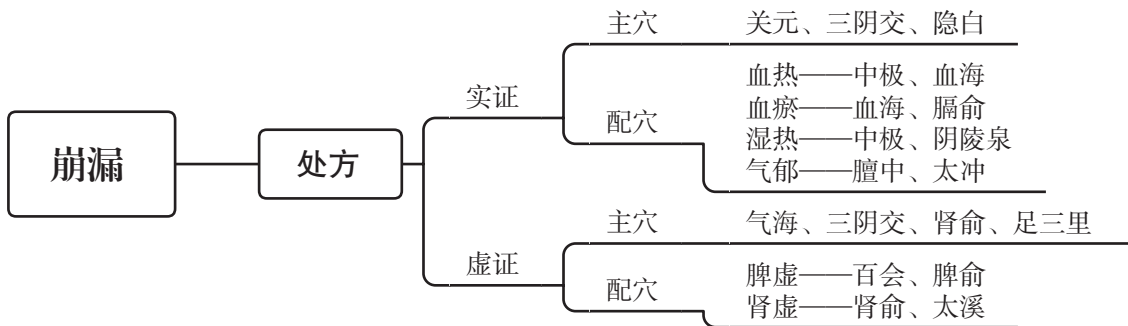
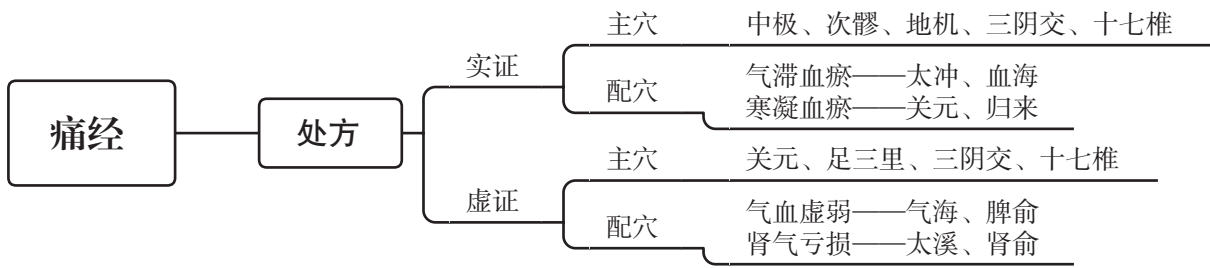
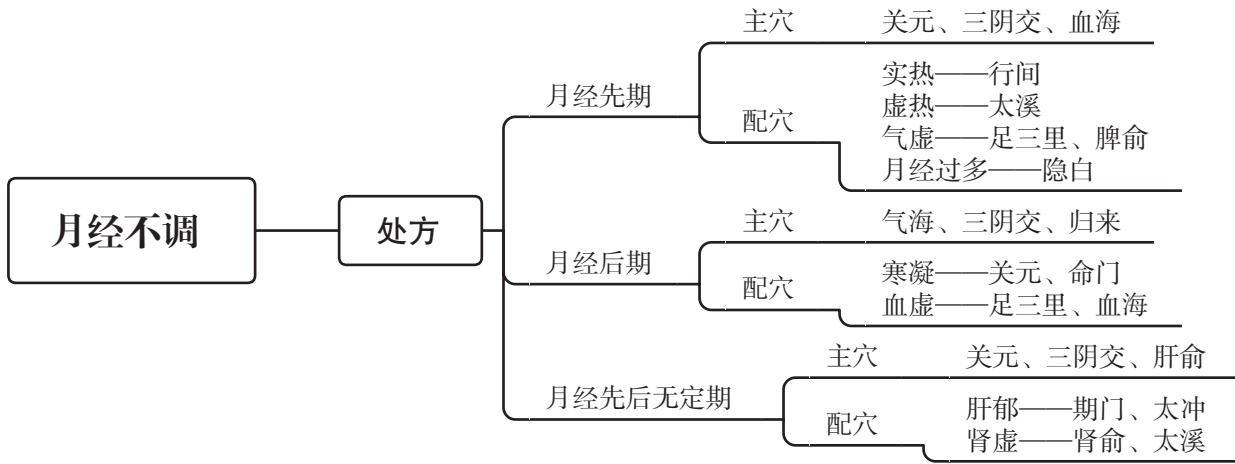


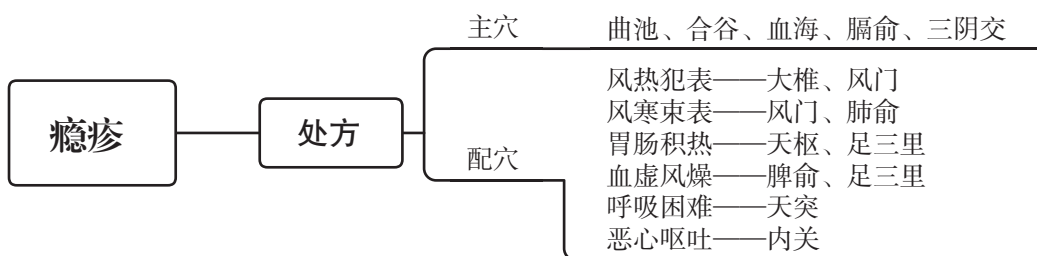
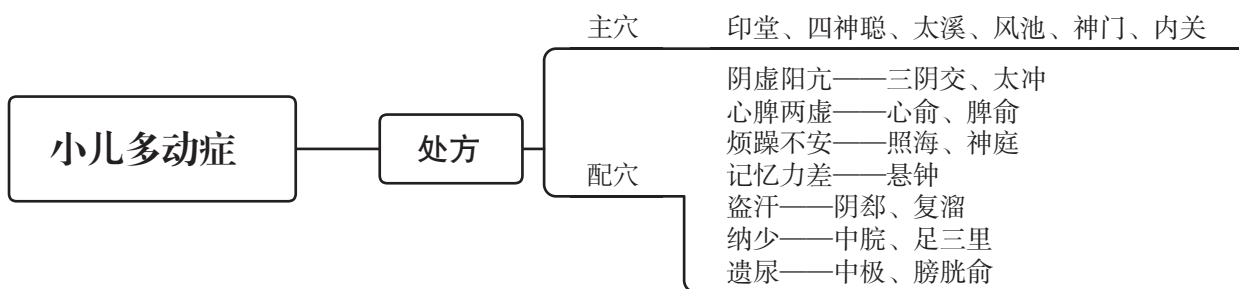
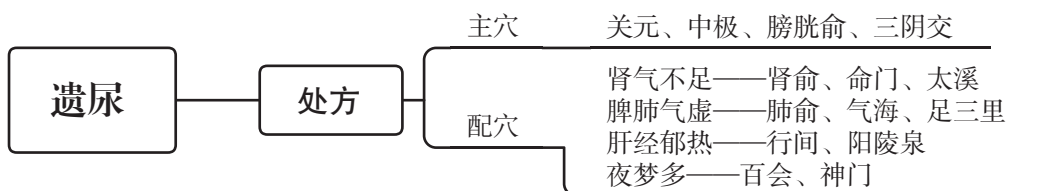
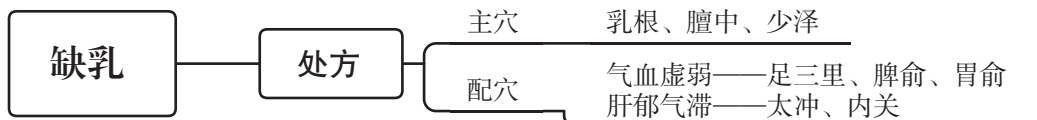
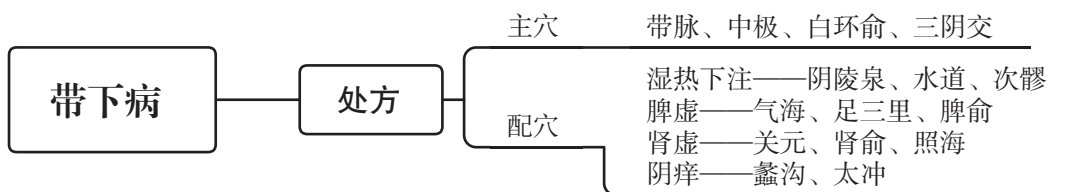


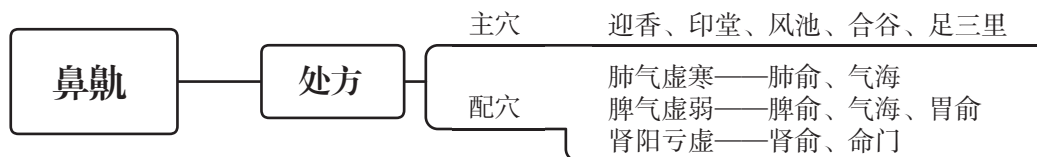
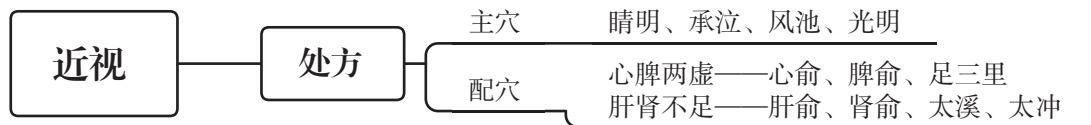
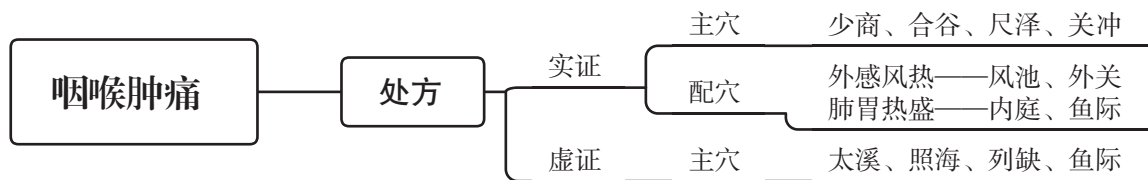
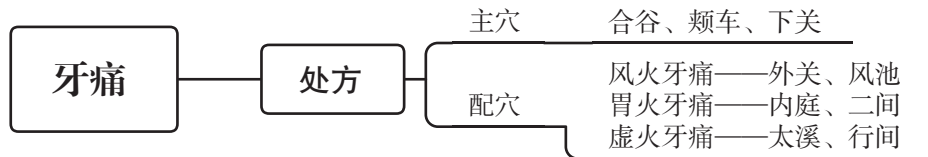
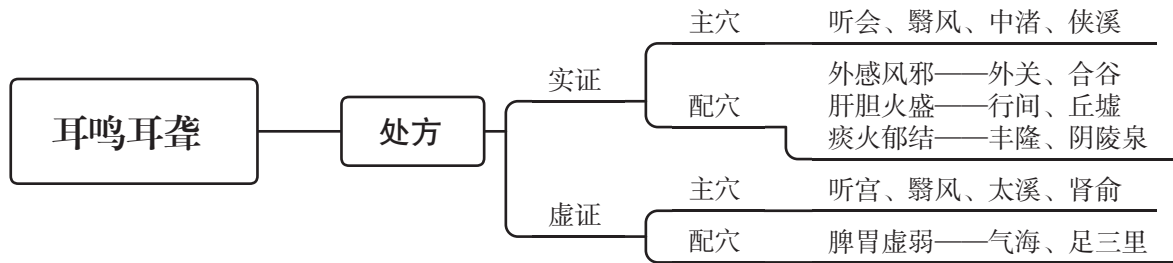
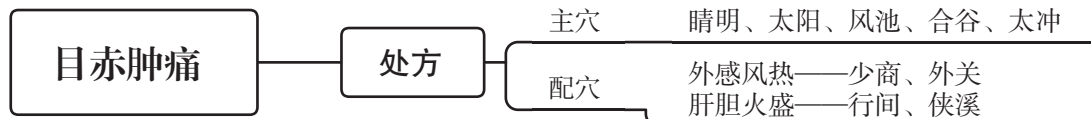


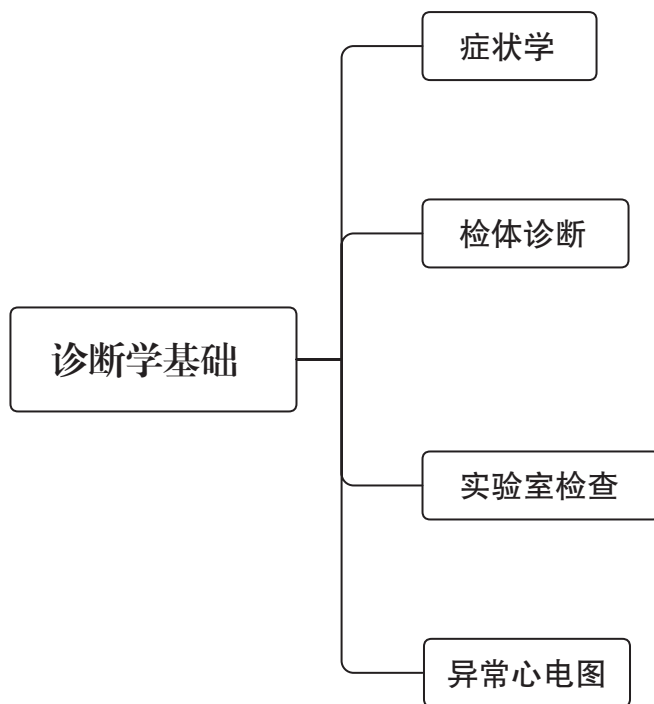


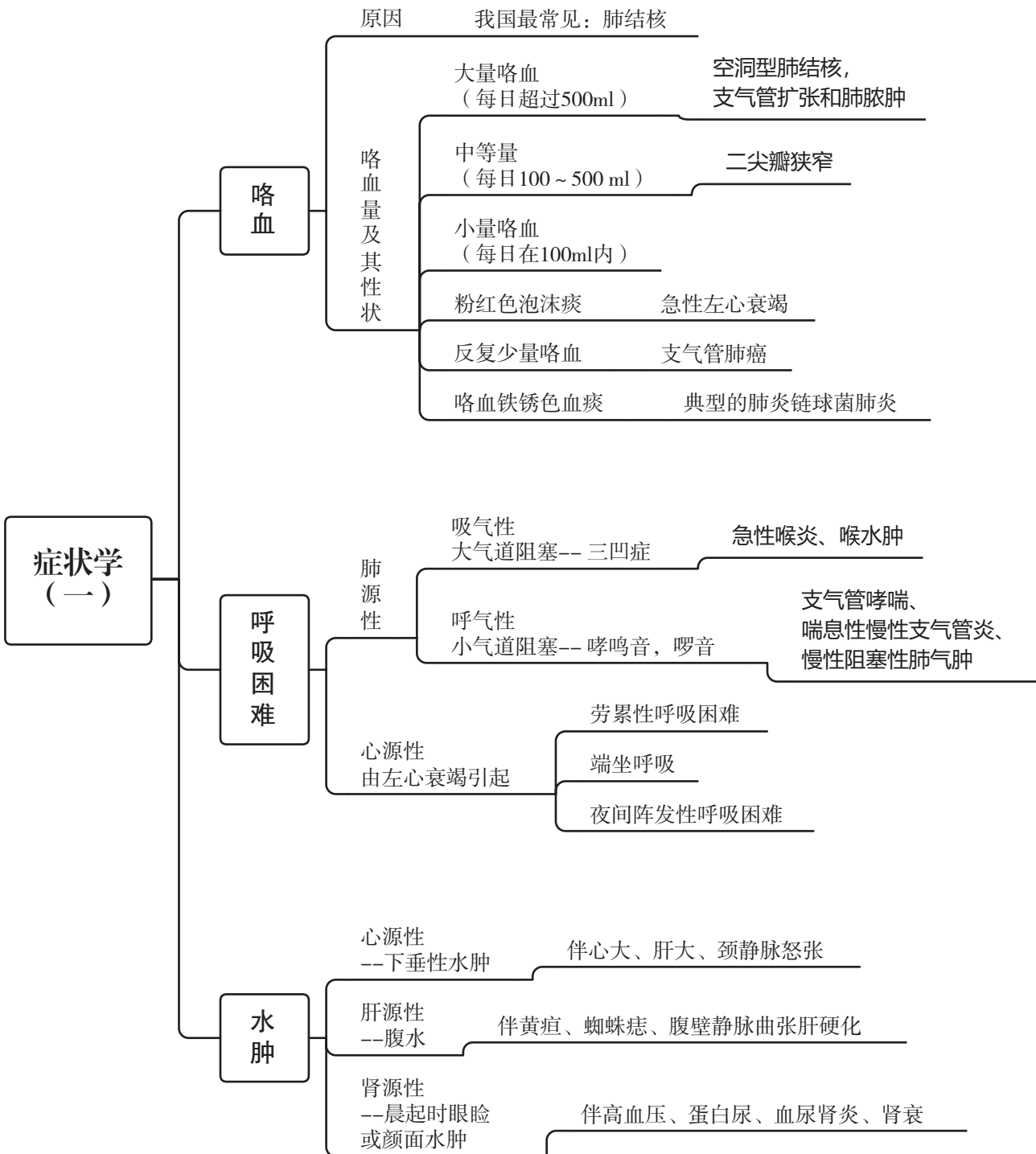


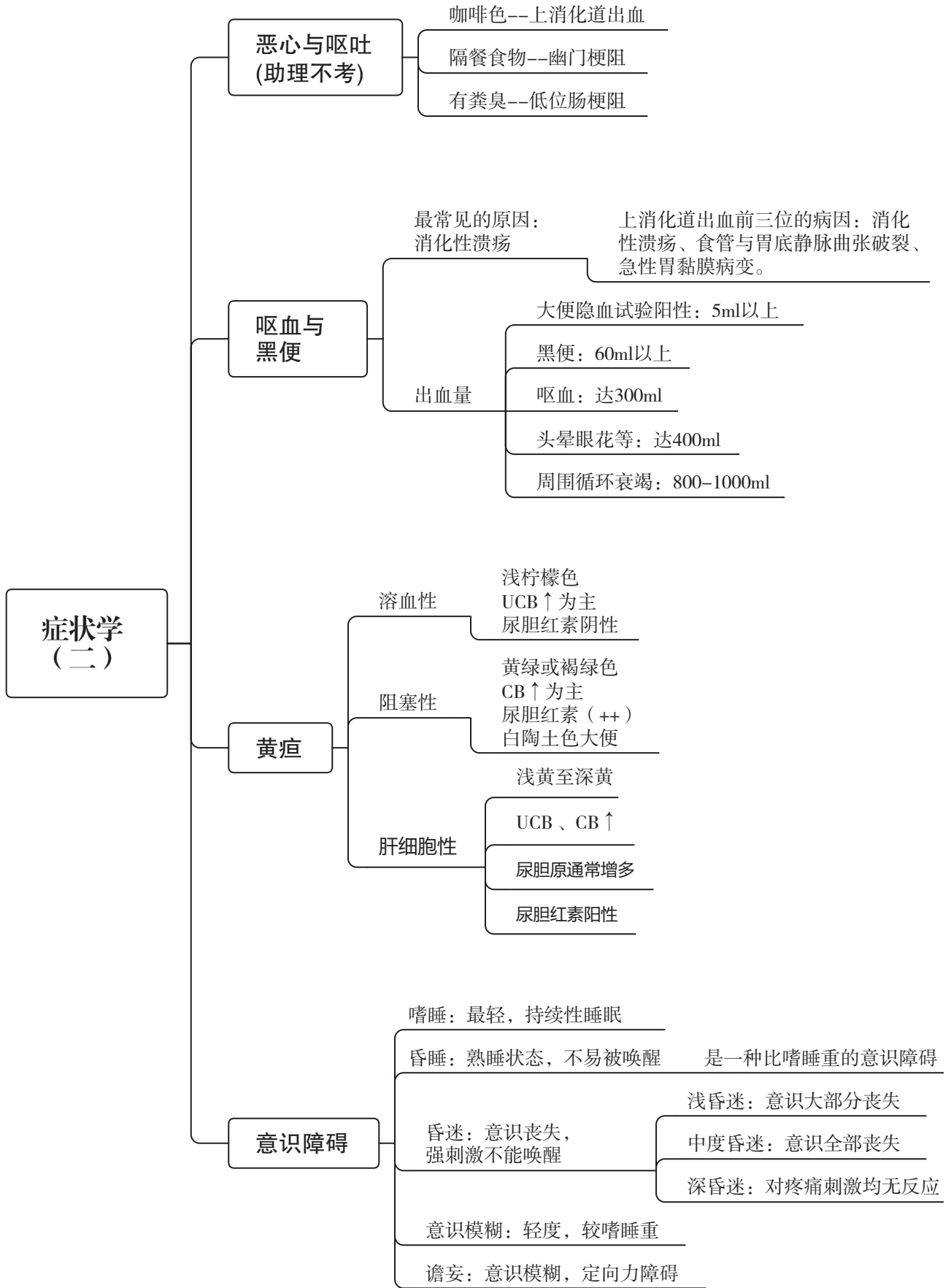


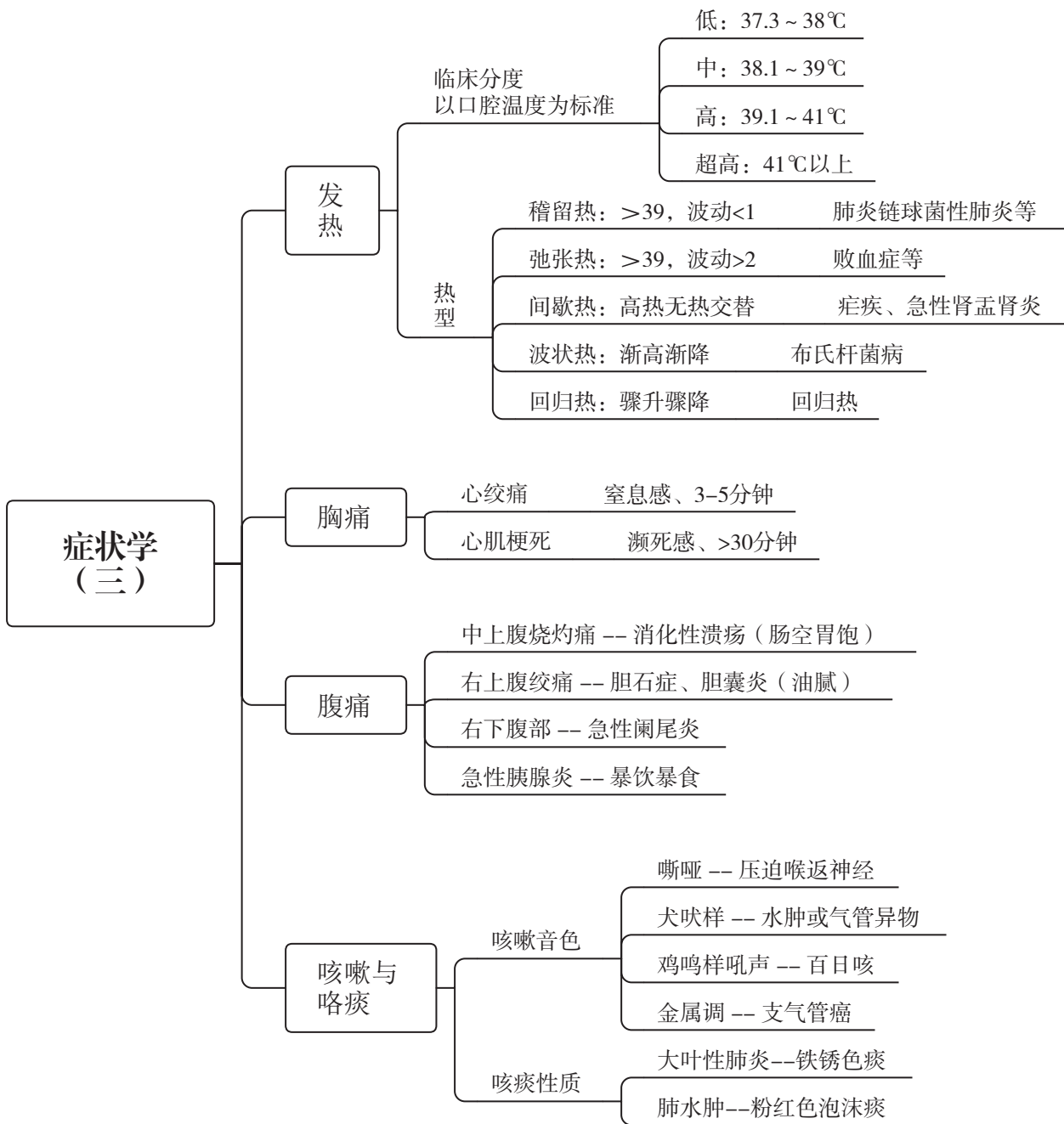


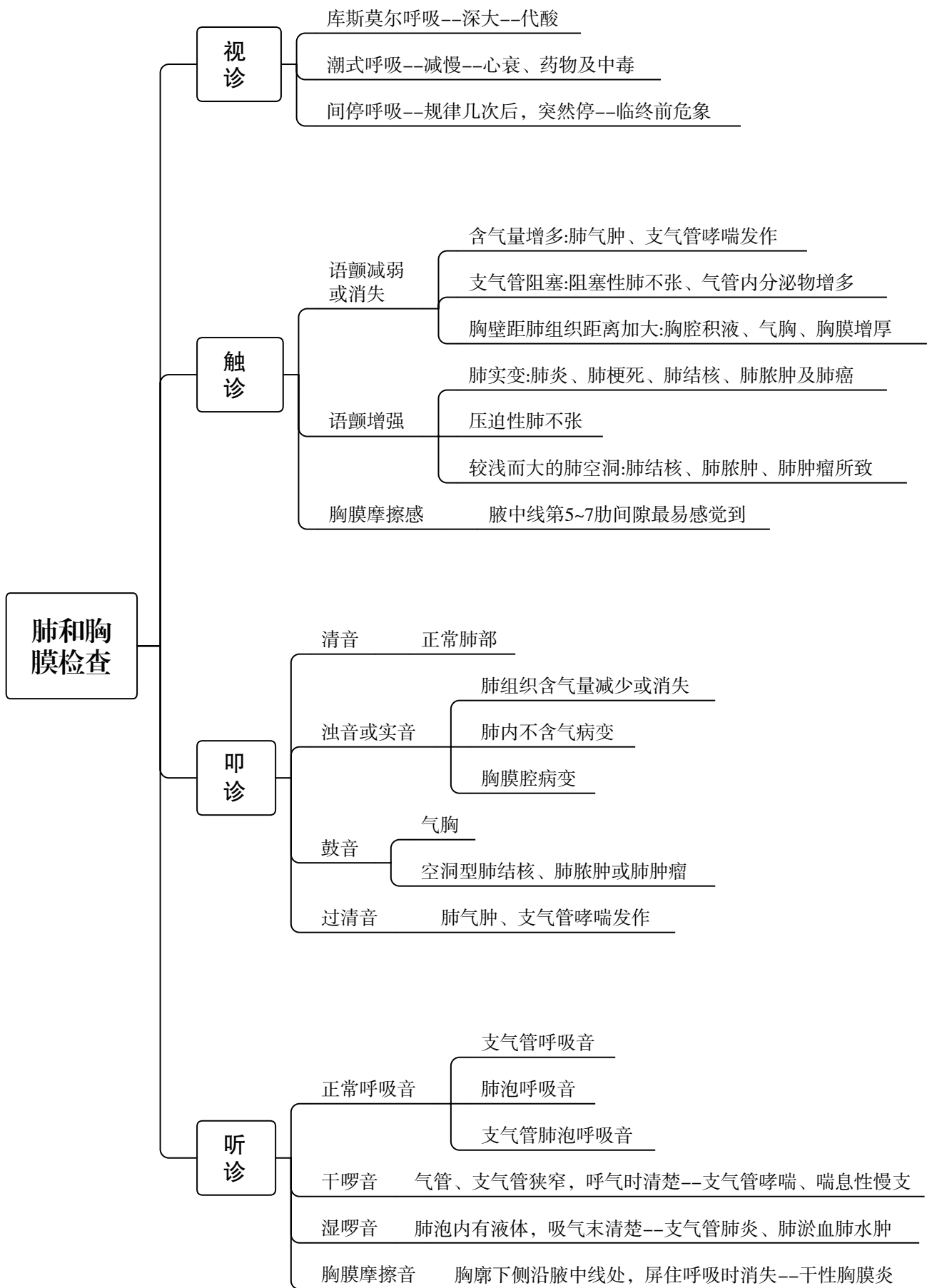


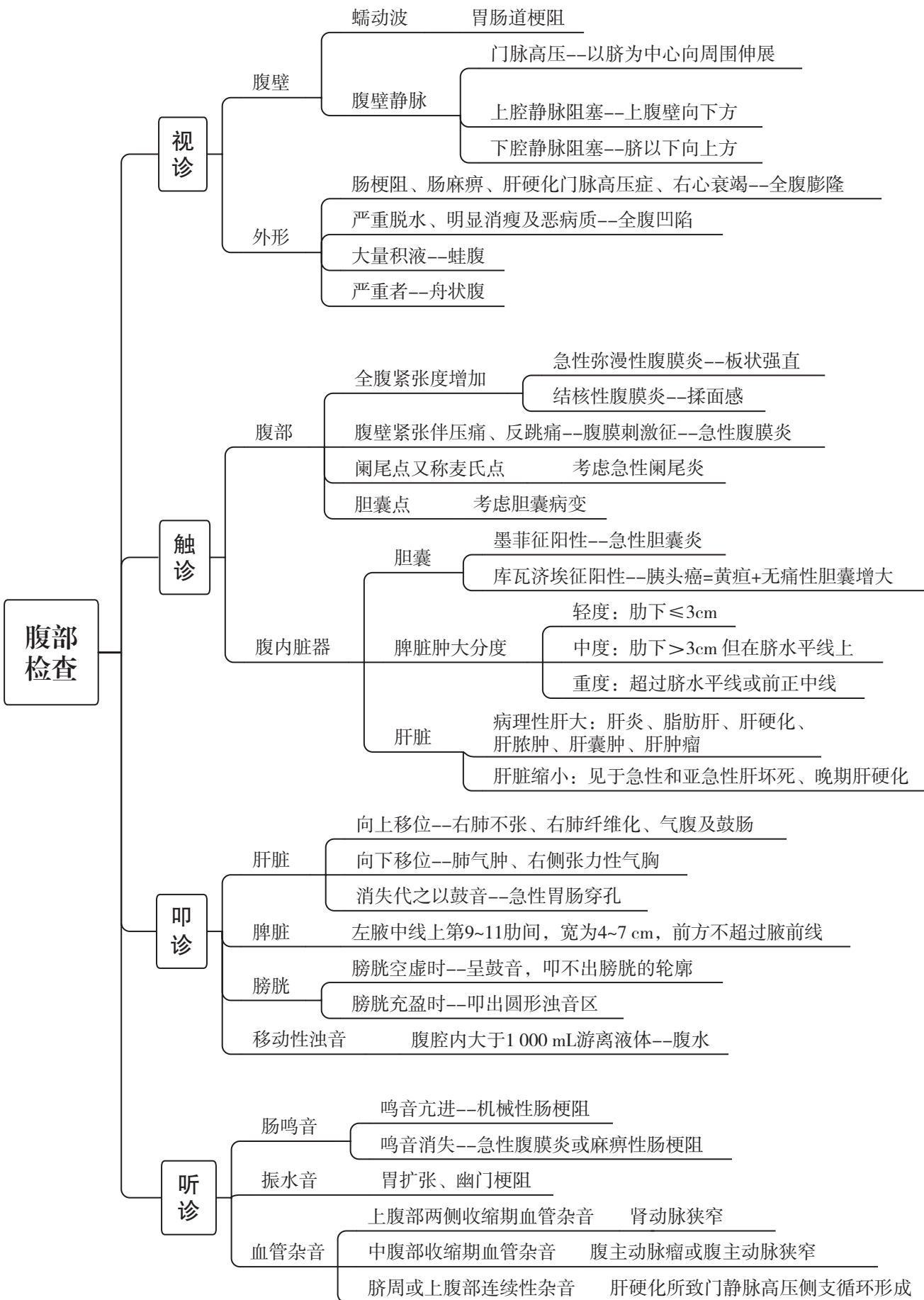


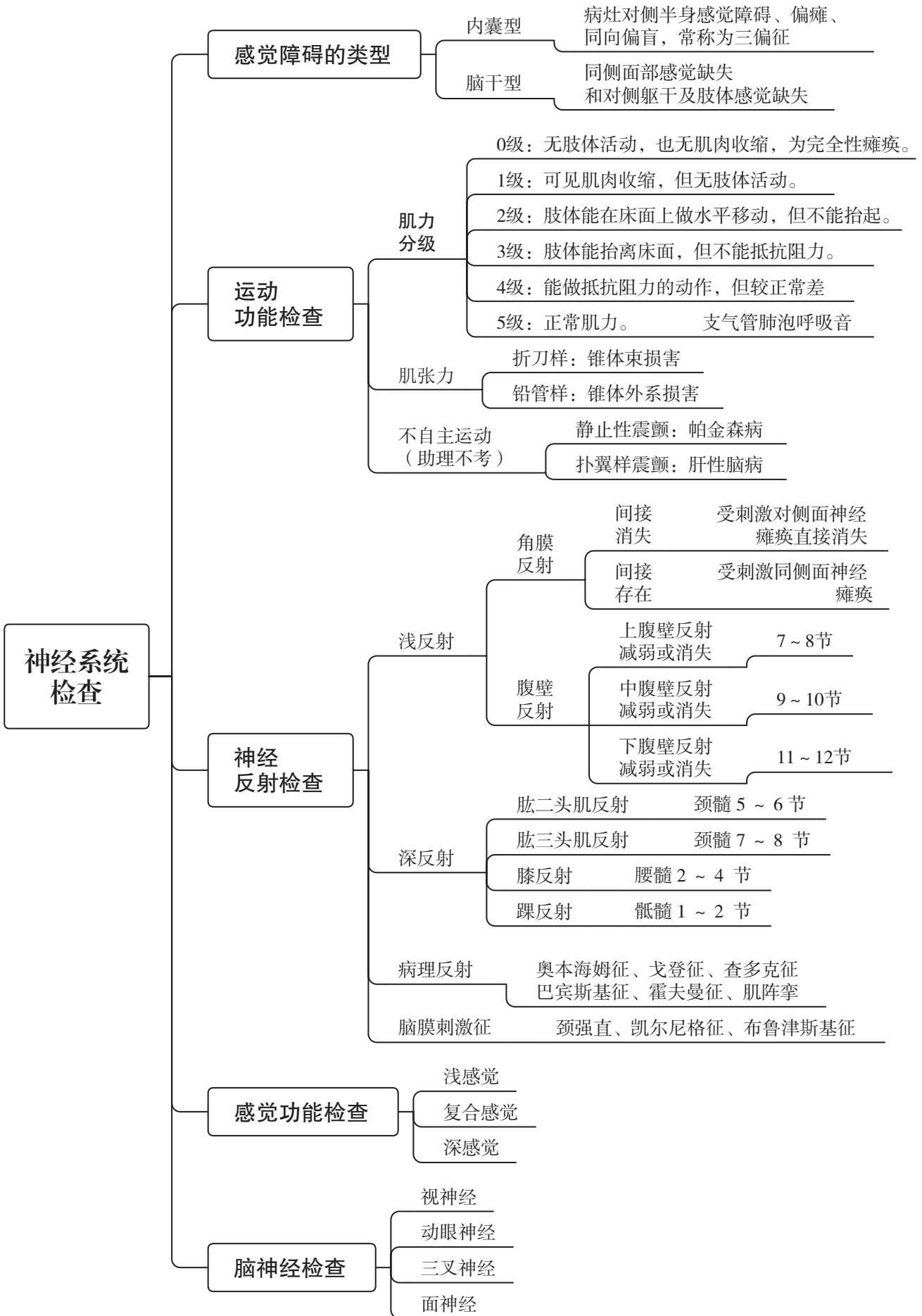




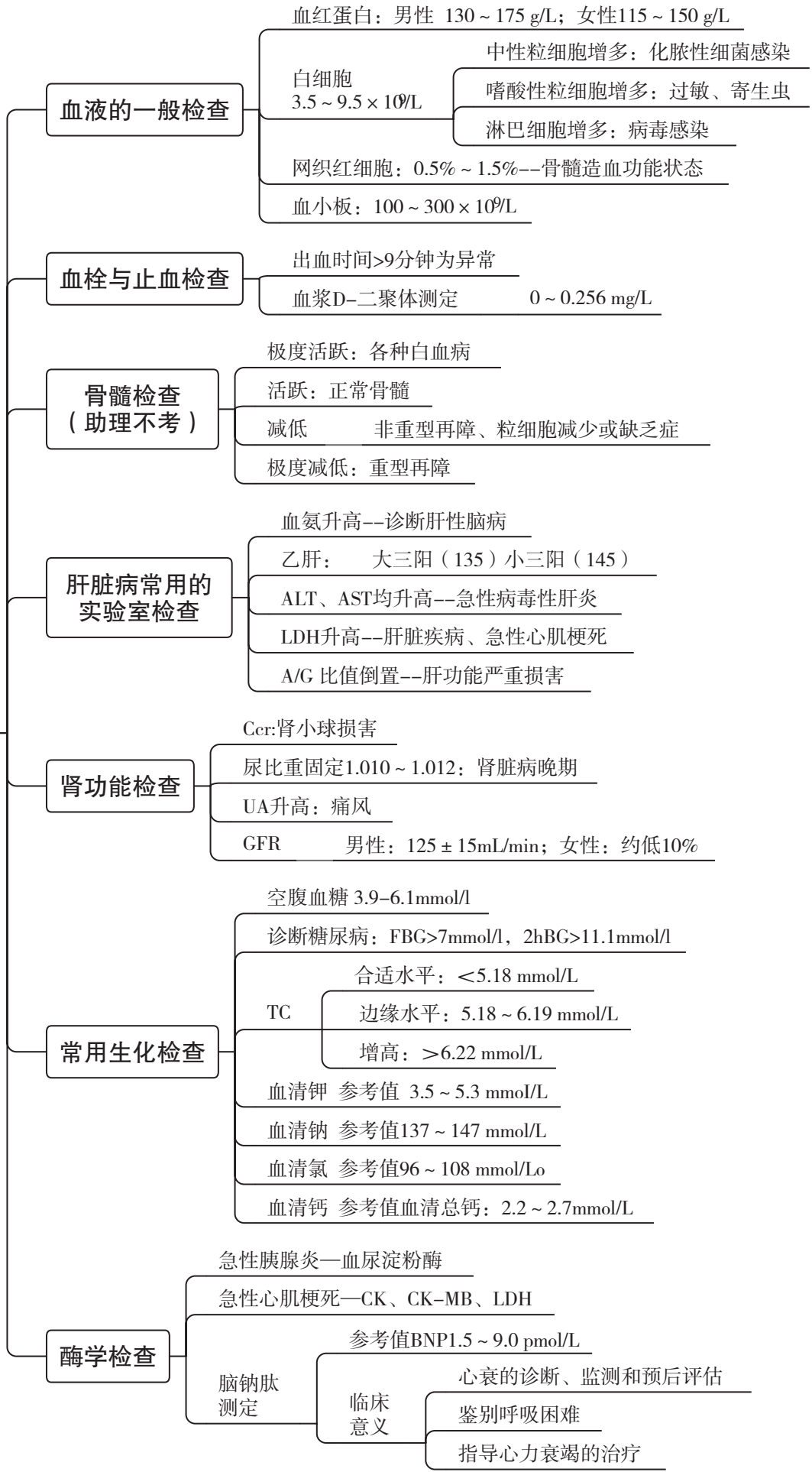


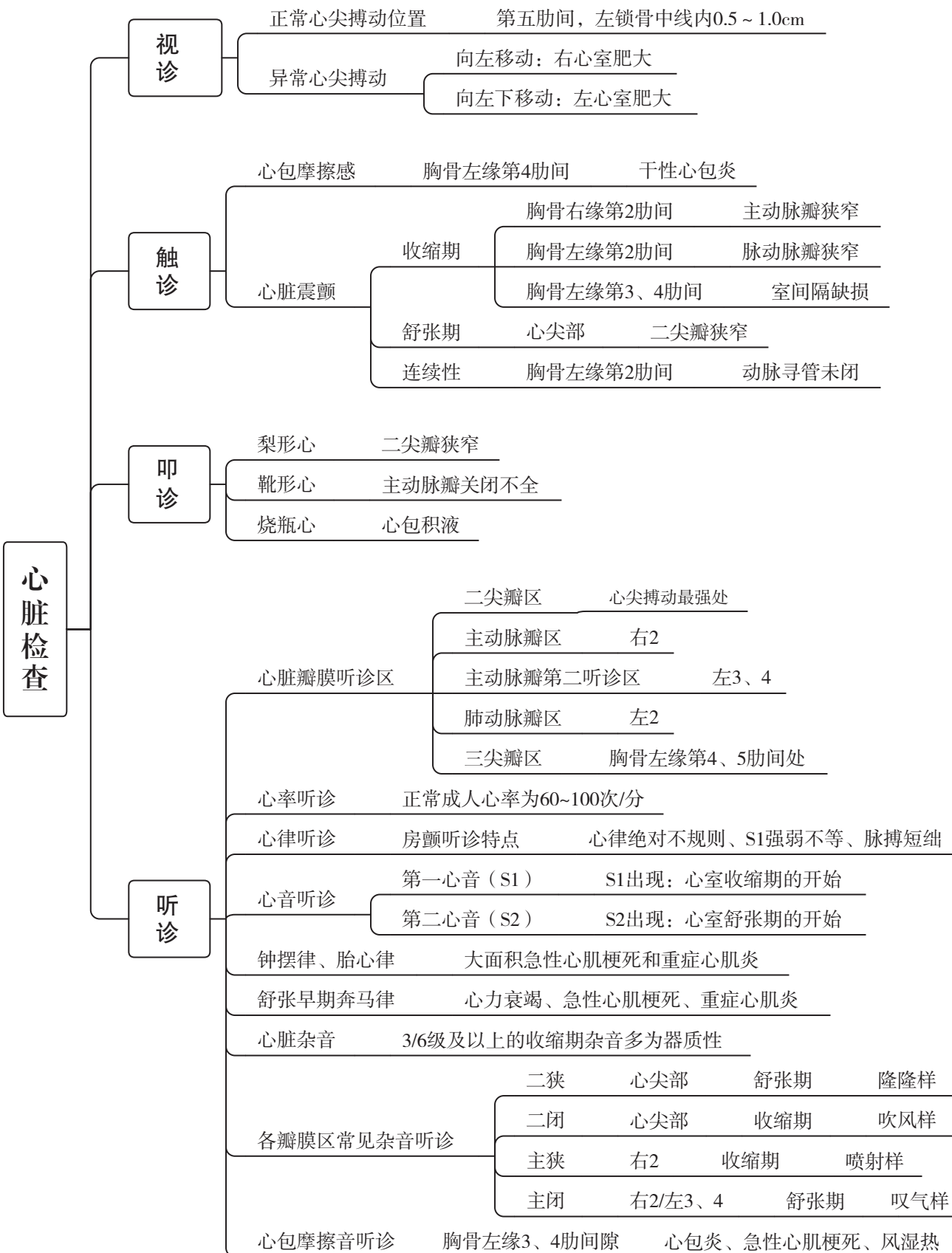


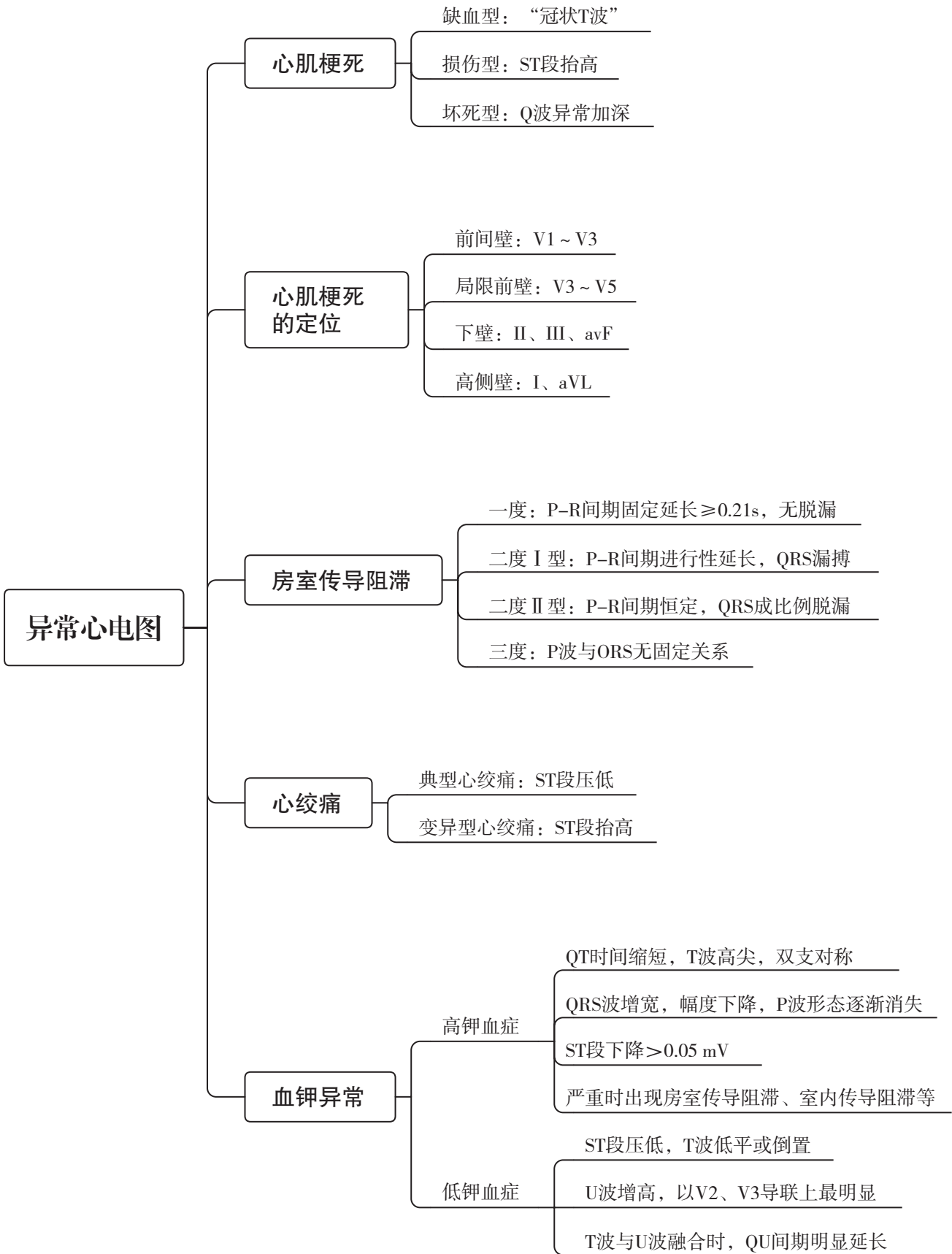


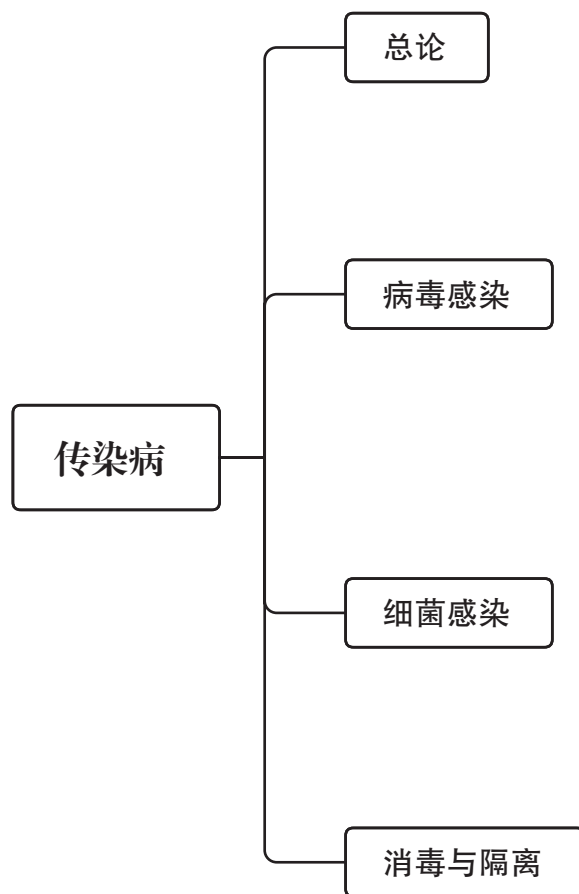


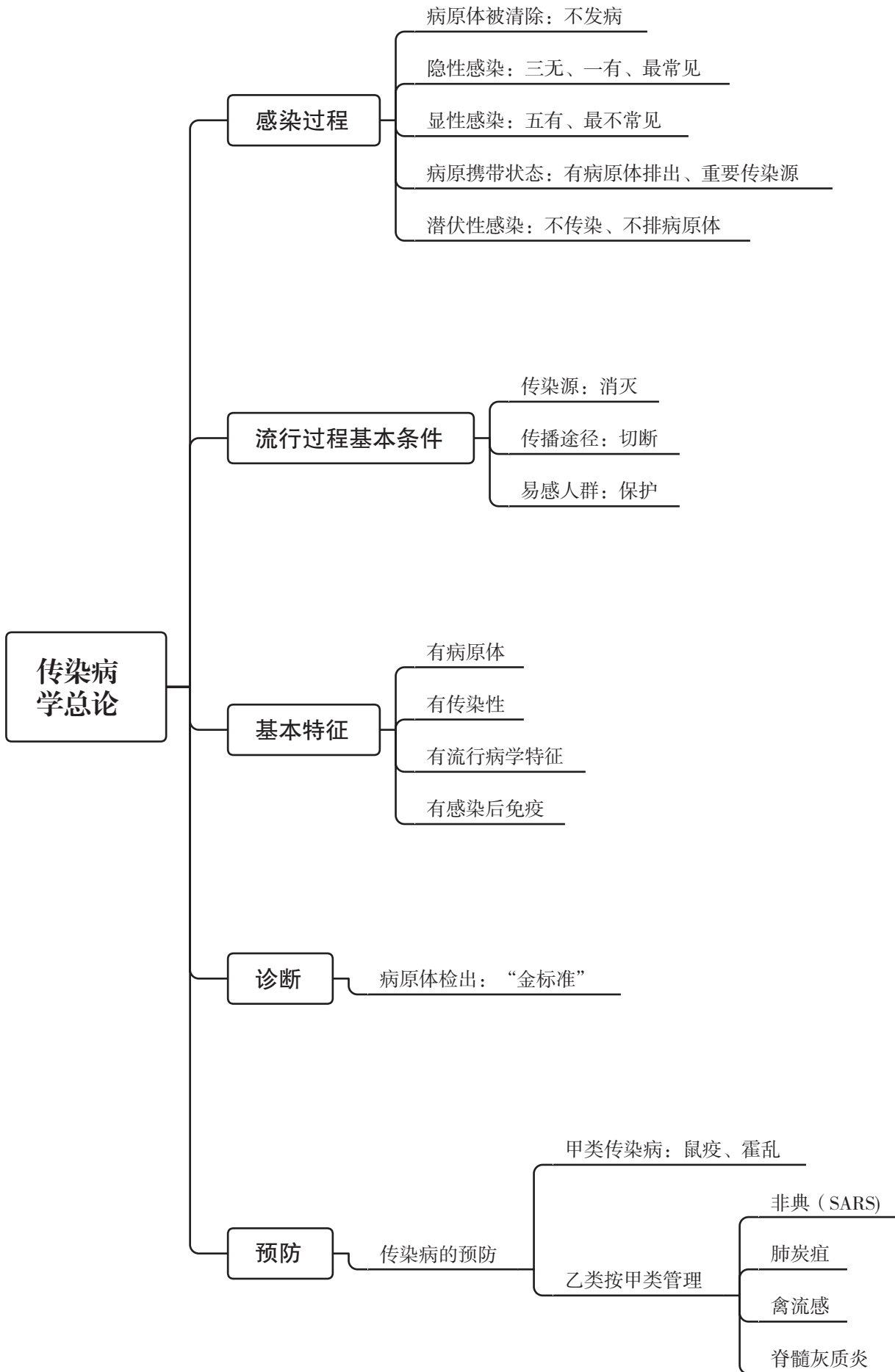
实验室诊断

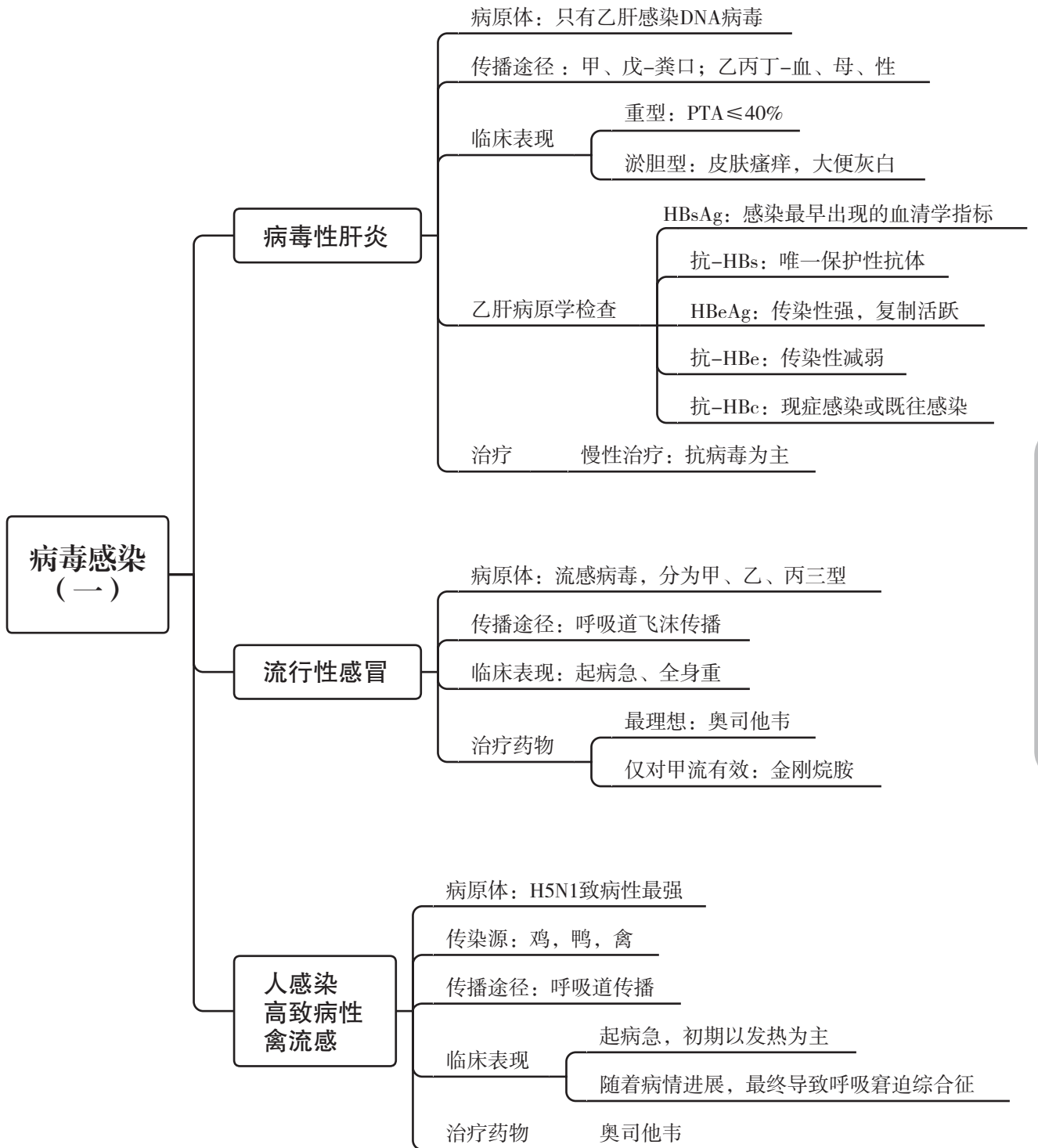


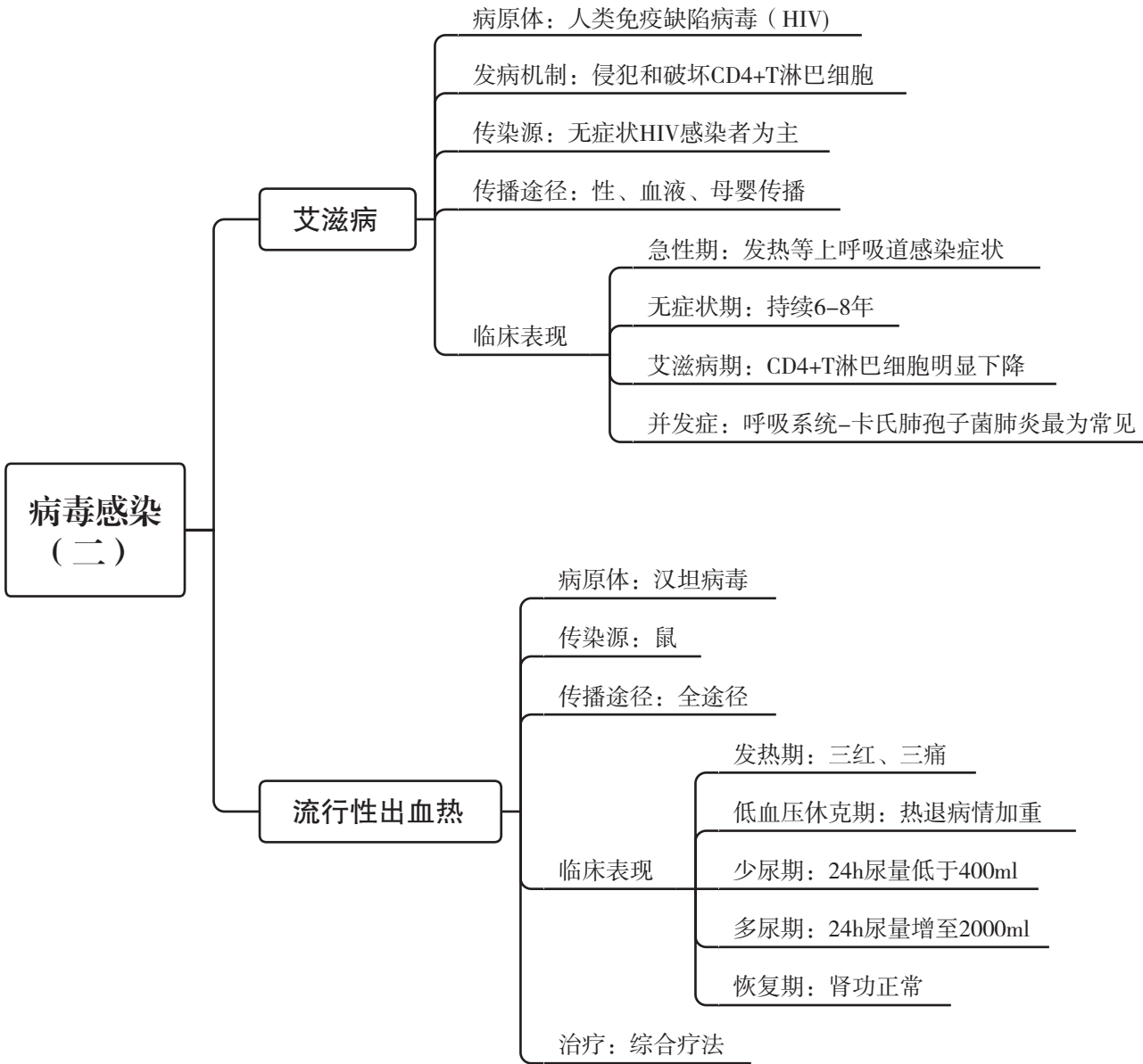


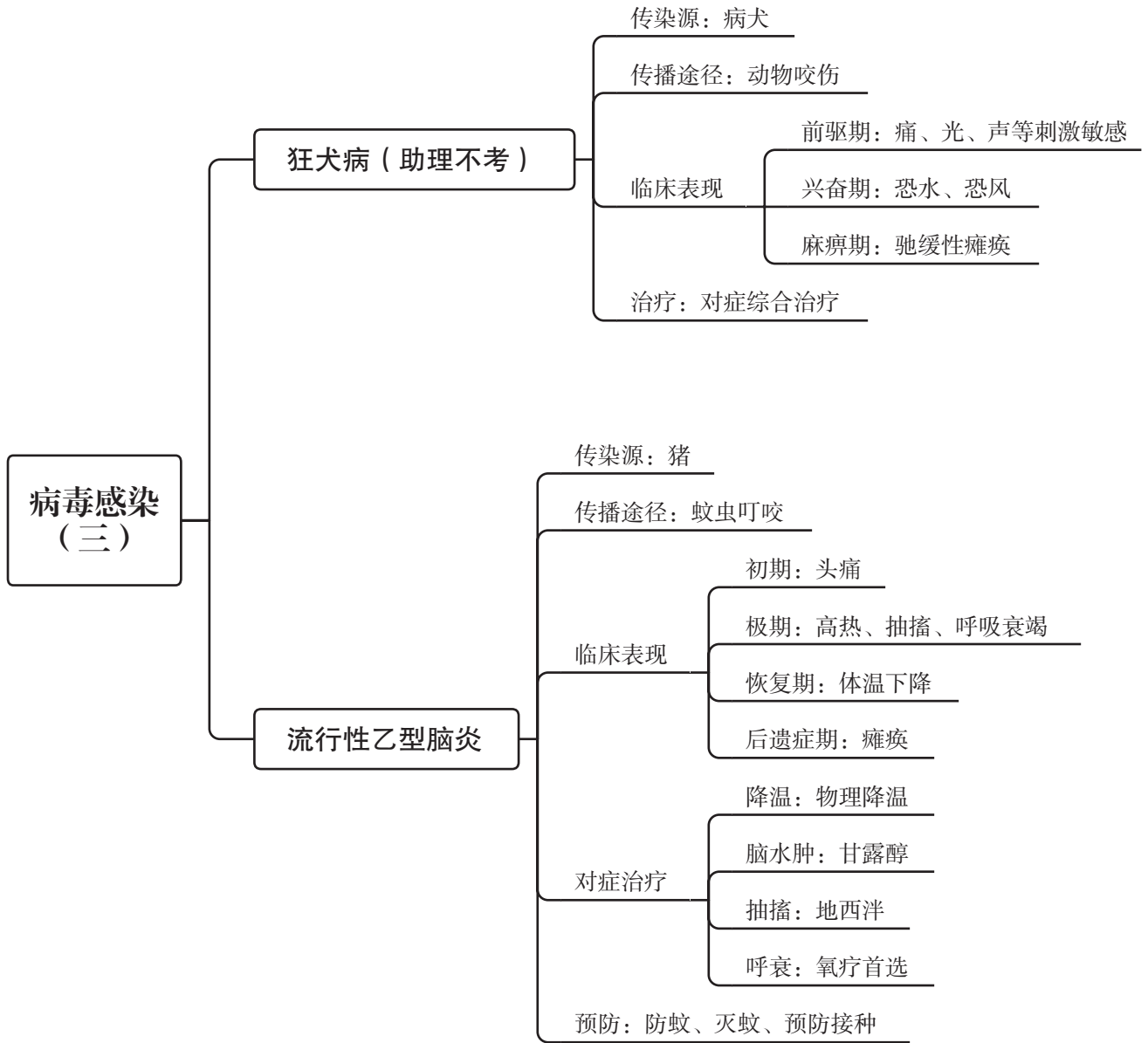


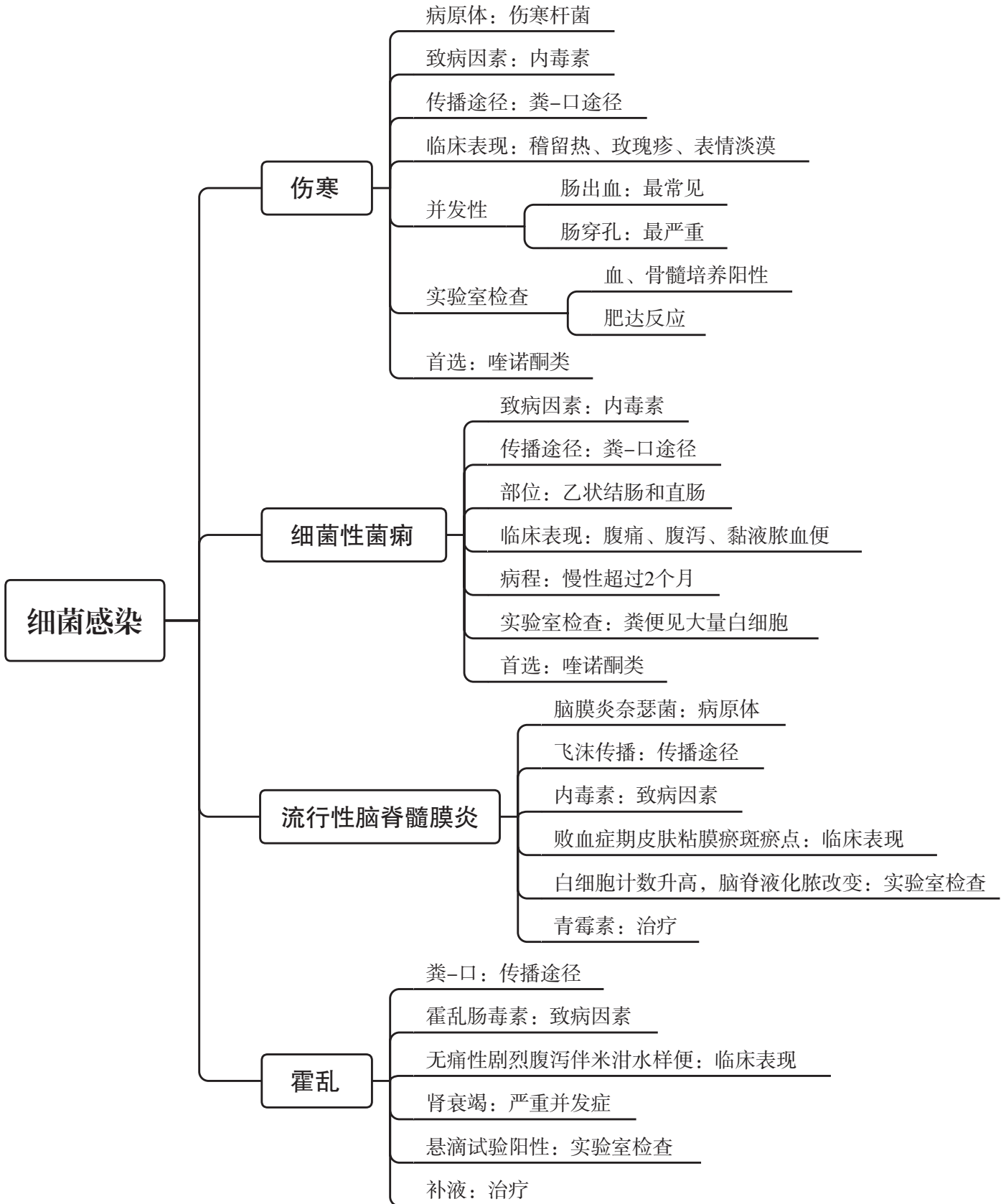


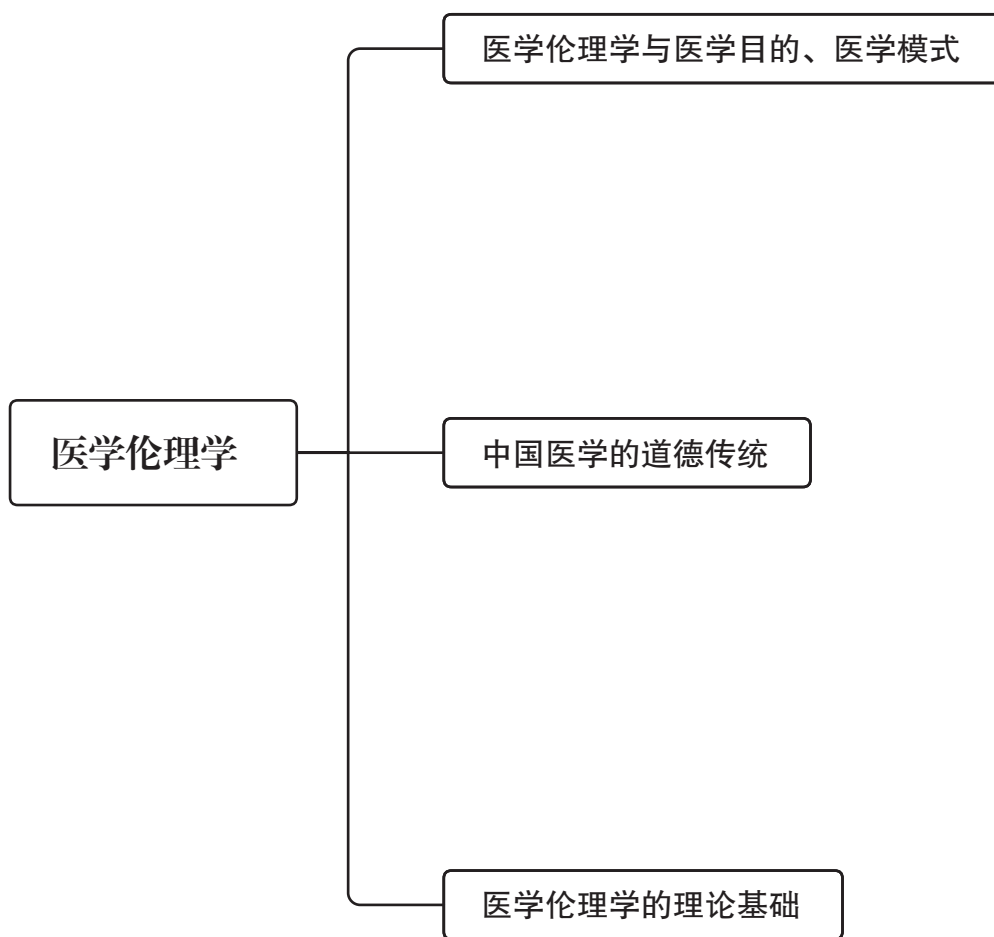


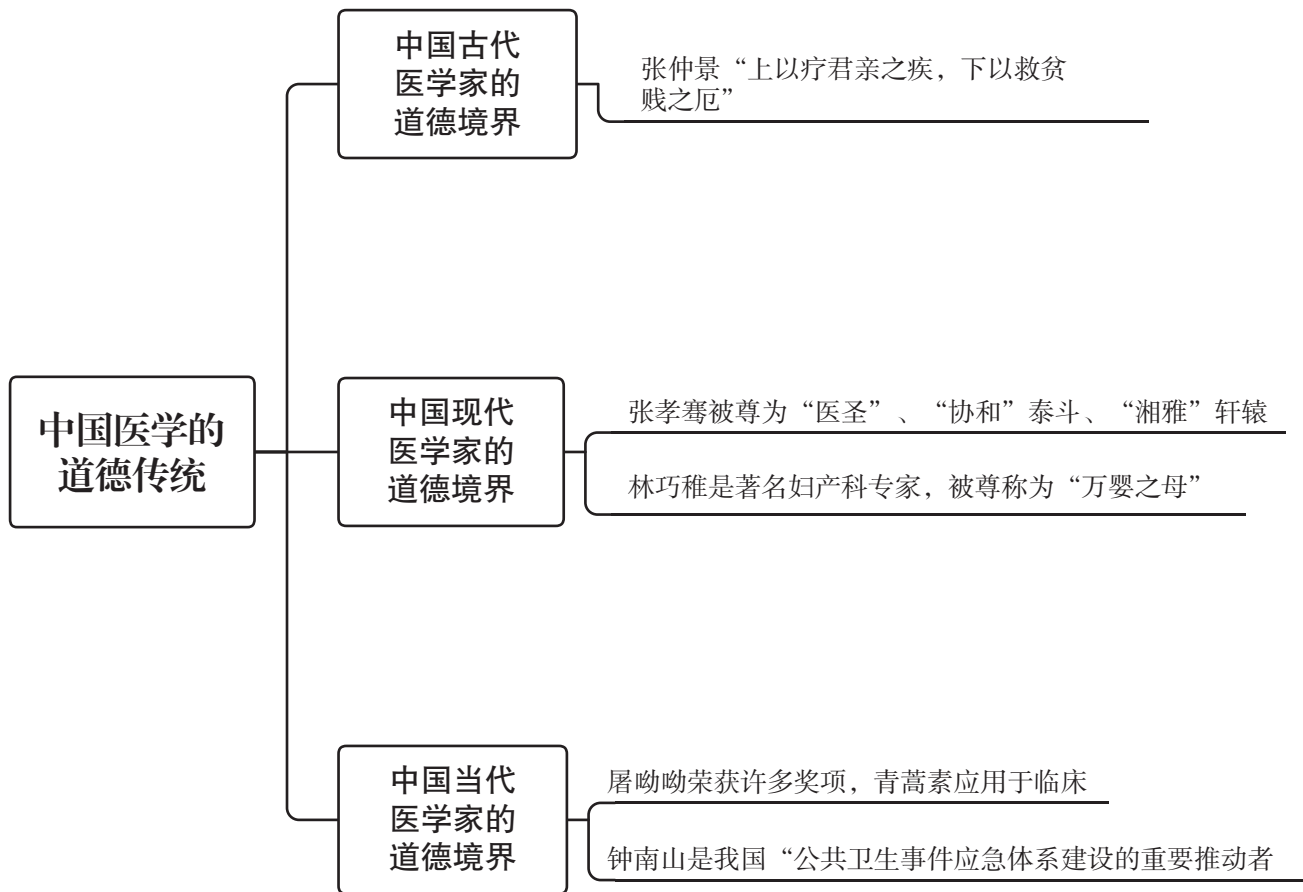
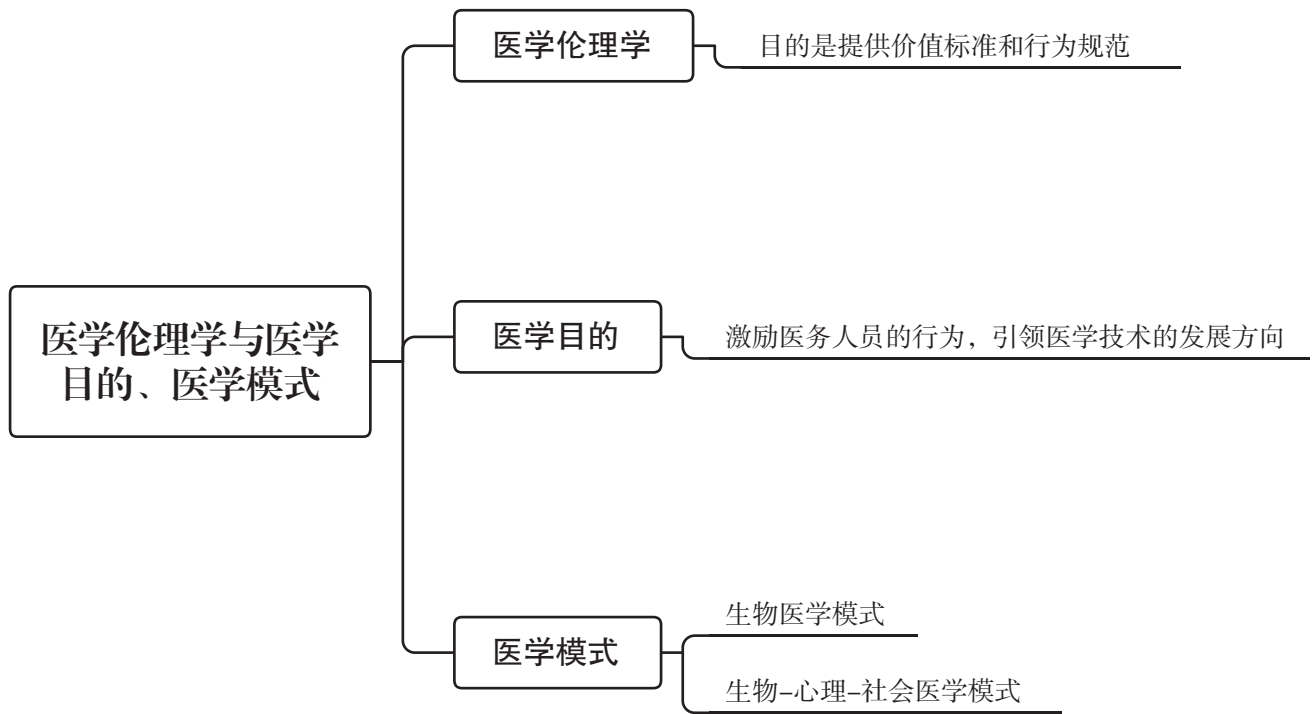












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医学伦理学的理论基础

