

## How to increase testing speed

Yu.N. Orlov

% H% (Rostov-on-Don, Russia)

When testing a patient, a doctor is faced with a problem: to test everything that is necessary to have a complete picture of the patient's problems, and at the same time spend many hours, without a guarantee that he will "see" everything, or look only part of the problems, but at the same time reduce the time.

We know that testing is an enumeration of all pointers necessary in a given situation. And there are so many of them that until you carry out this enumeration, you will lose a lot of time (we do not consider here very good algorithms with excellent output results G. Andreichenko (Vorkuta), A. Kudaeva (Rostov-on-Don) and other authors; each author has the right to his own worldview).

We all know that it is necessary to test no more than 2-3 pointers so that these pointers do not influence each other. In addition, we know the dogma that pointers with different signs (for example, anabolism and catabolism, or acidity and alkalinity), when connected together, neutralize each other, and then testing gives nothing (although there is a problem).

We decided to double-check this. And it turned out that everything was not so. When many pointers are connected at the same time (on a stand-alone device, these are 30 pointers, on an AIC - 99), if at least one pointer is tested, the entire list gives a positive indication. In this case, you can find this index by testing this list consistently, breaking it down into large groups. In very rare cases, it may be that the list gives a positive indication, but inside the list we do not find an indication. But - I repeat - this is very rare. But on the contrary (i.e., there is no positive result, but in fact there is an organ with a deviation on the list) - in our practice there was no (number of patients - 79).

The use of a complex summary indicator (KSU) accelerates the survey even more (see the article "On old indicators in a new light" in this collection). Testing the list of medicines through the KSU allows you to significantly increase the testing speed, and with very high reliability.

Statistics are still small, and further research is required. But even preliminary data allow us to say that the proposed technique significantly speeds up the examination of patients.

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